

# Evaluation of the Rural Response System (RRS) to Prevent Violence Against Women and Girls in Ghana

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# Background

❖ **Like most low-and middle income countries (LMIC), violence against women and girls (VAWG) is driven by patriarchal and socio-cultural values than condone VAWG.**

❖ **Studies have highlighted high prevalence of violence and tolerance of violence against women in Ghana. <sup>1</sup>**

GDHS (2008) found:

- 1 in 5 women experience sexual and/or physical IPV in the past year <sup>2</sup>

RRS Baseline survey found:

- 21% of women aged between 18 -49 years experienced sexual and/or physical IPV <sup>3</sup>
- 23% of men aged  $\geq 18$  yrs reported having perpetrated sexual and/or physical IPV <sup>4</sup>
- High levels of emotional IPV victimization/perpetration.

IDS & GSS (2016) reported:

- 92 % and 34 % of women experience sexual and psychological violence, respectively, from their partners <sup>5</sup>

# The Rural Response System (RRS)

The RRS (developed in 2002), was delivered through trained community members known as Community-Based Action Teams (COMBATs). The RRS also provided training for some CSOs in the community and key staff of some State Agencies (police, health, social welfare, Commission on Human Rights and Administrative Justice and National Commission on Civic Education).

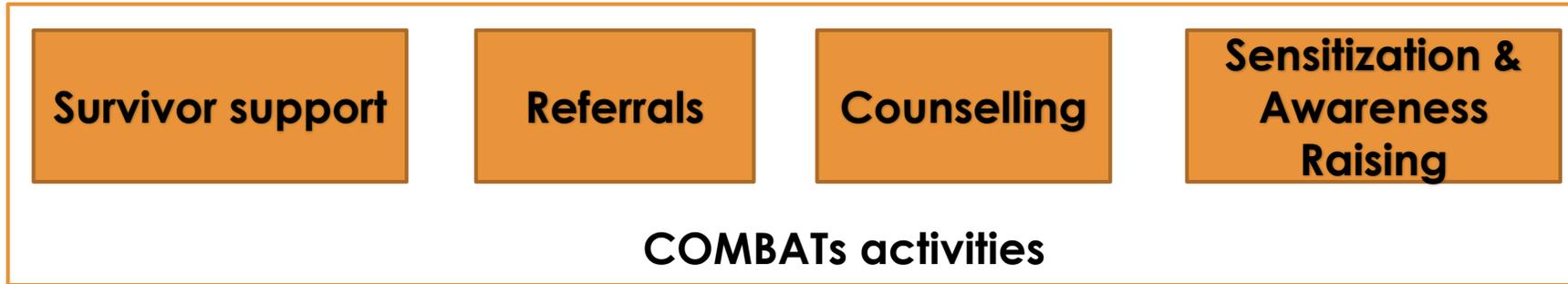
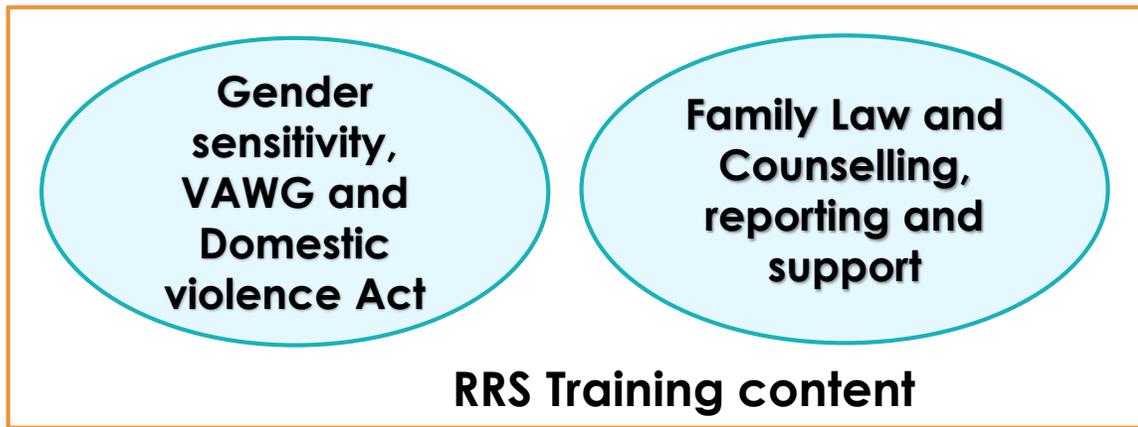
## Specific Objectives of the RRS:

