



WhatWorks
TO PREVENT VIOLENCE



WHAT WORKS TO PREVENT VIOLENCE AGAINST WOMEN AND GIRLS: RESEARCH AND INNOVATION PROGRAMME

THEMATIC PAPER 3: INNOVATION

**Innovation in What Works:
Can positive pathways to prevention be identified?**

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Thematic Paper 3: Innovation in What Works – Can Positive Pathways to Prevention be Identified?

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About What Works: The What Works to Prevent Violence against Women and Girls programme is a flagship programme from the UK Department for International Development, which is investing an unprecedented £25 million over five years to the prevention of violence against women and girls. It supports primary prevention efforts across Africa and Asia that seek to understand and address the underlying causes of violence, and to stop it from occurring. Through three complementary components, the programme focuses on generating evidence from rigorous primary research and evaluations of existing interventions to understanding What Works to prevent violence against women and girls generally, and in fragile and conflict areas. Additionally, the programme estimates social and economic costs of violence against women and girls, developing the economic case for investing in prevention.

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ACRONYMS AND ABBREVIATIONS

ADB	Asian Development Bank
AM	Adaptive Management
ASMs	Annual Scientific Meetings
C1	Component One
C2	Component Two
C3	Component Three
C4	Component Four
CD	Capacity Development
CIDA	Canadian International Development Agency
COMBAT	Community Based Action Teams
CoP	Community of Practice
CRC	Convention on the Rights of the Child
DFID	Department For International Development
DVC	Domestic Violence Coalition
ECMP	End Child Marriage Programme
FE	Final Evaluation
FGM/C	Female Genital Mutilation / Cutting
GBV	Gender Based Violence
IE	Independent Evaluation
IRC	IRC-Rescue
ISSER	Institute of Statistical, Social and Economic Research
KAIs	Key Actor Interviews
MTR	Mid-Term Review
NGOs	Non-Governmental Organisations
NORAD	Norwegian Aid (Development Assistance)
NRs	National Researchers
OCOF	One Community, One Family Project
PCR	Programme Completion Report
PIGDs	Participatory Interest Group Discussions
PP	Positive Pathway(s)
PPA	Positive Pathways Analysis
QA	Quality Assurance
RCTs	Randomised Control Trials
RIs	Research Institutions
RU	Research Uptake
RUPRs	Research Uptake Progress Reports
SAHAJ	Strengthening Access to Holistic, Gender Responsive, & Accountable Justice in Nepal
SA MRC	South Africa Medical Research Council
SASA!	Kiswahili word meaning 'now'
SHARPZ	Serenity Harm Reduction Programme Zambia
SVRI	Sexual Violence Research Initiative
TAs	Technical Advisors
ToC	Theory of Change
ToRs	Terms of Reference
UNDP	United Nations Development Programme
VAWG	Violence Against Women and Girls
VfM	Value for Money
VPF	Violence Prevention Forum

VSO Voluntary Service Overseas

WW-VAWG What Work to end Violence Against Women and Girls Programme

1 INTRODUCTION

1.1 OVERVIEW

This is Thematic Paper 3 in a series of papers being produced by the Independent Evaluation (IE) Team of the DFID-funded What Works to Prevent Violence Against Women and Girls (WW-VAWG) Research and Innovation Fund, as the portfolio of evaluation activities draws to a close. The WW-VAWG is a multi-year, multi-component research and evidence programme focused on identifying ways to eliminate VAWG¹.

Box 1: The What Works to Prevent VAWG Programme

The £25.3 million WW-VAWG Programme (2014-2019), was funded by the UK Department for International Development (DFID), and implemented in 13 countries across the world. It was intended to build the evidence base on what works to prevent VAWG in low-middle income settings. The programme had the following aims:

- **Impact:** Improved policies and expanded programmes to reduce the prevalence of VAWG and increase the number of women and girls receiving quality prevention and response services in at least 10 DFID priority countries.
- **Outcome:** Improved investment in VAWG policies and programmes across the Global South.

The delivery of these objectives were carried out through three separate but interrelated components, with learning between them led by the South Africa Medical Research Council (SA MRC). The three components all fed into wider goals around reducing poverty and social inequalities, which are known to trigger VAWG (though poverty is not an automatic driver):

- **Component 1 (C1)** was led by SA MRC. It originally funded 10 innovation grants to test new approaches to prevent VAWG, plus operations research and impact evaluations for 7 existing programmes across selected countries in Africa, Asia and the Middle East.
- **Component 2 (C2)** comprised research on VAWG in conflict and humanitarian emergencies. It was led by International Rescue Committee (IRC) to conduct in-depth research studies on the drivers, prevalence, trends over time and effective prevention and response mechanisms for VAWG in conflict and humanitarian emergencies.
- **Component 3 (C3)** researched on the economic and social costs of VAWG in developing countries. This component tested new methodologies to assess the economic and social costs of VAWG, through three empirical studies.
- **Component 4 (C4)** provided Independent Evaluation of the programme.

Parallel to the WW-VAWG implementation components, an independent evaluation component (C4) was commissioned in 2016, tasked with assessing the extent to which evidence is being used to inform decisions to invest in VAWG policies and programmes, in the global south. Production of the Thematic Papers forms part of the activities of the final evaluation (FE) of WW-VAWG. Individually, the papers focus on research, research uptake and innovation. At its core, the programme had the generation of evidence on VAWG, and on what can work to prevent VAWG. High quality research was to produce the evidence, which would then influence and effect new policy and practice, at all levels – research uptake. In this paper, we will argue the programme has had significant levels of success, but that success has been dependent on innovation and creative approaches to challenges that arose.

¹ See <https://www.whatworks.co.za> for full information on the programme and <https://devtracker.dfid.gov.uk/projects/GB-1-203709> for details on UK development assistance to the programme.

1.2 FOCUS

The purpose of this thematic paper is fourfold:

1. To draw out the important lessons, across the programme, on why innovation is essential in all efforts to prevent VAWG;
2. To understand and map the legacy of the WW-VAWG programme, in relation to innovation in capacity development; partnership and intervention approaches;
3. To offer a realistic account of the challenges arising from innovation, and the lessons learnt from them;
4. To make recommendations on whether, and if so which, successful innovations can be institutionalised and how this can be achieved.

After defining what we mean by innovation, the paper will focus on examples where we have seen programme staff use creative thinking to adapt and change in relation to particular circumstances – some of which threatened the programme’s operation. We will look at how this process has shaped the programme and its results, and will:

- Draw out recommendations for future work;
- Contribute to ongoing debate on what works for prevention of VAWG;
- Show how up-front innovative expenditure can contribute to longer-term value for money (VfM);
- Build confidence in taking on the managed risk of innovation;
- Show how innovation is contributing to identification of Positive Pathways for prevention of VAWG.

In this way, we hope to chronicle both the contribution of the What Works programme to bringing about change, and to demonstrate principles of how to optimise programmes and practice by maintaining innovative, flexible and adaptive approaches to programme creation and management.

1.3 WHOM THE PAPER IS FOR

The thematic paper has been written in ‘plain English’ with a non-technical audience in mind. It is aimed at four specific audiences:

1. **People who were involved in the What Works programme itself** to provide a critical reflection of whether and how innovations contributed to bringing about the positive changes they sought (these may be researchers, implementers or constituents of projects and research interventions);
2. **Donors, practitioners and other professionals** who are interested in arguments about why innovation is vital, and why we can never stick *only* with what we think we know works;
3. **Programmers** who are working to include co-creation and different forms of adaptive management in their programme, and research, approaches;
4. **Evaluators** who are looking for ways to evaluate hard-to-define aspects of interventions. In evaluating programmes, we often miss, or give scant credit to, things that we know resulted from the intervention, but which don’t “fit” tidily into a normal results framework. These things are often not only about *what* we achieve, but also about *how* we achieved them. It is often in these areas that we need to be most flexible and adaptive.

When the paper has been approved by DFID, we will produce a short summary, along with a slide deck, so that it can be shared easily with the WW-VAWG programme, its donors and the broader community around VAWG prevention. These materials will support a webinar on the website

[Research To Action](#) to reach research uptake and evaluation professionals interested in our approach and findings.

2 APPROACH AND METHOD

In this section, we describe what we did to deliver this Thematic Paper. The basis of our approach came from having followed the WW-VAWG programme closely for almost four years. We have been the team of Independent Evaluators, charged with assessing progress of the programme at mid-term, through a Mid-Term Review (MTR), six-monthly, through Research Uptake Progress Reports (RUPRs), and now, at the end of the first phase of the programme, through a Final Evaluation report and these, three Thematic Papers.

We used the standard evaluation methods, including semi-structured interviews with key actors² (KAIs), document and web-source reviews, and tools to organise and code findings. The core evaluation team were also able to carry out several country visits in-person (two to South Africa – at mid-term and endline, one to Nepal, one to Kenya and Zambia). In South Africa, we carried out two Participatory Interest Group Discussions (PIGDs) with project constituents. In Pakistan, Nepal and South Sudan we contracted trusted, in-country researchers to carry out some additional visits to project organisations to conduct KAIs with project staff at the end-term evaluation stage.

Across the four-years of our involvement, we have built up our role as “critical friends” to the programme: participating in management and Board meetings, in Annual Scientific Meetings (see **Section 3.3.3** below), and country visits. Our learning about the programme, and from it, has been both formal and informal. We have the **used standard evaluation methods**, and also given space to **Practice-Based Knowledge and Learning** we:

- Drew on a **range of literature and web sources** to help us refine our interpretation of what constitutes innovation in WW-VAWG (see below);
- Drew on the **findings of Thematic Papers 1 and 2** for an understanding of research excellence and evidence-informed policymaking and research uptake. This allowed us to make better arguments about what innovation is, and has done, in achievement of the programme goals;
- Drew on the initial **RU Literature Review** that was produced as part of our Inception Report 2016, to reference current theories and practices on how evidence informs policy and practice and to review the programme’s internal monitoring documents.
- Updated and maintained the **Evidence Table** that had been produced as part of our MTR to show the nuanced research uptake themes that had emerged by the end of the programme. This was systematically applied to all WW-VAWG programme documentation produced since the MTR.
- Critiqued the WW-VAWG programme’s **digital platforms, engagement strategies and resulting analytics** (where data were made available) for What Works website and digital platforms (Facebook and Twitter specifically) using benchmarked ‘best practice’ for engagement on these sites.
- Conducted a range of **semi-structured key actor interviews (KAIs)** with priority groups as defined by the programme’s RU Strategy including internal programme staff; programme

² Unlike in some other programmes, we use “actors” and “stakeholders” to be people, at ALL levels, with interest in, or experience relevant to, the programme. This includes the people who are expected to gain direct benefit from programme activities.

partners; audiences who have been targets for the work e.g. end users, advocates and intermediaries identified in the RU strategy and other 'key influential and champions' who we would expect to have heard of the work, but who are not explicitly identified as targets by the programme.

- **Focused especially on countries where 'something special happened'** across all three themes of the evaluation; either in the research itself; around innovation; or where uptake and impact was already visible. This included Nepal, Pakistan, South Sudan, South Africa and Ghana. We developed a coding table to capture anything significant said about research uptake by the people interviewed in the KAls and used an Evidence Table to review the monitoring documentation produced by the programme.
- Drew on the evaluation team's **three interim RUPRs** – themselves based on key actor interviews and documentary reviews - which shortlisted potential cases based on early signs of uptake.

2.2 LIMITATIONS

The paper has been limited by the following:

1. With the resources available, we could not access all of the key actors who we believe to have opinions on how the programme made the most of opportunities and met its challenges;
2. There was very little pre-existing awareness in the programme of where and how innovation was happening. This is a problem common across most development interventions. It means that the processes of innovation are often unrecorded, and the results of it may seem, especially if positive, like good fortune rather than good planning.
3. We only started to look at innovation after at mid-term. Our interpretation of it in the first stages of the programme are based, largely, on people's recollections.

2.3 WHAT IS INNOVATION?

"Innovation is truly a confusing buzzword which many people love to hate. Every business leader agrees that it is important. But nobody can quite seem to agree on what it actually is or what it means".³

2.3.1 DEFINITIONS OF INNOVATION

There have been many attempts to define innovation in practice. Definitions tend to stem from the business world:

- "Turning an idea into a solution that adds value" (@improvides)
- "Application of ideas that are novel and useful" (@davidburkus)
- "A great idea, executed brilliantly, and communicated in a way that is both intuitive and fully celebrates the magic of the initial concept" (@foley_pete)
- "Wherever we are applying new ways of thinking to create new sources of value, we are innovating." (Nathalie Turner <http://yesyoucaninnovate.com>)

For the purposes of this paper, and also in our assessment of innovation in other social development and social change programmes, based on the definitions above, our definition of innovation is:

³ Nick Skillicorn on <https://www.ideatovalue.com/inno/nickskillicorn/2016/03/innovation-15-experts-share-innovation-definition/>

“Creative thinking and action used in identification, invention or development, of new or adapted approaches to problem definition and problem-solving.”

