

Researchers

Erica Field
Duke University

Úrsula Aldana
Instituto de Estudios Peruanos

Javier Romero Haaker
World Bank

Staff

Training Local Leaders to Prevent Gender-Based Violence in Peru

Daniel Hurtado
Research Associate

Timeline

2018-2022

Sample Size

208 villages

Research Implemented by IPA

Yes

Training Local Leaders to Prevent Gender-Based Violence in Peru

Abstract

Gender-based violence is a global problem, but little rigorous research exists on the effectiveness of interventions that aim to reduce and prevent such violence. Violence is the result of the complex interplay of several factors, including social norms and attitudes. In Peru, researchers are partnering with the government to provide training to local leaders to become community health volunteers and to work with their communities and key stakeholders towards shifting attitudes regarding gender, work with their communities at various levels, and increase skills to detect women at risk. They will evaluate the impact of this training on the incidence of gender-based violence and on women's physical and mental health.

Policy Issue

One in three women globally have experienced gender-based violence (GBV) at least once in their lifetime, and partner violence alone is the most common type of violence experienced by women.¹ GBV has also been associated with poor physical and mental health, diminished productivity, and lack of economic opportunities and agency.² Despite the prevalence of GBV and global progress in legislative and policing reforms to address this form of violence, there has been little rigorous research on the effectiveness of interventions that aim to reduce and prevent it.

Despite little available research on GBV prevention and reduction, a new strand of the literature suggests that theory-driven interventions that tackle multiple factors associated with GBV at a time (so-called “structural” interventions) may be in fact effective.³⁴ But can the proven efficiency and cost-effectiveness of the health Community Health Volunteer framework be adapted to work on GBV prevention at several levels?

Context of the Evaluation

Reduction and prevention of GBV is a policy priority for the Peruvian government. A 2015 national study estimated that 39 percent of women in the country have experienced GBV.⁵ Through its national network of 245 Centers for Women in rural areas, the Ministry of Women and Vulnerable Populations (MOW) provides support to victims, including legal advice as well as psychological and social assistance.

The Ministry is now expanding its violence reduction efforts by expanding a program called Leaders in Action (LIA), which was first developed in 2002. LIA is a structural intervention that aims to reduce the acceptance and prevent the incidence of GBV by tackling several of the factors involved in the complex interplay causing GBV. LIA trains local leaders to become Community Health Volunteers and to work with the Centers for Women to train additional members of their communities, perform local awareness and mobilization campaigns to monitor the incidence of GBV, encourage take-up of existing support services, and change social norms around GBV.

In 2017, the government decided to expand the LIA program to eight new areas, providing an opportunity for evaluation.

Details of the Intervention

Researchers are conducting a randomized evaluation to test the impact of the LIA program on attitudes and beliefs, incidence of GBV, and women’s mental and physical health.

Out of 288 villages in the areas where LIA will be expanded, 144 will be randomly assigned to the treatment group receiving the LIA program. The remaining villages will be assigned to the comparison group, and will only begin to implement the LIA program after the evaluation has ended.

The intervention will consist of a four-month training course for two leaders from each of the 144 villages participating. The course will include topics on beliefs and stereotypes surrounding gender roles, norms regarding violence, and strategies to identify and prevent GBV, as well as training in soft skills such as leadership, decision-making and empowerment. Participating community leaders will then lead a series of five training sessions in their communities, which enlarges the pool of community health volunteers per village. Then, in coordination with the Centers for Women, Community Health Volunteers design a year-long campaign to increase awareness and identification of GBV in their villages, including door-to-door visits. A survey conducted at the end of the year-long campaign will be used to measure

the impact of the program.

Results and Policy Lessons

Study ongoing; results forthcoming.

Sources

¹ World Health Organization. 2013. "WHO Global and Regional Estimates of Violence against Women." Geneva: WHO.
<http://www.who.int/reproductivehealth/publications/violence/9789241564625/en/>.

² Duvvury, Nata, Aoife Callan, Patricia Carney, and Srinivas Raghavendra. 2013. "Intimate Partner Violence: Economic Costs and Implications for Growth and Development." Washington, DC: The World Bank. <https://bit.ly/1N5TNYn>

³ Arango, D. J., Morton, M., Gennari, F., Kiplesund, S., and Ellsberg, M. 2014. "Interventions to prevent or reduce violence against women and girls: A systematic review of reviews". Women's Voice and Agency Research Series (10). The World Bank.

⁴ Klugman, J., Hanmer, L., Twigg, S., Hasan, T., McCleary-Sills, J., and Santamaria, J. 2014. "Voice and agency: Empowering women and girls for shared prosperity." World Bank Publications.

⁵ Encuesta Nacional sobre Relaciones Sociales. 2015. Instituto Nacional de Estadística e Informática. https://webinei.inei.gob.pe/anda_inei/index.php/catalog/581/related_materials

August 02, 2018