- ❖ Increase knowledge through awareness-raising on gender-based violence
- ❖ Positively change social & gender norms and behaviours that perpetuate gender inequality and result in VAWG
- ❖ Engage state structures for response services and protection of women
- ❖ Provide support to victims of violence to access justice and services



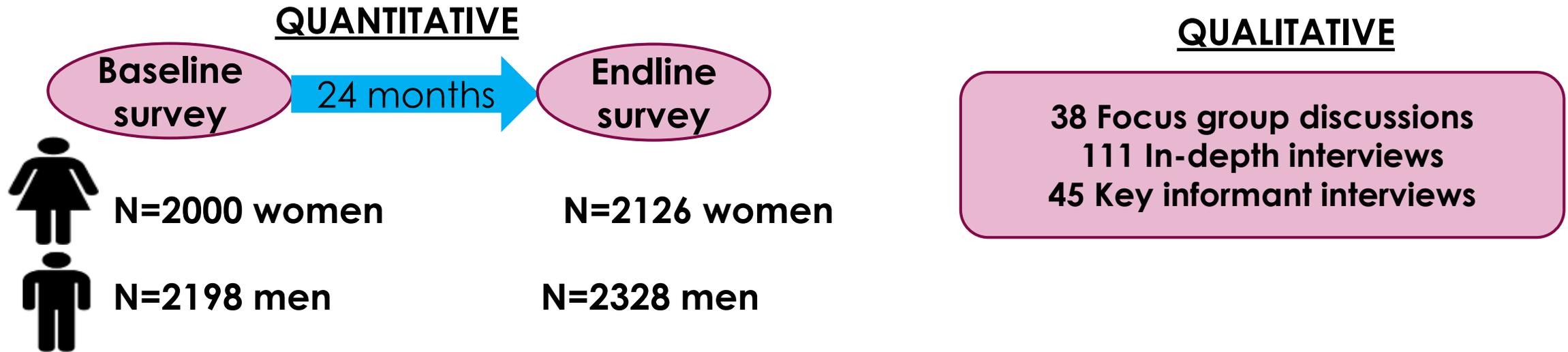
# The RSS Intervention

GSHDRC activities



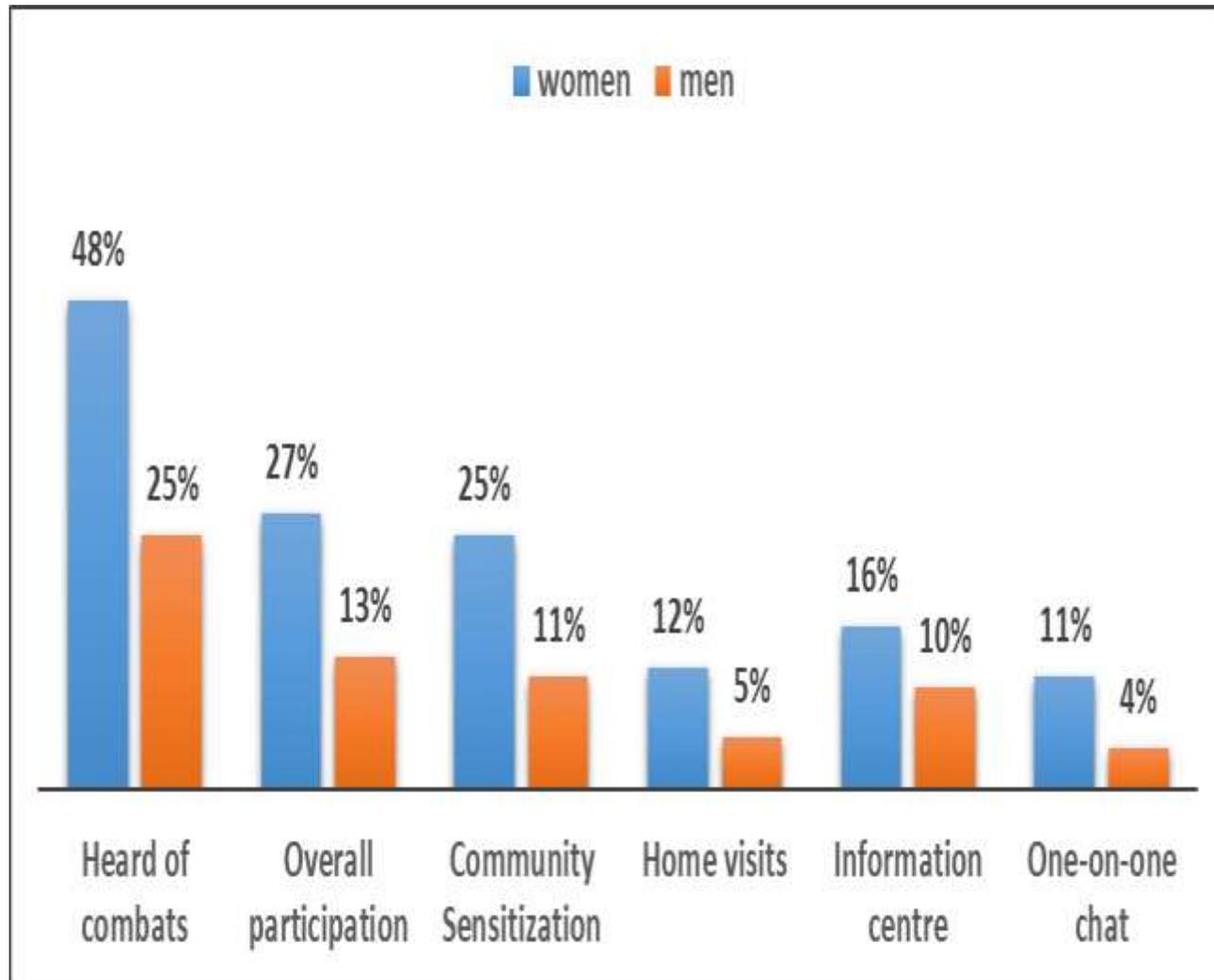
# Impact Evaluation

- ❑ Two-arm community randomized control trial, with qualitative component in 4 districts in Central Region of Ghana <sup>6</sup>.



- ❖ The response rate for this trial was 99.7% at the pre-intervention interview round (16 eligible participants declined participation) and 99.9% at post-intervention (2 persons declined participation).
- ❖ Quantitative analysis used a difference-in-difference (DID) approach, adjusted for age and exposure to violence in childhood.
- ❖ Qualitative analysis employing the constant comparative method of theme generation

# COMBATs Coverage and Participants Stories



“...as for the COMBAT people from Otsenkorang, **they travel to the surrounding villages** where they actually **work...and they also work in Otsenkorang too**. I can remember that there was a **wedding** held at the **community center** about a year ago and they even came there to share information. They also go to **school PTA** to share information. So this is what I have been observing about the COMBAT people from Otsenkorang.” **(43y/o, female, FGD)**

“**The COMBAT people are in this community and are working hard and their work has brought a lot of changes in our lives. (44y/o, female, FGD)**”.

# Participant Characteristics

- ❑ The samples of male and female participants were very similar in their age distributions and the level of education across the two data collection points and study arms.