Innovation is a way of thinking and operating. It will always be needed in all work to stimulate change in social norms and social change. Donors need to be encouraged to understand the ongoing benefits of innovation.

2.3.2 WHY INNOVATION IS IMPORTANT

Donor attitudes to innovation

The ability to be innovative, to think, and work, “outside the box”, is crucial to all development interventions. In recent years, as programmes have worked more explicitly with an adaptation focus⁴, innovation has been viewed in different ways. Yet, donors tend to feel uncomfortable with too much innovation: the risks seem too great. We believe this is because of: a) a misunderstanding of what innovation is and what it can be, and b) a desire to believe that different contexts, in different places and at different times, replicate each other. Neither of these ways of thinking is correct. Originally, in design of WW-VAWG, innovation referred only to ‘innovation grants’, awarded to new or adapted implementation projects in C1. But innovation has, in fact, been a key driver throughout WW-VAWG.

As inter-programme learning has grown, and with it the ‘critical friendship’ of the IE team, we have all learned more about the importance of innovation. Innovation permeates all aspects of the programme – from its original design through to results. We have learned that – especially when addressing highly sensitive, yet entrenched, social norms, values and practices – the ability to be flexible, to adapt to changing circumstances and to find creative solutions to problems, as they arise, is vital.

Context

WW-VAWG has provided a great deal of learning on all aspects of the innovation definition given above. **Innovation has been crucial in meeting challenges, and in working to adapt VAWG-prevention approaches to the needs of different contexts.**

What works to attract people into prevent VAWG projects in one place will not, necessarily, work in another. Differences, for example, in women’s ability to move around outside the house and attend group work – with permission and safety – influence the type of project that will be accessible to them. How people talk about VAWG when they are in couples conversations differs from place to place and culture to culture. And people who live a highly marginal existence may be very unused to sitting and talking with others about personal issues, or concentrating in a group-setting. Continued participant engagement in VAWG-prevention projects also varies widely. In South Africa, amongst highly disadvantaged people in urban settlements with fluid populations, it is hard to retain project participants (see the experiences of Stepping Stones – Creating Futures, and Sonke). In the very different context of Rwanda, where participation is both a political and a social obligation, participation rates were retained at well over 95%.

The results noted above suggest that, **to prevent violence, a grounded understanding of context is all-important**⁵. For example, the work carried out with and through religious leaders in DRC would not be appropriate in some other countries where religion and politics are not, necessarily, positively

⁴ Even if they have not worked with a formal Adaptive Management approach – which requires points for review and adaptation to be pre-programmed from the outset.

⁵ And see reports on those programmes to be found at www.whatworks.org.za

intertwined⁶. Most importantly, whilst we now know that VAWG *can* be prevented, we still do not know enough about the ‘who, what, why, where, when and how?’ of prevention. A second phase of WW-VAWG needs to be very carefully crafted to bring us closer to the answers to those questions.

Innovation will always be needed

There does not come a point when innovation is no longer needed. Experience, in WW-VAWG and in other programmes⁷, has shown that the ability to work for and *maintain* achievements, depends, at least in part, on thinking and acting innovatively in response to dynamic contexts and circumstances. This does not mean that approaches and projects cannot be replicated and brought to scale. It means that there must be flexibility *within* the approach, as well as adaptations and innovations to make it appropriate to peoples, groups, and communities in differing circumstances, and from different backgrounds. This is how successful implementation approaches, such as Indashyikirwa, can evolve and remain relevant outside the original areas of implementation.

A major example of continual innovation and adaptation – an ecology of innovation – is the Stepping Stones approach. Stepping Stones was first developed in the early 1990s for use in Uganda. It was published in 1995 as a community-based, social change training intervention on gender and communication to prevent HIV transmission. It has evolved over time, changing to meet the particular issues and needs of different contexts and constituencies and, in WW-VAWG has been used and adapted as a base to project development in South Africa, Tajikistan, Bangladesh, Nepal and Afghanistan.

2.3.3 WHERE ARE WE LOOKING FOR INNOVATION IN WW-VAWG?

An innovative programme approach

The whole WW-VAWG design and approach was innovative. Dedication of £25.3 million to VAWG-prevention was an innovation, in itself. But, innovation in WW-VAWG is not only about what was done, but *how* it was done.

Originally, the Business Case of WW-VAWG took a narrow view of ‘innovation’ linking it, largely, to the innovation projects that were to receive grants to try out new approaches to VAWG prevention (10, at first). Early on, it could be seen that this definition was too narrow, and that the programme as a whole would need to be much more creative, flexible and innovative if it was to fulfil what was expected of it.

In C1, some organisations had made claims of having tried and tested project approaches (when, in fact, they had not). Many of the projects involved new or adapted approaches. C1 Technical Advisors (TAs) and Secretariat staff, worked hard to help organisations develop project approaches and results frameworks which had a good chance of working and which, importantly, could be evaluated through rigorous required Randomised Control Trials (RCTs) and quasi-experimental approaches. This presented a huge challenge. Quite apart from any debate over whether RCTs are, or are not, suited to evaluation of social change interventions, RCTs are not usually used on approaches (in medical terms, treatments) that have not already been judged likely to succeed. Yet, through the experience of programme management and TAs, WW-VAWG managed to do this, without compromising on implementation of projects or research.

For this paper, we look at innovation in relation to three areas of WW-VAWG:

⁶ Yet, whilst different approaches are suited to different contexts, there are characteristics of approach which are common to all prevention work, and these are discussed in the learning below.

⁷ See for example, the Sudan Free from Female Genital Mutilation/Cutting Programme, Phase 1, and ECMP, Ethiopia

1. Capacity Development;
2. Partnership;
3. Positive Pathways to VAWG-prevention (research, implementation and uptake).

3 CAPACITY DEVELOPMENT

3.1 BACKGROUND

Approaches to Capacity Development (CD)

International development has largely, but by no means entirely, moved beyond traditional ways of working to increase capacity in people and organisations. Traditionally, CD was focused only on transfer of knowledge and skills. The transfer was predominantly by those people considered to have knowledge (often those from the white, global North) to those people (usually from the non-white, global South) who needed new knowledge and skills to do their jobs adequately. NORAD, for example, defined CD as:

“... a process by which individuals and organisations increase their abilities to successfully apply their skills and resources toward the accomplishment of their goals and the satisfaction of their stakeholders' expectations”⁸.

CIDA has said that CD is: *“The activities, approaches, strategies, and methodologies which help organizations, groups and individuals to improve their performance, generate development benefits and achieve their objectives.”⁹*

These are top-down approaches. Understandably (but only up to a point) the focus has been on “getting the job done” and fulfilling the requirements of results frameworks. The traditional approaches do not think *holistically* about participants in CD – as people who are engaging in a process of self-development and self-actualisation¹⁰. UNDP comes much closer to a person-centred, holistic approach, and states that the essential ingredient in CD is **transformation**. For UNDP, all development is about developing capacities:

“CAPACITY IS DEVELOPMENT! Capacity development is about transformations that empower individuals, leaders, organizations and societies. If something does not lead to change that is generated, guided and sustained by those whom it is meant to benefit, then it cannot be said to have enhanced capacity, even if it has served a valid development purpose”¹¹.

This approach turns the more traditional way of doing CD on its head. The objects of CD (those who had their capacities developed), now become the subjects: they own the processes of CD, are active in generating the means of them, and bring about change – not only in the work, but in themselves, their values and their ways of being. We believe that innovation is essential to this way of thinking about, and doing, CD.

⁸ Available at <http://lencd.org/learning/the-core-concept/capacity-development>

⁹ Ibid.

¹⁰ From Maslow's Hierarchy of Needs: self-actualisation is the realisation of all a person's potentials: Maslow, A.H. (1968) *Toward a Psychology of Being*

¹¹ UNDP Capacity Development: A Primer available at <https://www.undp.org/content/undp/en/home/librarypage/capacity-building/capacity-development-a-undp-primer.html>

3.2 WW-VAWG APPROACH TO CAPACITY DEVELOPMENT

3.2.1 STRATEGIC APPROACH

The Capacity Development Strategy in WW-VAWG, was developed in 2015, in response to recognition of grantee need. The original Business Case for WW-VAWG made assumptions about the level of capacity in implementing organisations (and research institutions) that were likely to be funded. As WW-VAWG got going, it became clear that these assumptions would not hold. The implementing organisations (those NGOs which would receive grants to implement prevent-VAWG projects, and which would be the subject of research and evaluation) showed capacity gaps in six, fundamental, areas:

- Thematic knowledge such as VAWG prevention, gender equality, economic empowerment, and working with children;
- Evidence-based intervention design;
- Research design and implementation;
- Organisation and presentation of results (broadly, monitoring, evaluation and learning);
- Research uptake; and
- Programme management.

All these areas of work were essential to WW-VAWG. A number of grantees also needed intense support with their formative research. In addition, most, but not all, implementing organisations had little or no experience of working with large research institutions (some of which were from the distant, global North), or being part of an RCT¹² evaluation. A further area of concern was that not all the projects actually had a tested design to work with; one that could, reasonably, be believed to work. They needed help with design. It also meant that the RCT would be applied to an ‘unknown’ approach to VAWG-prevention. As explained, RCTs are usually used to test treatments which already show some likelihood of efficacy.

The scope of the CD challenge confronting WW-VAWG, was significant. The Secretariat was faced with a choice: re-think what they had been contracted for in terms of CD or, run the risk of early failure in programme intervention – because capacities assumed in programme design could simply not be found in practice. The programme, considered a ‘flagship’ by DFID, was too important to fail at the first major hurdle. DFID agreed to redistribution of the budget, to allow development of a full programme of CD, and CD was given greater recognition in the revised programme logic. By the end of the programme, it was estimated that the CD portfolio utilised 10% of the programme’s overall funds¹³.

In its WW-VAWG 2019 paper on CD, the authors made the point that:

“Despite agreement that [CD] is necessary, capacity development with southern partners is rarely approached rigorously, or adequately resourced. Few donors, large consortiums or programmes have adequate capacity development strategies, budgets or time allocated for this. Furthermore, capacity development strategies often fail to meaningfully place southern implementers and researchers at the centre of the process, inadvertently reinforcing unequal

¹² Taken from a medical approach to research, an RCT is a study in which people are allocated at random (by chance alone) to receive one of several clinical interventions. One of these interventions is the standard of comparison or control. The control may be a standard practice, a placebo (“sugar pill”), or no intervention at all. RCTs seek to measure and compare the outcomes after the participants receive the interventions. In medicine, for ethical, and practical, reasons, RCTs are based on a treatment which is reasonably be believed to work (before the trial begins).

¹³ See also Thematic Papers 1 and 2 for further detail on CD specifically for Research and Research Uptake.

relationships of power or dependency, and limiting the effectiveness of VAWG research and interventions”¹⁴.

3.3.2 MANAGEMENT OF THE WW-VAWG CAPACITY DEVELOPMENT

When the Secretariat saw how much need there was in C1, a CD Lead was appointed:

Box 2: Managing the WW-VAWG Capacity Development Approach

“In June 2015, a dedicated capacity development manager was appointed to oversee the capacity development strategy. This appointment was critical as it meant capacity development had a champion to drive it as a core activity of What Works. The appointment of a lead person on capacity development was extremely positive and resulted in a step change in how capacity development was organised and communicated, which I and the grantees have greatly appreciated.”

Technical Adviser, Exit Interview, October 2017

The capacity development manager’s role included developing a strategic vision, identifying and responding to shifting capacity development needs, and implementing and monitoring the programme-wide activities. At the start of the programme in 2014, it was assumed only innovation grantees would require capacity development support; however, the inception period (year one) revealed DFID and What Works had underestimated the needs of many of the grantees and the time needed to undertake high-quality formative research, and intervention adaptation and design. Also, many of the impact evaluations required significant support to design and implement RCTs, and in some cases develop and adapt their interventions. In response, What Works expanded the capacity development portfolio to provide all grantees with the necessary means to carry out their work to their own, and the programme’s satisfaction.