## Women

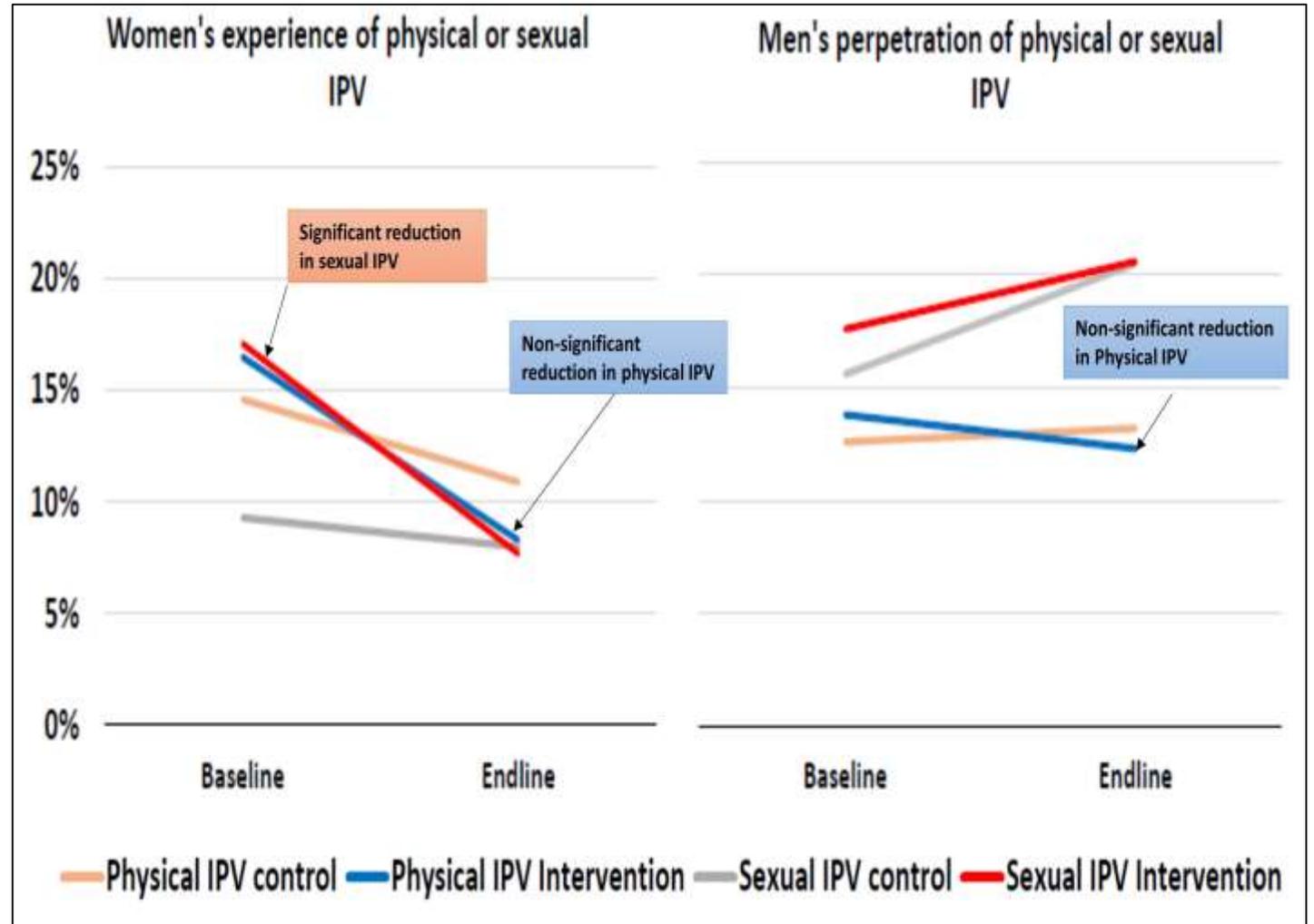
- ▶ Food insecurity was more severe in control communities post intervention
- ▶ At pre-intervention stage, more women in the intervention arm had worked in the past 3 months

## Men

- ▶ Food insecurity was more severe in control communities post intervention
- ▶ More men in intervention communities had earned income or worked in the past 3 months at pre- and post intervention