Source: Author, Final Evaluation Interview and Thematic paper 2

The main components of the CD strategy developed in WW-VAWG were:

1. Provision of Technical Support, to grantees, by dedicated Technical Advisers (TAs);
2. Annual Workshops (Inception in January ’15; September ’16, July ’17 and October ’18);
3. Community of Practice Series (for grantees; for TA’s);
4. Targeted Workshops (write-shops, quantitative analysis, RCTs);
5. Monitoring and Evaluation (grantee self-evaluation, workshop evaluation; case stories etc.).
6. Direct coaching and mentoring support to write briefs, presentations and RU papers (support sometimes from TA, often from the Secretariat team).

All these were built up in as participatory way as possible, leading to an approach which was significantly different from the traditional. It worked with, and moved on from, the UNDP way of looking at CD. WW-VAWG’s approach involved all the characteristics of the definition of innovation we gave in **Section 2.3.1**, above: creative thinking and action; problem definition and solving, through new and adapted approaches.

¹⁴ Samantha Willan, Alice Kerr-Wilson, Anna Parke & Andrew Gibbs (2019): A study on capacity development in the “What Works to Prevent Violence Against Women” programme, Development in Practice, DOI: 10.1080/09614524.2019.1615410

3.3.3 WHAT WAS INNOVATIVE ABOUT THE WW-VAWG CD STRATEGY?

The fact that the CD Strategy was multi-component, adaptive, responsive to emerging needs and based on issues identified by programme partners was, in itself, innovative. In looking at innovation, we are interested in how CD came about in WW-VAWG, and how it was done. Most development programmes involve CD of some kind, usually in relation to acquisition of new knowledge and skills (see above). This, if it is combined with complementary development in infrastructure and systems, can be successful, within limits. But, knowledge and skills, are not enough to bring about the kinds of values-, norms- and social-change needed to promote VAWG prevention¹⁵. Innovative, well-tailored CD is vital to enhance chances for success of prevent-VAWG interventions (implementation and research) and to create the pool of people who will work with commitment, at all levels, for an end to VAWG (and for other aspects of international development).

Innovation for CD in WW-VAWG stemmed from: **recognition** of the extent of the CD issue, **commitment** to doing something about it, and **situation** of “southern implementers and researchers at the centre of the process”. We discuss three key elements of what happened in the following subsections.

WW-VAWG Technical Advisors: A coaching and mentoring approach

In contrast to many other programmes, WW-VAWG recognised that developing capacities in partner organisations was not only a matter of transferring skills, but of a) stimulating change within organisations and individuals, b) guiding them into that change and c) working with them to maintain the change and make best use of it. To do this, WW-VAWG appointed a set of Technical Advisors who provided “*bespoke support to What Works projects and served as critical enablers of grantees’ capacity growth.*”¹⁶ TA support was flexible, the amount and the topics were decided in cooperation with grantees, according to need. In general, though:

“TA support usually involved two in-country visits (of four to six days), and in a few cases additional visits were undertaken (with one project receiving five visits). The bulk of support and mentoring was undertaken through email, virtual meetings, telephone discussions and during ad hoc capacity development workshops, or side meetings at bigger What Works meetings”¹⁷.

We feel that the way in which TA support was rolled out, and the kind of relationships built between TAs and grantees, mean it is best described as a coaching or mentoring relationship. This is a new and creative approach to C in social development. Coaching is:

“... fundamentally about facilitating learning and unlearning in the coachee. It is ... about changes that take place within the person being coached. This means that the coach is interacting in a territory that belongs to another person ... touching upon the personal thinking, feeling, and intention of another human being.”¹⁸

There is considerable debate about whether there is any real difference between coaching and mentoring¹⁹. A difference lies in that mentoring may seek to share information and knowledge, “owned” by the mentee, whereas coaching seeks more definitely to work with knowledge and

¹⁵ Brocklesby, M.A and Crawford, S. (2008) Tools for Participatory Engagement, A Manual for OXFAM Southern Africa

¹⁶ Ibid.

¹⁷ Ibid.

¹⁸ Passmore, J. ed. (2010) Leadership Coaching; Association for Coaching, London.

¹⁹ See, for example, Deans, F. and Oakley, L. with James, R. and Wiggley, R. (2007) Coaching and Mentoring for Leadership Development in Civil Society *Praxis Paper 14 Intrac: Oxford*

understanding which the coachee may already have, but which they cannot yet realise or use. The TA support in WW-VAWG combined elements of both of these.

Requirements for good practice in coaching and mentoring are that they are:

1. Person-centred: building on what a client (or client organisation) is, has and may be;
2. Focused on self-determination and generation of client-owned solutions;
3. Respectful of the individual or organisational clients, their knowledge and experience.

When working for social change, we believe that the most useful coaching/mentoring, is also Positive²⁰: that is, it starts with what the coachee/mentee feels is good about their present situation, and where they feel their advantages lie. It then builds on these positives to find solutions to problems or issues affecting people's ability to feel satisfied, and able to fulfill their roles.

A mentoring approach usually implies that the mentor has more experience in the particular field of interest than does the mentee. This was the case in WW-VAWG, though mentors did not always have experience in the country or context of the mentees' work. All mentees consulted²¹, noted one, vital characteristic of good mentoring, alongside required prevent-VAWG understanding and experience. Everyone said that the most important thing was the *relationship* formed between mentor and mentees: the mentor's ability to understand the mentees' situation and concerns and to work with mentees to find solutions to problems. This was considered more important than whether the mentor had prior knowledge of the geographical context of work. The best mentors were thought to be those who worked with the good practice requirements, for coaching and mentoring, listed above.

Buddying in the TA mentoring approach

To start with, buddying between projects was not a deliberate strategy in WW-VAWG. It came about partly because of the similar CD needs between many of the grantees which meant that some TA – especially the targeted workshops – could be run for groups of projects. For example, Tajikistan, Nepal and Afghanistan came together for skills development. Another facet of buddying was the relationship between Stepping Stones-Creating Futures (in South Africa and Nepal), which had been mentored in the development of (loosely) Stepping Stones-based project design. The potential use and sustainability of a buddying approach was demonstrated when projects took over buddy relationships for themselves. By communicating with others, across countries, they set up their own mini Communities of Practice, where they could share ideas and experience.

The Annual Scientific Meetings (ASMs)

Rarely have such potentially dry events been so engaging, dynamic and effective. The structure and processes of the ASMs evolved over the programme time-span. They were designed to bring together a full range of stakeholders to share their What Works experience and findings/results so-far. By the second ASM, in 2017 in Pretoria, a strong move had been made to ensure that project partners would be able to have full "voice" and participation in the proceedings. This was especially important, because there was an ASM focus on Research Uptake. A 2-day CD workshop, for project partners, was held before the main ASM. In this, *inter alia*, partners learned an innovative way of giving five-minute presentations on their projects, using only three slides²². Other innovations included sessions on blog-writing and a session on evidence briefs – given by members of the Independent Evaluation (IE) team for What Works (involving the IE team in this, and in planning the ASM CD events, was

²⁰ Kaufman, C. (2006) *Coaching from a cultural perspective* in Stober, D. R. and Grant, A.M, (eds.)(2006). Evidence Based Coaching Handbook: Putting best practices to work for your clients. Hoboken: John Wiley and Sons Inc.

²¹ In interviews, at the Annual Scientific Meetings, at SVRI etc.

²² An adapted Pecha Kucha approach: www.pechakucka.com

highly innovative and useful). The result of the two days was that partners were able to give highly relevant, insightful, five-minute presentations, with great confidence. They were as good as presentations given by very experienced, senior researchers.

Results of the three approaches

The mentoring approach allowed for the development of a cadre of organisations and people well-equipped to design, implement, and assess prevent-VAWG interventions. Combined with other innovative approaches, they stimulated growth of a real Community of Practice (CoP). This CoP shared not only knowledge and experience, of VAWG-prevention, but also a much wider range of concerns and skills. The sense of connection, with others in the programme, of learning, sharing and caring, was very strong. Especially at the Annual Scientific Meetings.

Bringing together people from different countries, different backgrounds (academic, political, practical etc.) and different generations paid off many-fold in WW-VAWG. This would not have happened, however, in a conventional approach to sharing academic findings. It took the dynamism and lateral-thinking of programme management and technical assistance to ensure that benefits were optimised. The ASMs and Learning Events were also exceptionally well-organised.

3.3.4 LEARNING FROM INNOVATIVE INVESTMENT IN CAPACITY DEVELOPMENT APPROACHES

The positive results of investment in CD are evident in the growing confidence of southern partners and, and their increasingly visible role. The review of CD support conducted by C1, showed increased confidence in research uptake, second only to confidence in project reporting (self-reported by participants); and in the increased number of dissemination outputs e.g. blogs, media interviews produced by the researchers and implementers.²³

As anticipated in the CD approach, positive change has happened, both for individuals and organisations. One example of this was from VSO, Nepal. Ratna's progress in fulfilling her potentials is given in full in **Annex 1 to this Thematic Paper**. We summarise it here.

Box 3: Ratna Shreshtra from VSO

Ratna Shreshtra presented her story to the Sexual Violence Research Initiative (SVRI) conference, in October 2019 in Cape Town.

“... VSO was granted What Works (WW) financial support for the “One Community One Family (OCOF)” project in Baglung district, Nepal from July 2015 - Nov 2018 and I joined VSO and became the part of WW-VAWG family in Sep 2015. This was my first project working with both academics and practitioners, basically a fusion of research and development work. At the beginning I found it very difficult to initiate our efforts because the technical terminology/language of the research is different from the terminology and approaches used by the development work. In addition, the family-centered approach was new and challenging in the Nepalese context ...But I am very grateful to our technical advisors (TA) from What Works, for the support received both in research and intervention implementation and we were able to accomplish our mission successfully... I remember my first participation at the What Works Annual Scientific Meeting in Dubai [2016], where all grantees, academics and donor agencies were present. I was so overwhelmed to be part of WW-VAWG and demonstrate our intervention through role play. The forum was a great opportunity to interact, learn and share the intervention with other countries. At this meeting, VSO established and

²³ From evaluation report 10th Feb 2019

strengthened relationships with friends from International Alert in Tajikistan and Help the Afghan Children from Afghanistan, where similar interventions were ongoing. However, whilst I found the capacity development days useful, I was less interested during the actual scientific paper presentations and asked myself what the importance and relevance of these were to our work on the OCOF project in Nepal. But later I understood the importance of RCTs and Longitudinal research, the importance of having evaluations with protocols and ethical approval, in order to be able to demonstrate robustly the change and impact on lives, especially in the cases related to violence against women and girls. The training that we received from Professor Rachel Jewkes on quantitative data analysis in Tajikistan sowed a seed of interest on evidence based scientific research.”

*“As the project came to an end, we had a unique opportunity to leverage our OCOF evidence to get funding to take the work forward. I was a key part of the team that helped to win a much larger award of £3.4m from DFID’s security and justice programme in Nepal for **Strengthening Access To Holistic, Gender Responsive, And Accountable Justice In Nepal** (SAHAJ). The new funding for SAHAJ meant that my time was required to re-contextualize the approaches from WW-VAWG for a new programme – this was a great experience. It is also about creating a pool of experts within VSO Nepal with more emphasis on social norms change. Our experience with WW-VAWG has helped to establish that relational models in which volunteers work to sustainably support inclusion, accountability and local resilience to reduce GBV can be very effective and bring real value to efforts on these issues in many different contexts. ...Moreover, WW-VAWG motivated me to enhance my knowledge. As a result I enrolled in a PhD in Gender Studies in Nepal in 2019.”*

Source: Ratna Shreshtha, VSO, Nepal.

All components felt that there is more to be done in future in ensuring that learning is not just a North-South process, but that there are adequate resources for intensified South-South learning and for research agendas driven by the South (C2 Project Completion Report [PCR]). We fully agree with this assessment. In our recommendations in **Section 6**, we give suggestions on how that might happen.

4 PARTNERSHIP

4.1 WHAT GOOD PARTNERSHIP IS

For more than two decades, partnership has been written into most development programmes. The adoption of rights-based approaches to development, after 1997, strengthened the requirement for partnership. But, in spite of this, it has been rare to find really good, functioning partnerships: ones which work significantly to create synergies between partners working, in equality, and increase programme successes. Partnership was a fundamental principle underlying the WW-VAWG approach.

Good partnership has several basic requirements

*“Trust is a basic need for a successful partnership... partnerships are made up of people who view each other as **necessary equals and show mutual respect for each other's differences**. They find ways to focus on solutions, not problems and are committed to open communication to keep things together.”²⁴*

²⁴ www.entrepreneur.com. Our emphasis.

Good partnership is based on partners recognising that working together will increase their chances of success, and that they trust each other to balance, and contribute to fulfilling, each other's needs. This requires them to share common values and work to common goals, and to build and use good systems of cooperation and coordination.²⁵

We argue that innovation was a key driver in the success of the partnership approach in WW-VAWG – creative approaches to problem-solving were crucial to making partnerships work across the programme. Here we look at three aspects of partnerships which were both innovative, and potentially risky:

1. Partnership between the four programme components;
2. Partnerships between research institutions (national and international), national researchers and project implementers;
3. Partnerships between project implementers.

All these partnerships were built up on a steep learning curve, often involving a leap of faith into uncharted waters. Not everything about them was successful, and quick, innovative fixes had to be found. Not every partnership fully exhibited the equality required. But, overall, the partnership approach worked.

4.2 PARTNERSHIP BETWEEN THE PROGRAMME COMPONENTS

4.2.1 COORDINATION BETWEEN THE COMPONENTS

The WW-VAWG Programme design anticipated synergies between the three main programme components. The Independent Evaluation (C4) was later added. Coordination in partnerships is driven by incentives: immediate or anticipated benefits for those who actively coordinate. Good coordination takes dedicated time, resources and budgets. The seriousness of this often goes unrecognised in programme design, leaving people and organisations, required to build partnerships, with considerable difficulties. At the start of WW-VAWG, this was the case. Cross-working between components was a key consideration in programme design: “*coherence across components reduces duplication and enables synergies for synthesis and cross-learning*”²⁶, but little attention was given to how this would be achieved. The programme components were designed to be operationally and contractually separate. This was to allow for adequate concentration on the three distinct areas of research.

The risk of lack of coherence across the programme, as a result of the contracting method, was identified in the design phase. The potential for duplication, inability to synthesise across the programme, and loss of opportunity for building on lessons and emerging findings, was recognised. In order to mitigate this risk, learning-sharing was built into each component Terms of Reference (ToR), with C1 holding overall responsibility for learning and synthesis across the three components and promoting partnership between components. Each component was responsible for shaping the partnerships which would drive their own, particular areas of work.

Early co-ordination between the programme components was not optimal. This was because of the staggered approach to contracting (C1 was contracted first, then C2 and then C3 – so they did not all start at the same time). All components were fully employed in undertaking their own work, and the C1 Secretariat mandate to promote coordination was not, at first, strong enough to encourage full

²⁵ See, for example, “[What Makes a Great Partnership?](http://www.aquilaadvisors.com)” From *Partner Insights*, Aquila Global Advisors, LLC, April 26, 2011, www.aquilaadvisors.com.

²⁶ DFID (2013: 34) A Business Case for the Programme: Prevention of Violence Against Women and Girls

coordination and synergies. Around the time of MTR, this situation changed, and co-ordination became much stronger.

Coordination between the components was largely driven by the efforts of the Secretariat (with the willingness of the other components to coordinate). We see that, by the end of the programme, there were areas where coordination might still be improved. It seems that C3 had never had the opportunity to become fully embedded within the overall coordination. We think this is, in part, because of the different nature of C3 activities. But, it is also because C3 development took place separately from, and later than, the wider, programme development (because it was contracted later).

The addition of the Independent Evaluation (IE)

In DFID programming, it is now becoming more accepted that IE can be a component partner *in* a programme, rather than being viewed as some kind of ‘necessary enemy from outside’. When the IE for WW-VAWG started (in 2015), it was still seen as very separate from the other components. At mid-term, however, things started to change. The IE team were able to demonstrate their usefulness to DFID and to the programme: both by providing technical guidance (for example, on the programme results framework and the start-up of Research Uptake) and as a link between DFID’s take on evaluation requirements and how the programme would be affected by this.

Over time, we believe that we were able to build up a good degree of trust between the IE team and the programme. This took an investment of time and effort – to prove our usefulness. But, it also depended on the attitudes and values of all concerned. We were able to fulfil the ‘critical friendship’ role which was expected from us (in our ToRs), because we believed in the principle of equality in partnership and we were committed to putting it into practice; as were the stakeholders in the other programme components. Because of this, we were able to contribute to finding creative problems to issues that arose. We did this by, for example, contributing to bringing together the theories of change (ToCs) and log-frames of all the components into a results framework which could do justice to the programme as a whole. We were also able to contribute to capacity development at the ASMs (see above). It is not that these kinds of inputs have never before been done by IE teams. But, the way in which our inputs were welcomed (by DFID and the other components) allowed us to form relationships with programme partners. This furthered our ability to gain insights into the programme, and enhanced our ability to understand programme achievements and challenges so as to make a fair, and realistic, evaluation. It did not cause bias. Rather, it allowed programme stakeholders to feel confident in sharing their views, as they knew they would be represented faithfully, but with an independent analysis.

4.2.2 LEARNING ON PROGRAMME-LEVEL PARTNERSHIP

In summary, key learnings were:

- **It is worth the resources (and potential difficulties) of contracting all major components at the same time.** This enables components to co-create the possibilities for good partnership, from the outset.
- **Design multi-component programmes with potential coordination synergies, and harmonisation of components, in mind.** This means that potential overlaps of, or inter-dependence between, different components need to be explicit from early concept through to contracting. To do this, or rather to enforce this programmatically, means embedding harmonised working into the ToRs of programmes.

- **Embed requirements, resources and possibilities for coordination, from the tendering stage.** The best coordination cannot be achieved without a strong statement that it is a programmatic requirement and awareness across all organisations that, in one way or another, the effort of coordinating will bring them benefit.
- **The only component that does not need to be contracted from the outset is IE.** That is not to say there should be a lag between beginning the beginning of the main components and the evaluation: contracting IE needs to be complete at least as soon as the inception period of other components is ending (unless IE is to participate in co-creation of the other components, in which case, it will need to be contracted sooner).

4.3 PARTNERSHIP BETWEEN RESEARCH INSTITUTIONS (NATIONAL AND INTERNATIONAL), NATIONAL RESEARCHERS AND IMPLEMENTERS

4.3.1 FOCUS OF DISCUSSION

Much of this topic has been covered in the Final Evaluation **Thematic Paper 1**, on Research. We will not repeat that discussion here, but focus only on a few aspects of what was new and different about relationships between researchers and implementers, where there were problems and what ended up working well.

Partnerships between research institutions, national researchers and project implementers worked differently in the different components. In C2 and C3, the relationships were between researchers from different places, and at different levels. In C1, Project Implementers were also involved, and this created some new problems in a programme that strives for real partnership. There were often similarities, however, between the ways in which national researchers talked about challenges faced and the ways that project implementers did.

4.3.2 INTERNATIONAL AND NATIONAL RESEARCH INSTITUTIONS AND NATIONAL RESEARCHERS

The term International and National Research Institutions (RIs), is used here to refer to those institutions in WW-VAWG seen to be at the top of the ‘food-chain’. It was these institutions which had the job of designing and implementing the RCTs, and other, major pieces of research, with input from the Secretariat team. We use the term National Researchers (NRs) to refer to individuals and organisations, from the countries in which the research was carried out, contracted by the RIs or by the Secretariat team (according to need). This is potentially confusing, as researchers in some of the WW-VAWG RIs, those situated in the global South, are “national” researchers. We are making the distinction between institutional, academic researchers, and those – NRs – who are more practitioner-researchers.

The ethos of the programme and across components, by the mid- to end-term, stressed the importance of developing southern research capacity and supporting NRs to build their profiles, and through co-authored or first-authored publications. This focus was not always consistently present at the start of the programme, when we saw a much greater dominance of outputs authored by research leads from the RIs (though early papers were not based on data from projects, as none had yet emerged). As partnerships and relationships grew this picture shifted, aided by the developing capacities on Southern partners to write papers. But co-authorship is not easy. Globally, many times, reports are claimed to be co-authored but are, in fact, written by a Northern team. The names of Southern researchers who have participated in the research, are then added to the author list.

In contexts where teams of researchers managed to work closely and did so from the start, the impact and results are clearly stronger and have far more likelihood of leaving lasting legacy in the form of increased research capacity. For example, in Rwanda one researcher commented:

“on the qualitative side I worked very closely with four different Rwandan qualitative researchers and we worked together. They conducted most of the data collection and were involved in analysing the data with me and were also involved in co-authoring papers. We strove to involve Rwandan programme partners in co-authoring papers which for all of them was the first time to be involved with publications. An important element was really building capacity especially on research writing. Our southern researchers, for instance, asked the team for capacity training sessions on writing blogs and on understanding randomisation so they could speak to local leaders on qualitative sampling.”

Source: Researcher interviewed August 2019

When this relationship worked well, it worked very well and both sides felt the benefit. When Northern, or academic level partners were open to it, they learned significantly from the perspectives of ground-level researchers and implementers. In future work, this two-way process needs to be intensified, with Southern understanding informing, and guiding, the research agenda. In the short-term, co-authoring, between authors from the global North and global South, takes a good deal of time and effort and requires people to work participatorily. It is not always easy for RIs to give up some of their control over research approaches, research topics and products. Academic training and expertise is usually thought to produce “better” research understanding than more ground-level interpretations. There must be room for both, and for the different types of products that ground-level researchers may produce. Experience has shown that (I)NGO practitioners and researchers are generally better equipped, with the context-specific knowledge that can lead to good design of social research, than are high-level institutions. They are less able, however, to design and implement broad quantitative and qualitative surveys. We had reports from some NRs that they were dissatisfied because they felt they had been promised co-authorship, but that this did not happen²⁷.

Positively, at the ASMs and in interviews, several NRs said how much they felt their capacities had been strengthened by working with the RIs, and learning from them.

Relationships between Researchers and Project Implementers

In **Box 3**, in **Section 3.3.4**, above, Ratna Shreshta recounted how she had felt very sceptical, at first, about the role of the IR working with her project to design and implement a complex evaluation. She was also unsure about a) what an RCT was and b) whether it could be of any use in determining whether what the project was doing would be useful in preventing VAWG. She was not alone in these feelings. At the beginning of the programme, many people felt unconvinced about using RCTs to evaluate social change²⁸. To use them on the scale that WW-VAWG did, was new, and left some researchers, implementers (and independent evaluators) feeling uneasy.

“How can we work with an RCT going on? They have so many demands – we have to keep only the original project participants. If there are drop-outs we can’t fill the spaces with new people. We have to “police” who turns up at the meetings. The control group has to be kept out of it completely. That is easier, as the problem is getting people to turn up, not the other way round. But, people in our working area don’t stay still, they move from place to place. One week they are there, the next they are gone. The RCT will work with a rigid set of questions.

²⁷ Interviews, April and August 2019, January 2020

²⁸ See the Final Evaluation report., Feb 2020.

It's hard to find very poor and vulnerable people who are willing and able to concentrate long enough to answer all the questions"

Source: IE interview, 2016

Over time, however, and when the working relationship between RI staff and project implementation staff was good, these attitudes changed. For a start, implementers could see that the rigour of the RCT approach meant that findings were reliable. They could not give a full explanation for *why* and *how* some interventions worked – qualitative research was needed for that, nuanced, understanding of behavioural and social change. But, if done well, the RCT numbers tell a convincing story which can be used to influence governments and donors (see **Thematic Papers 1 and 2**).

"No, now I would say the RCT was really useful. And we learned a lot. That's because we worked well with the [RI], they discussed everything with us. We analysed things together and they, too, were committed to qualitative research as well as quantitative."

Source: IE interview, 2019

4.3.3 LEARNING FROM IR, NR AND PROJECT IMPLEMENTER PARTNERSHIP

At the beginning of the programme, it is doubtful whether most of the RIs regarded their relationships with NRs and project implementers as partnerships between equals. For some, partnership cannot be said ever to have achieved that level. For others, though, partnership really did work. It led to an increased cadre of people capable of researching and evaluating on VAWG, and to very rich research results. A lot depended on the values held by the RIs, and their willingness to develop more equal relationship with people in the context of work.

Assumptions

We saw that a number of people from IRs, NRs and Project Implementers all started out with assumptions about each other. Some academics from IRs felt they had the expertise and knowledge, and capacity to gather, organise and analyse data, whereas practitioners could not do those things. Some NRs felt much the same as IRs, but felt they had a better grasp on the local context. Some practitioners felt unsure that the research could tell them anything they did not already know, that it might give false results, and that it might not serve real, practical use. There are kernels of truth in all these assumptions, but they do not add up to a realistic picture. Where the assumptions began to break down, the partnerships started to work (it seems that the opposite is also true: where the assumptions held, partnership relations did not flourish).