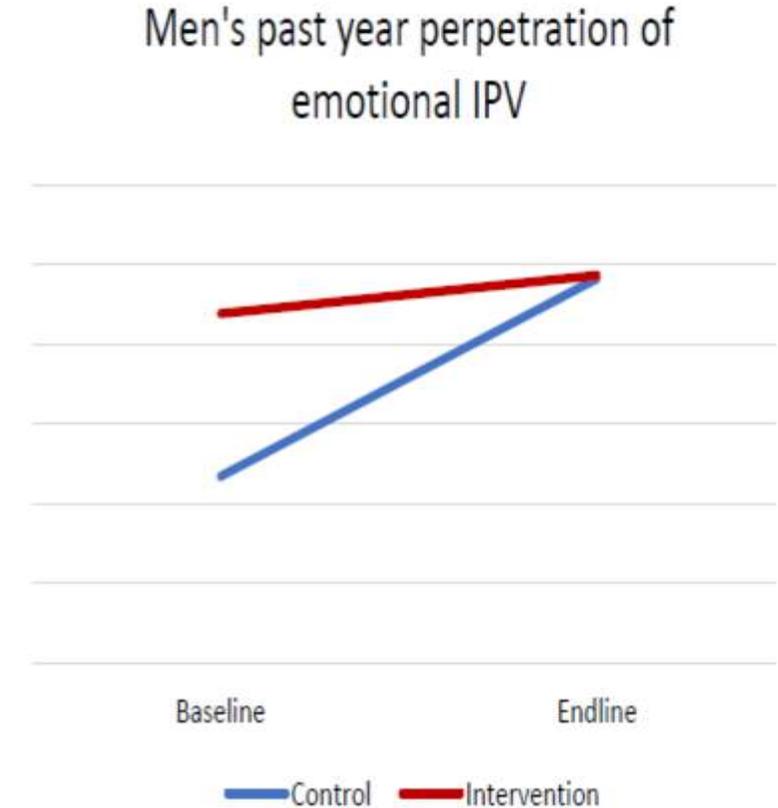
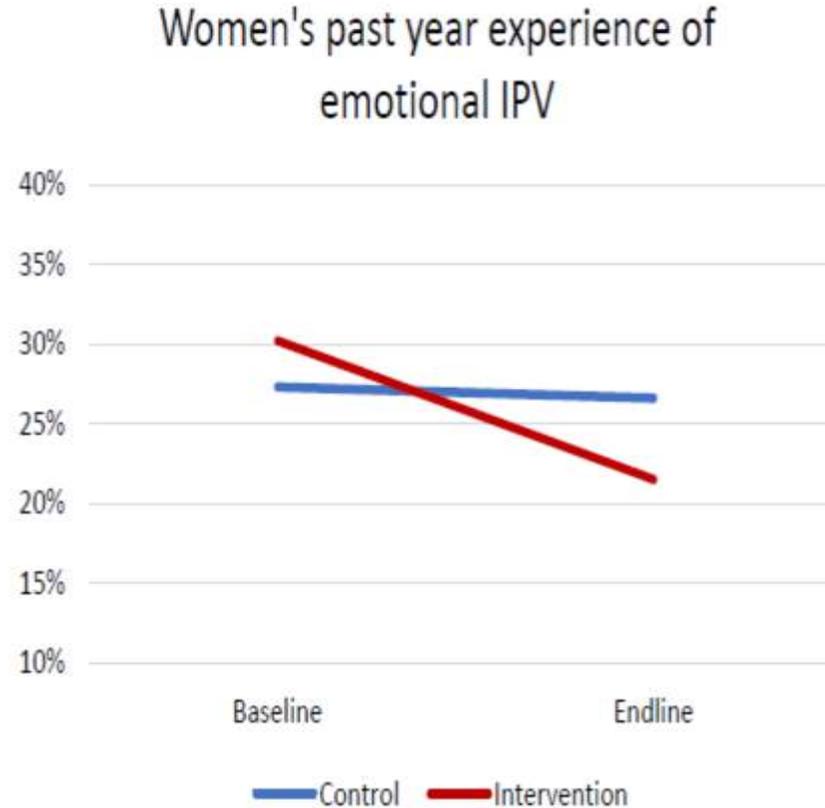
# Findings – IPV experience and perpetration (1)

- ❖ In intervention communities, women's past year experience of sexual IPV reduced from 17.1% to 7.7% versus 9.3% to 8.0% in the control communities (DID= -9.3 (95%CI: -17.5 to -1.0), $p=0.030$ ).
- ❖ The prevalence of past-year physical IPV among women in the intervention communities reduced from 16.5% to 8.3% versus 14.6% to 10.9% in the controls (DID=-4.2 (95%CI: -12 to 3.6), $p=0.289$ ).
- ❖ The impact of the intervention on violence perpetrated by men was in the anticipated direction but changes were not statistically significant.