Two key learnings are:

- **It is easier to build good IR, NR and project implementer partnerships, which increase chances of success, when IR researchers are well-embedded in the country and context.** Ideally, for good partnerships, and relationships of trust, to grow, IRs need either to be in the country of work (for example, University of KwaZulu-Natal, in Durban) or to ensure their principal researchers spend a good length of time in-country – getting to understand the context, and the stakeholders (for example, Rwanda, Afghanistan). Ideally, the research needs to be designed with NRs and Project Implementers. This need not jeopardise the independence of evaluations. Quantitative research needs to be based on qualitative research and quantitative findings need to be nuanced through qualitative (participatory) research. This is standard, good practice, but it does not often happen. When it does, partnerships are better, and results of research are (even) more meaningful.

- **Project Implementers need to have full understanding of what may come out of the research, before it starts.** Most Project Implementers are convinced that what they are doing, works. They may have been through some evaluation processes that suggest that their view is right. However, an RCT may suggest otherwise. This may be because of the time when the RCT is done (before there are good indications that a project approach is working), how it is designed (without full discussion or understanding of the local context) or how it is implemented and analysed. It may also be because the project is not as effective as its implementers think it is. One way or another, if the Project Implementers are not fully prepared for negative, as well as positive, results, partnerships can break down. If qualitative research accompanies quantitative, this is less likely to happen – because of the more nuanced understanding that is built up.

4.4 PARTNERSHIPS BETWEEN PROJECT IMPLEMENTERS

Partnerships between Project Implementers were discussed in **Section 3**, above. We outlined the way that implementers came together for skills-development on different subjects, how they worked together at the ASMs, and how they “buddied up” to give each other ongoing mutual support.

Sustainability

Here, we add only that a key learning on projects working together is:

- **Project Implementers supporting each other, as peers, contribute to strengthening and sustainability of the Community of Practice.** The fact that groups of projects started to support each other, or work together as a group, with their TAs, came about because the Capacity Development management carefully nurtured inter-project relationships and gave them the space to flourish. It was not in the original planning. This kind of cooperation, between projects and countries, is indicative of increased chances for longer-term sustainability. When programme participants, on the ground, start to create their own solutions to issues facing them, especially when they work together to do so, they are seizing the agenda and generating Southern solutions to problems. The support webs established, are a good step along the positive pathways to VAWG prevention and social change.

5 POSITIVE PATHWAYS TO VAWG PREVENTION

5.1 PROCESSES LEADING TO UPTAKE AND SCALE

In this section, we look at processes which have led, or are leading, towards uptake of WW-VAWG evidence and VAWG -prevention approaches. The innovations here are both in the concept – Positive Pathways – with which we approach this assessment, and in how the pathway is revealed. We developed the concept of Positive Pathways prior to mid-term and have, since, supported WW-VAWG initiatives to investigate their own identification of pathways to positive outcomes.

Quite often, if we get to successful uptake of evidence and approaches, as we move towards scale up and out of interventions, we do not have a clear, step-by-step understanding of how we got there. In WW-VAWG, we have begun to build this understanding. For example, C1 has identified factors which have been present in successful prevent-VAWG interventions at community level. These factors include: working both with women and men; being inclusive; good quality, dedicated and trained

facilitators; participatory approaches; “ownership” of the approach by the community, extended engagement in the community, etc.²⁹. None of these factors is surprising. Working for social norms and social change, we have been championing them for a long time. There is a chance now, though, with a combination of quantitative evidence out of a suite of RCTs, and related qualitative evidence, that donors, and governments, will be more willing to fund interventions that insist on working in these ways.

5.1.1 WHAT ARE POSITIVE PATHWAYS?

We look, here, at what Positive Pathways Analysis (PPA) is, and what is needed for us to identify Positive Pathways (PPs).

Box 4: Positive Pathways Analysis (PPA) Overview

Positive Pathways Analysis (PPA) (copyright CR2 Associates Ltd.) has been designed and developed by the IE of WW-VAWG) in response to a growing need for better understanding of effectiveness and VfM in end-VAWG policy and programming. PPA is a way to synthesise understanding, gained through innovation and research/ evaluation programmes/ projects, and to identify approaches, and combinations of components, which are most likely to lead to sustained positive change. It was developed in response to a growing need for better understanding of effectiveness and VfM in end-VAWG policy and programming. PPA will provide a fresh approach to assessing the relative merit of different programme components and will contribute to development of a framework for design of future end-VAWG programmes and projects.

Through PPA, we hoped to identify the junctions along a pathway where different methods and approaches to protecting women and girls and ending VAWG, are linked to different contexts and cultures. We also sought to identify which aspects of any approach are most likely to be essential, which are desirable, and which might be “extra”.

Questions about which aspects of what we do in development are essential, which are desirable, and which are “extra” have tormented policy-makers and programmers, over the years. Because of the way that programmes have been designed, and evaluations set up, it has not yet been possible to measure fully the effectiveness of one programme component against another. So, for example, it has not been possible to determine whether single-sex work, or small-group work, components on communication or on livelihood possibilities etc. have been the essential catalysts for change away from violence, or whether it is the particular combination of these components, and the timing of their introduction into programming, which leads to positive achievements. By having a portfolio of evidence, across the WW-VAWG programme, we are beginning to find answers.

A Positive Pathway is the opposite of a Causal Net. The use of Causal Nets is common in medicine to help in the analysis of the drivers and consequences of health problems. In recent years, we have used it to understand the web of inter-related negative effects caused by particular types of VAWG³⁰. A Causal Net centres on an issue (such as FGM/C) and traces its effects and consequences, step-by-step, to inevitable, negative outcomes (such as, in the case of FGM/C, continuing inter-generational poverty and perpetuation of gender inequality and inequity).

Instead of looking for the negative outcomes of VAWG (which are clearly defined through the work of the three WW-VAWG components), we aimed to identify a range of **positive pathways**. Positive

²⁹ See programme documents and presentations at SVRI, Cape Town, 2019

³⁰ See, for example, Crawford, S. (2014) Harmful Traditional Practices: Your Questions, Our Answers, GADN, London

Pathways lead away from VAWG towards – eventually -- improved social, economic and well-being outcomes for women and girls, and for wider society, and gender equality and equity. Through the analysis of Positive Pathways, we wanted to identify the junctions along a pathway where different approaches and methods, to protecting women and girls and ending VAWG, may be suited to different contexts and cultures. We also wanted to identify which aspects of work led straight along the pathway, which went off on side paths, and which led to dead-ends. Our analysis of PPs in WW-VAWG has only recently begun and, at the end of phase 1, we have not done as much analysis as we would have liked. This is because it is only now, at the end of Phase 1 of WW-VAWG, that wider uptake and use of evidence is taking place and becoming visible. We hope to embed PPA further in future prevent-VAWG work. We will give two examples we see emerging from WW-VAWG Phase 1.

5.2 PATHWAYS TO COMMITMENT AND UPTAKE

5.2.1 HOW HIGH-LEVEL COMMITMENT MIGHT BE SECURED

Pathways to positive outcomes cannot always (or even, often) be predicted. Amongst many other governing factors, WW-VAWG experience has shown that most success is likely to come when we can **seize the political moment**. There are several reasons why governments may develop commitment to preventing and ending VAWG. These include, but are not limited to:

1. **Global movement and pressure: governments may see more benefit in joining global voice than in standing apart from it.** This may be predictable or unpredictable. For example, the USA made predictable efforts to ensure that the wording of the Convention on the Worst Forms of Child Labour was adapted so that they could sign it. This was likely to have been in order to mitigate against global disapproval of their failure to sign the Convention on the Rights of the Child (CRC)³¹. Conversely, the sudden presidential bans on FGM/C in the Gambia and Nigeria were not predicted (and, in The Gambia, government-level end-FGM/C support had been considered a lost cause³²), before the president declared against it in 2015.
2. **National pressure and activism: when voices in-county reach a critical mass – which is not just about numbers, but about connections and respect, governments are forced either to listen or oppress.** Young voices are always considered most dangerous by governments (for example, Greta Thunberg on the Climate Crisis, students in Sudan in 2018-19) as they don't "follow the rules", they operate in liminal space, and care little for the established hierarchy of power. Women are also "dangerous". Politically, except perhaps in Finland, Iceland and New Zealand, any action by united women is seen as subversive to established order.
3. **When evidence of the problem and, more importantly, the solutions, is incontestable.** Governments tend to be most interested in problems when they are presented with working solutions. Evidence needs to be not only on the extent and severity of the problem, but on the degree of success which can be expected as a return on investments aimed at solving the problem. Governments are generally, risk averse. They tend to want high levels of certainty before trying something new.

³¹ Pers. Comm to author at the ILO meeting to adopt the Convention, Geneva 1999

³² DFID, (2013), First Annual Review, Towards ending FGM/C in Africa and Beyond, available at <https://devtracker.dfid.gov.uk/projects/GB-1-203024/documents>

4. **When the costs of adopting new approaches, shown likely to succeed, are known and understood.** The costs on implementation need to be known. Governments may then commit to a new approach; they may reallocate existing budgets to fund it and, sometimes, commit to finding new money to support it. Even where governments know they cannot afford the new approach, they may agree to work with it at-scale, if they believe that donor support will be available³³. In South Africa, lobbying for scale-up has been successful and government is set to commit new funding. Conversely, in Pakistan, although there is scale-up by the Right to Play project, one of the reasons why the government is not yet ready to commit to scale-up into the education system (despite recognising the projects successes and future potentials) is that the costs are not fully known³⁴.

5. **When the messages get out to as many people as possible, in a wide variety of formats** This is why the #MeToo Movement, and other movements and campaigns are so important: because they invite "ordinary people" into collaboration and conversation, they catalyse opinion and action and add to the pressure on governments to do something. The strapline of the 2019 the Sexual Violence Research Initiative (SVRI) conference, "The Time is Now" has great power because it is both a rallying cry of the moment, and a lasting call to action (it is always "now"). Modern media are, obviously, very powerful tools in getting the message out there.

6. **Understanding what it takes to promote ethical and appropriate scale-up.** Presentations and discussion at the conference of the SVRI in Cape Town, November 2019, highlighted the need for more understanding of what, where, when, why and how to scale up successful approaches; that we do not yet know enough about how to do it ethically and appropriately. The SASA! Programme spoke of how good models may be spoilt: when they are adapted by other organisations or pushed towards scale, corners are cut and the ethics of the approach is lost. For example, programmes of intervention which have been tried, evaluated and judged to need a certain number of sessions, may be cut – to save resources and cover a wider audience more quickly. In this cutting, implementers will leave out important steps in the process of social norms change and social change (for example, by working only with young women, or men, when an approach is originally designed to promote better communication between men and women and to encourage change in the attitudes, behaviour, etc., of both). These "quicker-fix" approaches *may* have tangible, initial success, but are not likely to have as much sustained long-term success as a more measured approach would have³⁵.

5.2.2 THE STEPPING STONES PATHWAY IN SOUTH AFRICA

Very recently, the South African government has committed to rolling out Stepping Stones – Creating Futures as part of its major push to prevent VAWG. Here, we follow the path of how this achievement was reached.

Box 5: Stepping Stones – Creating Futures in WW-VAWG

Stepping Stones was originally published, in 1995, as a training package on "HIV/AIDS, communication and relationship skills"³⁶. The package comprised 17 sessions and workshops, and was designed to take place over several months. Over the decades, Stepping Stones has been translated into a number of different languages, been through many adaptations and different versions have been published – moulding it to new issues and different audience requirements.

³³ See the 12+ Rwanda programme, available at <https://devtracker.dfid.gov.uk/search?query=12+Rwanda&includeClosed=1>

³⁴ Interviews conducted for Final Evaluation

³⁵ See, for example, SASA! Presentation, SVRI 2019

³⁶ Copyright Alice Welbourn and Strategies for Hope

Over time, evaluations have shown Stepping Stones to be an effective approach and method. In the WW-VAWG programme in South Africa, Stepping Stones was combined with the Creating Futures livelihoods strengthening intervention, to work with young women and men in townships in Durban.

The WW-VAWG evaluation of Stepping Stones-Creating Futures was led by The University of KwaZulu-Natal and combined quantitative and qualitative research. The project was implemented by Project Empower, which also carried out qualitative field research. The project was found to have had a significant effect with men, but quantitative results with women were essentially flat (no significant improvement in indicators of violence and well-being).