## Findings – IPV experience and perpetration (2)

- ❖ There was some evidence that the intervention may have had an impact on women's experience of emotional IPV (DID=-9.6, 95%CI:-20.4 to -1.2,  $p=0.080$ )
- ❖ Emotional IPV perpetration was significantly lower in intervention communities compared to controls (DID=-15.0, 95%CI: -28.5 to -1.7),  $p=0.031$ ).



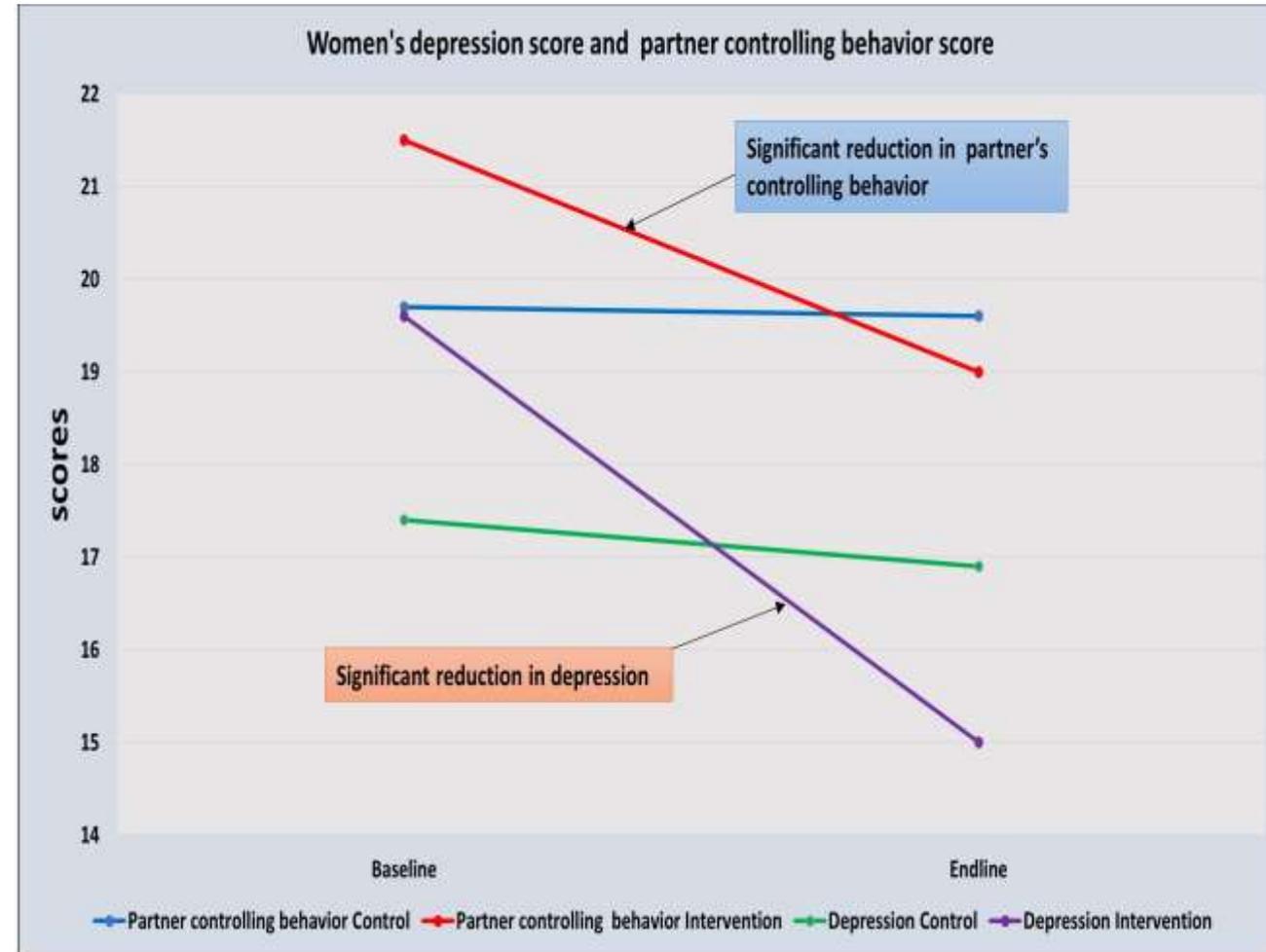
# Findings:-Mental Health and controlling behavior

## ❑ Improved mental health among women

- ❖ Women's depression scores and reports of male partner controlling behavior significantly also reduced in the intervention arm compared to those in the control arm
- Depression scores (DID=-4.8 (-8.0 to -1.5),  $p=0.005$ )

## ❑ Women's partners were significantly less controlling

- Controlling behavior (DID=-2.7 (-3.3 to -1.0),  $p=0.002$ )



# Qualitative findings – RRS impact

“Beating and “throwing out” of wives by husbands rarely happens these days because of the influence of the COMBAT people. The husbands are very much aware that if they commit such an act, COMBAT will deal with them accordingly...”  
**(29y/o, Female, IDI)**

“They (COMBATs) often meet us during funerals or community gatherings and share their knowledge with us on violence against women...awareness of pandemic [VAWG] changes people’s behaviors. Same can be said about people’s attitude and behavior towards violence. They made us understand that every human being has a right including women and children”...**(32y/o, Male, FGD)**

“Now you know when there is any problem you have COMBATs to talk to”; “We know when we call on them, there will be peace that is why we call on them”;

“Violence is a bad practice so having someone mediate is a good thing and we are comfortable”..

**(Extracts from female FGD, all participants >35 years)**

## Qualitative findings - Views about reduction in male perpetrated VAW

“Some of us come from Komenda, which is a fishing community and a lot of men do not provide for their wives...We did not know these were all acts of VAW but because of COMBAT and the training we received at Komenda, the men have even been enlightened on what VAW is...They have stopped beating their wives and shirking responsibilities towards their children. COMBAT has made these things possible.  
**(60y/o, Female, FGD, COMBAT)”**

‘It [violence] has really come down and it [COMBAT] has helped mitigate the rate of violence against women and that of domestic violence. At first, we men violate woman physically. This was something that used to happen but since COMBAT came all these have stopped **(38y/o, Male, FGD).**’

“Now our homes are quite devoid of violence. You will not even see that people are fighting any longer, especially married couple. So, in my opinion, the combat members have helped. We are relieved **(29y/o, Female, FGD)”**

# Key Messages

- ▶ The intervention **reduced** women's experience of IPV (statistically significant reduction in sexual IPV).
- ▶ The intervention **significantly improved** women's mental health and partner controlling behavior and had positive effects on gender attitudes.
- ▶ **Significant impact** of intervention on emotional IPV and non-significant reduction in Physical IPV perpetration among men.
- ▶ **No impact** on sexual IPV perpetration.

# Conclusion & Recommendations

- ❑ ***The RRS intervention reduced women's experiences of IPV and partner controlling behavior and there is some evidence that this was through reductions in men's perpetration of IPV. The RRS intervention warrants careful scale-up in Ghana and further research.***
- ❖ Norm change interventions can be effective in reducing VAWG within programmatic time frames but require work with the whole community.
- ❖ Careful selection, training and supervision of community facilitators is required for intervention success.
- ❖ Prevention is more effective when supplemented by support for survivors.
- ❖ Interventions are more likely to be effective when community-led, locally owned and context-specific.
- ❖ Core elements of the intervention should be retained in scale-up

# Acknowledgement

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