Source: Authors

In spite of the mixed results, Stepping Stones – Creating Futures is now at the centre of a government-supported scale up. This is how it happened:

WW-VAWG was involved in the planning and organising of the National Gender-Based Violence and Femicide Summit³⁷ that was called, following civil society pressure, by the South Africa President, Cyril Ramaphosa, in 2018, and WW-VAWG evidence informed the President's speech³⁸. One of the resolutions from the summit was to establish a GBV and Femicide Council which led the development of a GBV National Strategic Plan³⁹ and this was drafted using WW-VAWG evidence to shape the prevention pillar.

The following year, the WW-VAWG Consortium Director led the drafting of the ZAR1.6 billion (£82 million) emergency fund announced by the President in Parliament on 18 September 2019 to fight GBV in the country⁴⁰. One of the priorities for the fund is the national roll out the VAWG prevention interventions to 44 out of 52 districts, and will include Stepping Stones - Creating Futures. A key actor interviewed by the Independent Evaluation Team, Dr Chandre Gould from the Institute for Security Studies (ISS), noted that *“there is an enormously important ‘policy moment’ happening in South Africa currently. What Works are very present in the conversation and are driving it hard with evidence”* (RUPR, March 2019).

What did the programme do? What pathway did WW-VAWG follow towards uptake and scale up?

- 1. Building on reputational assets: (a) The programme secretariat's base, in the SA-MRC** in Pretoria, plays a big role in its ability to influence. Those involved in the secretariat and the project, have deep knowledge of both the political and development context for VAWG prevention in the country; many of them have a solid track record of working in the sector in South Africa and therefore know the community of practice that includes activists, policymakers and academics; and are 'on the doorstep' of those they are seeking to influence so can respond quickly and efficiently to opportunities that present themselves; and **(b) The project implementing agency**, Project Empower, although small, has also built up a strong reputation for delivery. The Director, Laura Washington, is known and respected for her commitment to the work and her analysis and approach to social change.

³⁷ See <https://www.gov.za/nationalgendsummit>

³⁸ See <http://www.thepresidency.gov.za/newsletters/address-president-cyril-ramaphosa-presidential-summit-gender-based-violence-and-femicide>

³⁹ See <https://www.gov.za/documents/national-gender-based-violence-and-femicide-strategic-plan-draft-12-aug-2019-0000>

⁴⁰ See <http://www.thepresidency.gov.za/speeches/address-president-cyril-ramaphosa-joint-sitting-parliament-crisis-violence-south-africa%2C>

2. **Seizing the moment:** The programme managed to seize the moment, especially around accepting positions on task forces, technical groups, advisory committees and other standing instruments of government where policies get framed and the machinery of change begins. For example, Professor Jewkes (WW-VAWG Director of C1 and the Secretariat) as member of the technical team for the National Young Women and Adolescents Campaign, developed the Theory of Change for the national campaign and drafted the plan related to GBV prevention. Rachel Jewkes, the Secretariat chair was also Chair of the TTT developing policy for GBV response and prevention in the higher education sector. The campaign document referenced What Works evidence reviews 2 and 3. MRC staff, Nwabisa Shai and, lately, Tirhani Manganyi, were also very active in the GBV and Femicide policy development and planning.
3. **Being activists and academics – understanding the need for evidence and how to make evidence work:** Many of the team wear two hats: as academics and activists. They can therefore understand what is needed, by actors on both sides, to make progress. WW-VAWG staff have been pragmatic about not having either time or resources to change everything, and have prioritised opportunities that allow them to propose solutions that are context specific, home-grown and evidence-based. They also have the resources and support of the secretariat. This ‘granular and practical’ approach has been extremely effective.
4. **Identifying challenges and limitations – choosing to work with government:** SA-MRC staff recognised the challenges and limitations – as well as the upscaling potential – of working with government. In South Africa, a high level of social welfare processes are provided by non-government organisations (alongside the governments complex social protection system); budgets are under enormous pressure and the economy has slowed to the point of recession. The state is very unlikely to have new budget lines for prevention programmes and may work to find “new” VAWG-prevention funds in other budget lines. Creative ways will need to be found both to argue why, and then identify how, to integrate prevention interventions into mainstream programmes, at their own expense. There is a ‘missing middle’ in government capacity to access, understand and use evidence and current mechanisms do not adequately recognise or resolve this issue. However, working with and through government obviously offers good chances to institutionalise attention to, and action on, key issues affecting women’s rights and well-being.
5. **Working with Coalitions for Change:** WW-VAWG is very aware that change is rarely brought about by a single research study or an individual institution. It has been careful to work in concert with, and in support of, a broader coalition for change. The programme made full use of the progress being made across the country by, for example, the SA Violence Prevention Forum (VPF) and civil society groups, and used their role as ‘the providers of evidence’ to negotiate seats at important tables. They used their influence and standing to push the prevention agenda with women’s groups and other NGOs. *“We have helped others to understand and use the language of evidence”,* said Nwabisa Shai. *“We use the examples of the What Works programme to explain the idea of ‘an evidence base’ and we make that accessible to those who would not normally know what we were talking about”.* (KAI for Final Evaluation, October 2019)
6. **Acting as Advocates – keeping the pressure on:** Programme staff ‘behaved like advocates’, with evidence replacing the usual campaigning messages. For example, SA-MRC colleagues attended a big South Africa conference on GBV and femicide that clashed with the final WW-VAWG conference in Nepal; Professor Jewkes responded positively to a request for advice from the President, who was himself responding to public anger over VAWG; WW-VAWG has built relationships and is working with the Interim Steering Committee on GBV and Femicide,

which is guiding the National Treasury on how to invest funds to address VAWG, and encouraging re-direction of funds from other budget lines (R1.1 billion)

5.2.3 THE PATHWAY TOWARDS UPTAKE IN GHANA

The second example looks at the pathway towards uptake in Ghana. Here, we cannot yet show the same kind of results as in South Africa. But the programme has exerted significant influence, and a large amount of interest, and growing commitment, has been generated. The example demonstrates that uptake, leading to high-level investment, cannot be guaranteed.

Box 6: WW-VAWG Work in Ghana

WW-VAWG carried out two interventions in Ghana. C1 was an evaluation of the Community-Based Action Teams (COMBAT)⁴¹ project that was designed and implemented by the Gender Studies and Human Rights Documentation Centre⁴² and evaluated by the University of Ghana School of Public Health⁴³. COMBAT. A separate costings study was carried out as part of C3 with IPSOS MORI responsible for training, sampling and data collection and University of Ghana ISSER doing the QA and primary analysis of the work.

The Gender Centre works to increase the visibility of VAWG as a social issue, improving the public's knowledge and understanding of its impact on the status of women and girls, establishing a community-based response system for the support and protection of women, and by providing counselling services to ensure effective response to all whilst sharing best practice and key lessons learnt with other stakeholders. The COMBAT model/approach was developed over a decade ago by the Gender Centre as part of a rural response to VAWG implemented in over 20 communities in different regions of Ghana. COMBAT, with equal representation of men and women, are selected and trained on types, causes and impact of VAWG, family laws, conflict resolution, advocacy and counselling. COMBATs also serve as a bridge between community members and the police, as well as other state agencies to ensure a consistent and coordinated response. Evaluation has shown decreases in violence, of over 50%.

A separate study, on the cost of VAWG, was carried out as part of C3. IPSOS MORI was responsible for training, sampling and data collection and University of Ghana ISSER did the QA and primary analysis of the work.

Source: Final Evaluation Thematic Paper 2 and www.whatworks.org.za

The Domestic Violence Coalition (DVC), an association made up of civil society representatives and individuals which includes member of the Ghanaian diaspora, was granted an in-person roundtable meeting with the President of the Republic of Ghana, Excellency Nana Addo Dankwa Akufo-Addo, on the 2nd August 2019. Others at the meeting included high-ranking officials from the Ministry of Works, Ministry of Education, Bank of Ghana and the President's Gender advisor. A specific demand was made to increase funding and establish a minimum annual investment to the government's Domestic Violence Fund in a letter sent at the same time by the DVC, citing evidence from the C3 study.

⁴¹ Tackling the Pervasive Social Issue of VAWG: Using Community-based Action Teams to Prevent Violence against Women and Girls <https://www.whatworks.co.za/global-programme-projects/gender-centre-ghana>

⁴² <http://gendercentreghana.org>

⁴³ <http://publichealth.ug.edu.gh>

After the meeting, the Gender Advisor was designated to work with the Coalition to follow up on commitments made. In January, she got back in touch to say that a range of major private sector companies had pledged financial commitments for supporting GBV initiatives in the country. The DVC were arranging to meet to get clarity on the terms of this support, and to confirm how concrete were the commitments. A seminar with the African Development Bank (ADB) was applauded for building the capacity of staff by providing new knowledge and perspective on integrating the macro impacts of VAWG into existing macro policy modelling. A senior economist of the ADB Macro Policy Unit said: *“The presentation by Dr Nata Duvvury was very timely as it came right before the Gender Global Summit (25-27 November 2019) held in Kigali.”*

The C3 study has been used and cited in a nationwide survey and advocacy project led by EAA Media Productions called 'Schools, Sex, Safety,' which is run in partnership with UNFPA and other local partners. This project drew heavily on the WW-VAWG study to design their nationwide survey, and its findings will be woven into the media campaign and included in the Media Summit.

WW-VAWG studies are systematically used by members of the DVC and the quality of the evaluation work is highly regarded, being cited by some as giving the community of dedicated advocates and campaigners the evidence they were lacking to push for change. *“People are sceptical about qualitative work. People like numbers. With advocacy on COMBAT work I’ve been in the field and seen it; I’ve talked to people who have been positively affected by it. We now can put a value on it (because of the evaluation). We can say what is the value for money for prevention with confidence, and the media and policymakers, as well as ordinary people like that”* says Professor Akosua Darkwah, Associate Professor and Head, Department of Sociology, University of Ghana and member of the DVC.⁴⁴

What did the programme do? What pathway did WW-VAWG follow towards uptake?

The programme has had obvious successes in working for uptake. These were aided by some of the positives that we identified in the Stepping Stones example, above.

1. **Building on reputational assets:** The Gender Centre and the university have significant reputational assets. Dorcas Coker-Appiah, CEO of the Gender Centre, and Professor Akosua Darkwah are well-known nationally and internationally and have built up commitment to gender equality in Ghana. Their work and opinions are respected and trusted. The DVC has a strong voice, and is supported by influential members of the diaspora. It was active in pushing for enactment of the Domestic Violence Bill, 2019.
2. **Seizing the moment:** Some moments of opportunity have been seized. When the DVC attended the Presidential Round-table, and Professor Duvvury presented to the ADB seminar, they were able to seize the moment and also create the opportunity for increased attention to VAWG (though some opportunities have been missed, see below).
3. **Being activists and academics: understanding the need for evidence and how to make evidence work:** Like most women working for gender equality and equity, Dorcas Coker-Appiah and Professor Dorkwa are both activists, respected academics/ practitioners. As a lawyer, Dorcas Coker-Appiah has a deep understanding of the legal and regulatory environment. They understand what is needed, to make progress. The DVC is a growing voice for change.

⁴⁴ Information on WW-VAWG in Ghana extracted from the Final Evaluation Thematic Paper 2, on Research Uptake

4. **Working with Coalitions for Change:** The situation of major WW-VAWG actors within the University and the legal field, and their engagement in the DVC, ensure a multi-actor approach to pushing for change. Actors, both inside and outside WW-VAWG, have been able to use the growing evidence to support their requests and demands.

Challenges

In spite of successes in getting the evidence out there, and getting people in power listening, there have been limitations and obstacles along the pathway towards uptake. Four specific challenges have been offered as explanations of the limited uptake and use of WW-VAWG evidence in Ghana.

1. **‘Misalignment’ of evidence supply and evidence need:** This limits uptake of the, very positive, COMBAT evaluation evidence. There is no DFID VAWG/GBV sector programming, and so the findings from the COMBAT, though compelling, have not been tailored specifically to speak to DFID’s health and education sector programmes. As the evidence stands, the programme needs to target others working on relevant programming – such as the UNFPA with its focus on family planning, maternal health and sexual and gender-based violence – for uptake to happen.
2. **Missing some moments of opportunity: knowing how to match evidence with need:** DFID see potential in the C3 work on costings and would have liked to see more efforts by the programme to link the study to the scandal on sexual harassment that hit the national headlines in 2018⁴⁵. They recognise that such stakeholder engagement activities would probably have been outside of the scope and budget of the researchers. When asked, the researchers said that they could not easily speak to this issue with authority with the research that had been undertaken. This apparent ‘mismatch’ is typical of the conundrum facing programmes of this type. It is only resolvable when there is sufficient time allowed for solid relationships to be built between researchers and those who want/ need evidence.
3. **The “Missing Middle” in government:** This a ‘missing middle’ at the heart of government that limits government’s capacity and appetite to understand and use evidence (in this and other sectors)⁴⁶. DFID can support this: “The Gender Equality Working Group (co-chaired by DFID with the Canadians) has been discussing how to provide technical assistance to help the government to strengthen the capacity to work in this area, in order to help scale up.” The DFID office, and specific individuals within it, have played an active role in facilitating visibility and uptake of the findings in government. But 2020 is election year, and this brings additional challenges to following through on promises already made.
4. **The appetite and capacity of the media to report issues around VAWG:** An impediment to wider uptake via the media relates to the appetite and capacity of the media to report issues around VAWG. *“The reality is that more and more media – with crunched numbers, fewer skilled journalists and more interns – have the time (or will take the time) to read through the research findings and reports”* says experienced journalist and media trainer Esther Armah⁴⁷. *“I would say that an impediment to the reporting of the What Works programme is its presentation. It is not media friendly, unwieldy, and just too long. It is sent in too academic a format – it needs to be broken down in a way a journalist in Ghana can engage the story easily and report it. Without that kind of change, you limit its reporting possibilities.”*

⁴⁵ KAI with DFID economic, social development and health advisors January 2020

⁴⁶ KAI SDA DFID

⁴⁷ KAI with Esther Armah, EAA Media Productions <https://www.earmah.com/>

- 5. Under-use of Southern Partners:** The programme did not always fully use Southern partners in a way that optimised uptake in local contexts. For example, Southern researchers were sometimes contracted with a limited remit: to oversee data collection and conduct preliminary analysis but not to help frame and communicate findings in ways appropriate for uptake by local/national audiences, or to help identify and engage local policy audiences. This limited both uptake and potential for learning about the demand for evidence on this topic.

It is very hard, for any programme, to address some of these limitations. But some, particularly now, with the experience of working through Phase 1, can be tackled in future work. Further work will need to move towards mainstreaming prevent-VAWG in all relevant sectors (health, education, WASH, justice etc.) Understanding this wider environment can be built in from the start of programming.

5.2.4 LEARNINGS ON POSITIVE PATHWAYS

A key learning is that: Positive Pathways are not (often) short or straightforward

The Stepping Stones – Creating Futures pathway shows the importance of knowing and understanding the factors influencing commitment at higher levels. At the time, WW-VAWG were not thinking too consciously about the steps they were taking. It was not a planned pathway, but an opportunistic combination of existing skills and reputation, and the ability and flexibility to seize emerging opportunities. When asked, by the President, for advice, on something which could have positive impact on the lives of women and girls, it would have been odd to spend too long deliberating whether (or not) to give it. The investment of time and resources paid off.

The Ghana example shows that we need to be thinking about Research Uptake, and our pathway to it, right from the outset. Wherever possible, we need to be active in creating moments of opportunity, and be ready to seize them when we have done so. “Keeping the push on” is vital. That means working closely with people whose major commitment is to activism, rather than implementation. From the start, we need to map out where the barriers to uptake of evidence, and investment in prevent-VAWG, are likely to be. There are participatory methods available to assist this⁴⁸.

In retrospect, thinking about the pathway can help us be proactive in the future. Building up reputational assets, spending time on relationship-building, even with people and organisations who do not immediately seem to share all our values, seizing the moment and continuing to push for change, even when barriers seem insurmountable, all increase the chances that change will happen. To be able to do this, we need to plan flexibility into our budgets. Dedicating an amount of budget, for response to emerging opportunities, is very useful.

5.3 FURTHER ALONG POSITIVE PATHWAYS

5.3.1 IN-PROJECT AND INTER-PROJECT PATHWAYS

The two examples we have given seek to identify pathways to RU, and stimulants to wider, social change. We can also look for pathways at other levels. We intend to trace pathways through individual project interventions. We might look, for example, at the relative change-impact of community conversations (in Rwanda) and work in schools (Pakistan)⁴⁹. We can trace how context, social organisation and culture affect the pathway to what works. We can, for example, set out the steps to identify why, in Rwanda, the pathway through couples work was highly successful, whilst the work directly in the community appears to have less so (though, this does not mean that the approach itself

⁴⁸ See, for instance RAP in Brocklesby, M.A., and Crawford, S.

⁴⁹ This was done during the End Child Marriage Programme final evaluation, in Ethiopia.

was not likely to be successful – it may mean, for example, that it was too early to judge success, and that more time was needed for the intervention – an important learning). If we look more closely at Stepping Stones, we may identify more about why the results for women were flat. This may lead to doing work with women in different ways, or in setting different indicators of what the pathway, towards positive change, looks like for women.

None of the pathways we may identify is a “recipe” for what will work everywhere: **context is key**. But, as we have seen so far, we can draw conclusions on a) what is most likely to be necessary and b) what is most likely to work in which contexts⁵⁰.

5.3.2 IDENTIFYING PATHWAYS AS WE WALK THEM

In future VAWG-prevention work, it would be useful to know more about Positive Pathways during implementation. This might be achieved by expanding the range of monitoring methods in projects and interventions. We need to strengthen further intra-project/intervention assessment on the level of activities. This often gets stuck at the “how many people attended what, when” level. We need to know more quickly about *processes* and experiences on the way to reaching outputs and outcomes. One way of contributing to this, is to give more attention to Practice-Based Knowledge and Learning. We say a bit more about this in the final section on recommendations.

6 CONCLUSIONS AND RECOMMENDATIONS

In this section we give a summary of our conclusions and recommendation in relation to innovation in Capacity Development, Partnerships and Positive Pathways. Conclusions and recommendations here, are in support of, and additional to, those given in the main Final Evaluation report.

6.1 CONCLUSIONS

6.1.1 WITH INNOVATION, WE CAN SEIZE THE MOMENT

Building chances for innovation into programme DNA means that we can seize moments of opportunity, as they arise. “The Time is Now” means that we need the flexibility and creativity to respond quickly and effectively to changing circumstances and situations. Outside WW-VAWG, successful enterprises, of all sorts, acknowledge the need for continual innovation and work to create space for innovation within their planning, ongoing work, and work assessments⁵¹. In WW-VAWG, we have seen how creative thinking and innovation in programming and interventions, in capacity strengthening and in the new types of partnership built, have brought us closer to the ultimate goal of preventing VAWG. Being flexible, and open to doing things in new ways, creating new coalitions and commitments to VAWG prevention, can lead to opportunities for effective RU, at all levels.

6.1.2 ONE SIZE DOES NOT FIT ALL

In working for VAWG prevention and social change, one size does not fit all. Goalposts change the whole time. Getting at the root causes and solving them is so complex and needs openness to

⁵⁰ Outside WW-VAWG, see for example, debate around Public Declarations on ending FGM/C. We have argued that these are more relevant in contexts where the level of social “belonging” centres on the community, than in areas where belonging is centred on the family (Crawford, S. et al, 2018, Final Evaluation of the Sudan Free From FGM/C programme).

⁵¹ See, for example www.hbr.org (Harvard Business Review, Hofstede, G. (2011). Dimensionalizing cultures: The Hofstede model in context. Online readings in psychology and culture, 2(1), 8.

innovation, so that causes can be addressed from as many different directions as possible. Understanding the context of work, is key. So, too, is the ability to monitor the context constantly and to be ready to adapt and respond to any changes within it. We need to remember that context change may come not only from the “near” circumstances of our work, but also from national-level and global political and social shifts.

6.1.3 SOCIAL NORM CHANGE OR SOCIAL CHANGE? POSITIVE PATHWAYS TO SUSTAINED, POSITIVE CHANGE

WW-VAWG has shown that positive change away from violence can happen. It happens in projects that aim to promote fundamental social change (that is, change in the power relations between men and women, and between older people and younger ones, and moves towards gender equity etc.), such as Stepping Stones-Creating Futures (South Africa) and Indashyikirwa, Rwanda. And, it happens in projects that focus more on psychotherapeutic approaches and behaviour change, such as the SHARPZ approach to alcohol and abuse, in Zambia. The question remains: which approach is more sustainable? Is it one that focuses on individual behaviour and response to it (SHARPZ), one which focuses on particular social norms (such as attitudes to IPV) or one which focuses on changing fundamental values and social relationships (e.g., gender equity)? Is it necessary to work for a wider and deeper range of changes, or will a single-issue approach do? If, in future, we can embed an understanding of Positive Pathways throughout the work of our interventions, we would have more hope of answering these questions at an earlier stage.

Experience in other programmes, dealing with aspects of VAWG, suggest that the deeper, social change is essential if women and girls are to be protected, in the longer-term, against violence. For example, it is relatively ‘easy’ to promote short-term change away from FGM/C – with communities declaring against it and avoiding cutting during the usual ‘cutting season’. It is quite another problem to ensure that people do not find other times, places and ways to cut their girls, or revert to cutting in the following year’s ceremonies⁵². If we are to identify the most cost-effective and sustained routes to VAWG-prevention, we cannot make our judgements only by short-term, or even short-to-medium term, successes or the lowest cost options. We need to look at the triggers which “trip up” success and lead to renewed violence. Most models of change⁵³ now recognise that change is not linear. The CR2 model of Social Change, used by the IE team, shows that sustained change needs ongoing inputs so that it can be maintained. A single period of positively changed behaviour does not, necessarily, signal long-term change. In addition, whilst evidence is crucial, on an individual and a societal level, it is not enough.

6.1.4 INNOVATION WILL ALWAYS BE NEEDED

There does not come a point when innovation is no longer needed. Experience, in WW-VAWG and in other programmes⁵⁴, has shown that the ability to work for and *maintain* achievements, depends, at least in part, on thinking and acting innovatively in response to dynamic contexts and circumstances. This does *not* mean that approaches and projects cannot be replicated and brought to scale. It means that there must be flexibility *within* the approach, as well as adaptations and innovations, to make it appropriate to peoples, groups, and communities in differing circumstances, and from different backgrounds. This is how successful implementation approaches, such Indashyikirwa or Stepping Stones, can evolve and remain relevant outside the original areas of implementation.

⁵² This argument is developed further in Thematic Paper 3, Innovation and Positive Pathways

⁵³ See for example, End Child Marriage Programme (ECMP), Ethiopia

⁵⁴ See for example, the Sudan Free from Female Genital Mutilation/Cutting Programme, Phase 1, ECMP, Ethiopia

The importance of continual innovation, and adaptation to changing circumstances, needs to be taken into account when we are planning follow-up assessments on whether interventions have achieved sustained change. In extremes, conflict, for example, may destroy all achievements (destruction of all systems and services in most of Syria and Yemen). But even “minor” changes – such as change in local government, may have profound effects on the sustainability of positive social change (for example, lack of local government support to women’s empowerment, injection of conservative views etc.).

The ability to think creatively, to adapt and to find solutions to problems, as they emerge, is what maintains and sustains positive social change. We need to be able to identify and respond to constantly changing social dynamics.

6.1.5 INNOVATION LEADS TO MORE INCLUSIVE WORK

WW-VAWG Components have developed ways in which to work with women and girls in exceptionally difficult circumstances, and projects have been able to encourage and maintain participation by people who might not normally sustain their interest in project activities. This is most evident in the work of Components 1 and 2. Component 3 also worked with the most marginalised people, for example in South Sudan. There, timing, resources and the outbreak of conflict meant, however, that, C3 were unable to carry out their planned qualitative survey, which would have given greater insight into the situation of the most marginalised people. However, by moving to Syria, they also worked with very vulnerable people.

Reaching Highly Marginalised People Requires Innovative Approaches

To reach highly vulnerable people, ethically and appropriately, requires innovative and creative approaches. Examples of this include C2’s development of research methods and tools for research in South Sudan, and Project Empower’s ability to retain an audience in the Durban townships – partly because of the skills of their facilitators. Conversely, the project in Bangladesh ran into some problems because it could not find new and appropriate ways to “bring on board” the owners/managers in the garment factories, where women are experiencing VAWG, and may be working in conditions of modern slavery.

When DFID requested that WW-VAWG give more attention to disability and VAWG, the programme was able to respond creatively and ensure that greater attention was given to including women and girls living with disabilities. The evidence briefs and video on disability, produced by the programme in 2017 and 2018, were important in addressing this issue⁵⁵.

6.1.6 INNOVATION INCREASES EFFECTIVENESS, VFM AND CHANCES FOR SUCCESS

WW-VAWG has shown, across the programme, that innovation, being open to creative and new ideas and adaptations, can greatly enhance effectiveness and lead to better results. Innovative approaches – to developing interventions, capacity development, research uptake and partnership have given us a great deal of new knowledge and understanding about what work to prevent VAWG. It has also done

⁵⁵ van der Hiejden, I, and Dunkle, K (2017) What Works Evidence Review: Preventing violence against women and girls with disabilities in lower- and middle-income countries (LMICs), and Disability and Violence against Women and Girls: Emerging Evidence from the What Works to Prevent Violence against Women and Girls Global Programme (2018) Kristin Dunkle, Ingrid van der Heijden, Erin Stern and Esnat Chirwa.

much to increase our understanding on why it works and how. Innovative thinking has also helped to develop ways to find out more about VAWG in humanitarian and conflict situations and to ensure that knowledge is disseminated. As the costs of VAWG become clearer, governments and other actors can understand more on why prevent-VAWG interventions represent good VfM. Nevertheless, there is still a great deal to know, and many new things to be tried and tested in future work.

6.2 RECOMMENDATIONS

The following are recommendations for future prevent-VAWG programming. They are ones which relate specifically to innovation. For our full set of recommendations, please refer to the main Final evaluation report, Thematic Paper 1 on Research, and Thematic Paper 2 on Research Uptake.

- 1. Make space for innovation throughout programming, and in all interventions and projects. Adaptive Management and flexibility in budgets can support this.** Throughout this paper, we have made the arguments for ensuring that spaces for creativity and innovation remain open across all interventions. To make this happen, we need to write the systems, mechanisms and budgets to support it, into out ToRs and programme designs. The innovation budgets – to allow creative response to emerging needs and opportunities – need to be included in planning. Innovation needs to be part of prevent-VAWG mindset and practice. Innovation can also be supported by working with, and for, Adaptive Management (AM)⁵⁶. Embedding Monitoring, Evaluation and Learning systems for Adaptive Management into programming can create the spaces for innovative problem identification and problem solving. Course correction can become expected and accepted as a step towards VfM and stronger results.
- 2. In multi-component programmes, aimed at preventing VAWG, an innovative approach to coordination is needed.** To ensure synergies in multi-component programmes, we need to build in requirements for, and possibilities of, strong coordination between all components, from the design-concept stage. We need to recognise fully that good coordination will facilitate the synergies, which bring stronger results. Coordination is driven by incentives: immediate or anticipated benefits for those who actively coordinate. Good coordination takes dedicated time, resources and budgets., and creativity. It takes real effort and flexibility to build trust between partners and promote the best ways of working together, in coordination and complementarity.
- 3. Continue to develop new approaches to monitoring and measuring VAWG-prevention.** It will be useful to expand the type of indicators used to assess progress towards VAWG prevention. More, good quality participatory qualitative research will give us a more nuanced understanding of the process by which VAWG is reduced and ended. We need to give space to greater understanding of how, why, and when women develop the kind of agency that enables them to choose not to put up with violence. This can enable us to develop new sets of indicators, which can follow women's positive pathways to empowerment and being violence-free.
- 4. Build on the capacity development Approaches of WW-VAWG Phase 1. Strengthen, even further, their relevance to, and ownership by, the global South.** There are many potential advantages to developing the coaching/mentoring approach to Capacity Development even further. We might draw on modern approaches to peer coaching, and to coaching across

⁵⁶ AM is the “intentional approach to making decisions and adjustments to programmes, projects and other interventions, in response to new information and changes in context.”

cultures⁵⁷. Some coaches (for example Judith Okonkwo⁵⁸) have successfully used methods which draw on context-specific, cultural references. Coachees have, themselves, helped to develop these and have found them highly relevant to development of their skills and realisation of their potentials.

In learning and sharing meetings, like the ASMs, there is good potential to give even more space to the perspectives from the global South. More effort, and sometimes more budget, is required to enable this to happen. The results, however, have been shown to be highly valuable and, sometimes, to be more interestingly presented than perspectives from the global North. The richness of the results, and the potential longer-term benefits, far outweigh the cost.

5. **Recognise that innovative partnerships are not always new ones.** In programme design, build on Phase 1; do not abandon Phase 1 partners. It is unfortunately the case that many small, implementing organisations are heavily reliant on single funding sources to survive. In future work, it is not possible, or desirable, to continue funding to all Phase 1 implementing organisations. But there can be other ways to involve them in continued learning, sharing and mentoring of new implementing partners that come online. A balance needs to be found between operating in the manner of many UN agencies (which often tend only to fund tried and trusted civil society organisations who are already partners) and working only with new organisations, which may have little or no experience in the field. It is not indicative of an ethical approach if organisations “go under” once programme funding ends.
6. **Build Reputational Assets, to assist with Research Uptake, from the Outset:** It is important to recognise the advantages of reputational assets, where they already exist (for example, in South Africa) and to build them, where possible. Before research leads to concrete results, researchers, and implementers, may feel wary of putting themselves under public scrutiny. But there is much to be gained from sharing experiences on our approach: for example on inclusion and methods used to ensure that Southern partnerships are partnerships of equality, etc. This can increase ability to influence across a wide range of actors. It can also feed into our identification and analysis of Positive Pathways.
7. **Continue to identify and assess Positive Pathways to prevention of, and ending, VAWG.** In WW-VAWG we built on previous experience and understanding and learned a great deal about what it will take to prevent and end VAWG, particularly IPV. But this is only the beginning. We have not yet been able to identify as much as we would have liked to about the Positive Pathways that lead to prevention. We know much more about the factors that are needed within implementation projects (a rights and gender approach, good facilitation, dialogue, working with women and men etc.), but it will take another phase to get close to full confidence in how to programme, how to bring programming to scale, and how to encourage governments to work for VAWG prevention as a matter of everyday business. **Practice-based Knowledge and Learning** will be essential in helping us build up real-time understanding of the Positive Pathways we need to follow. Combining this with more traditional methods of monitoring and evaluation can provide a much more nuanced picture of what we need to do, when, where and how, to prevent VAWG.

⁵⁷ See, for example, Cross-Cultural Coaching Lesley, M *et al.* (2011) Coaching for Transformation, Pathways to Ignite Personal and Social Change, 2nd edition

⁵⁸ Okonkwo, J. Coaching using Leadership Myths and Stories: an African Perspective in Passmore, J, ed.(2010) Leadership Coaching

- 8. Find out more about what drives successful and ethical scale-up and scale-out.** In future prevent-VAWG programming, there will be demands to scale-up approaches that have worked in WW-VAWG Phase 1, and to encourage government financial commitments to this. The issue is, however, that we still do not know enough about what, when, why, where, how, and with whom, to work for scale-up. If they commit at all, governments (and donors) will always try to go to scale as cheaply as possible. But we need to set strong ethical boundaries and to ensure that we fully understand how to scale up initiatives that have worked well with smaller constituencies. We cannot make compromises that may endanger people's rights and safety. To go to scale ethically, we need to be able to think creatively and innovatively – not just about how to scale up in practice, but also about how to get organisations and governments to commit to maintaining values and standards necessary for successful implementation and sustained change.

ANNEX 1

CAPACITY DEVELOPMENT – SELF-ACTUALISATION

This Appendix gives the story of Ratna Shreshta, of VSO Nepal. Ratna presented her story at the Sexual Violence Research Initiative (SVRI) in Cape Town, South Africa, in October 2019.

We give the presentation in full. It is a great example of how innovative, well-tailored capacity development promotes both the chances for success of particular development interventions and helps to create the pool of people who will work, at all levels, for their own country's development. The capacity development and expansion, in which Ratna participated, combined: training, job-based coaching/mentoring, new work challenges and opportunities to share and develop learning and skills with partners and peers. She points to the benefits that this has brought, to herself, her organisation and, most importantly, the people with, and for whom, she works. She shows how the best capacity development has the development of the whole person at its core. The transfer of knowledge and skills is important, but secondary.

Ratna's Story

"Namaste I am Ratna Shrestha from Voluntary Services Overseas (VSO) in Nepal working as a Gender Inclusion and Protection Specialist.

VSO was granted What Works (WW) financial support for the "One Community One Family (OCOF)" project in Baglung district, Nepal from July 2015- Nov 2018 and I joined VSO and became the part of WW-VAWG family in Sep 2015. This was my first project working with both academics and practitioners, basically a fusion of research and development work. At the beginning I found it very difficult to initiate our efforts because the technical terminology/language of the research is different from the terminology and approaches used by the development work. In addition, the family-centered approach was new and challenging in the Nepalese context where there is a culture of patriarchy, deeply embedded since childhood, and which promotes a culture of subordination, discrimination and suppression of daughters and daughters-in-law.

But I am very grateful to our technical advisors (TA) from What Works, Dr Nwabisa Shai and Ms Alice-Kerr Wilson, for the support received both in research and intervention implementation and we were able to accomplish our mission successfully. Weekly online meeting with both TAs provided clarity about the project, enhanced my capacity and level of confidence in both research and curriculum design that can change social norms and behavior of community members. Besides I would like to appreciate support received from Samantha Willan, Leane Ramsomar, Tirhani Manganyi, Esnat D. Chirwa and Julienne Corboz.

I remember my first participation at the What Works Annual Scientific Meeting in Dubai, where all grantees, academics and donor agencies were present. I was so overwhelmed to be the part of WW-VAWG and demonstrate our intervention through role play. The forum was a great opportunity to interact, learn and share the intervention with other countries. At this meeting, VSO established and strengthened relationships with friends from International Alert in Tajikistan and Help the Afghan Children from Afghanistan, where similar interventions were on-going. However, whilst I found the capacity development days useful, I was less interested during the actual scientific paper presentations and asked myself what the importance and relevance of these were to our work on the OCOF project in Nepal. But later I understood the importance of Randomized Control Trials and Longitudinal research, the importance of having evaluations with protocols and ethical approval, in order to be able to demonstrate robustly the change and impact on lives, especially in the cases

related to violence against women and girls. The training that we received from Professor Rachel Jewkes on quantitative data analysis in Tajikistan sowed a seed of interest on evidence based scientific research. Therefore, in the second and third scientific meetings I was more interested in attending and learning from the papers presented by experts. It further helped in increasing my confidence as a contributor in the research in the project.

As the project came to an end, we had a unique opportunity to leverage our OCOF evidence to get funding to take the work forward. I was a key part of the team that helped to win a much larger award of £3.4M. from DFID's security and justice programme in Nepal for **Strengthening Access To Holistic, Gender Responsive, And Accountable Justice In Nepal** (SAHAJ). Findings from this new programme, which will also include robust research, will help DFID design the next phase of its programme in Nepal. The new funding for SAHAJ meant that my time was required to re-contextualize the approaches from WW-VAWG for a new programme – this was a great experience. It is also about creating a pool of experts within VSO Nepal with more emphasis on social norms change. This was also another contribution of WW-VAWG for organisational capacity growth for tackling issues of gender-based violence. VSO Nepal together with consortium partners are now scaling up the learning without compromising on the quality with systematic efforts and selection of partners with diverse expertise.

Going back to 2015 when we began our WW-VAWG journey, VSO strongly supported SDG 5, but there was debate whether we should be working to address GBV and VAWG. Our experience with WW-VAWG has helped to establish that relational models in which volunteers work to sustainably support inclusion, accountability and local resilience to reduce GBV can be very effective and bring real value to efforts on these issues in many different contexts. Some members of our team have been promoted to global roles. Others, like me, are in important roles on projects. And also we have many other country offices and global experts visiting us to understand our experiences from WW-VAWG and VSO Nepal is partner of choice for many organizations in Nepal.

Moreover, WW-VAWG motivated me to enhance my knowledge. As a result I enrolled in a PhD in Gender Studies in Nepal in 2019. I believe learning is a never-ending process and the knowledge I gained in my academic field will always be applied in the field as practitioner to uplift the life of subordinated, dominated and oppressed groups of people and ensure gender equality is achieved in both public and private sphere of their lives. . It is not only me that is benefiting from the learning but it is more of organisational capacity for transforming social norms and practices, for promoting gender equality and very importantly, it is the participants in our programmes who are gaining the benefit.

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