



East and Southern Africa



Scaling up interventions that work to prevent violence against women in East and Southern Africa: Opportunities, challenges and way forward

Workshop report
14 – 15 June 2016, Johannesburg

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Workshop Summary

Introduction

From a public health perspective, research is of little value unless it has a larger policy and programme impact. There is a need to advocate for evidence to be used to inform policy and programming to ensure the best use of precious public funds. Knowledge of what works to prevent violence against women is emerging, but evidence and capacity for translating this evidence into action is lacking. Further, investment in formative research to adapt effective interventions before implementation is virtually non-existent, and there is little practical guidance available on how to adapt and scale up programmes. Our efforts to prevent VAW and strengthen services for survivors of VAW are hampered by the lack of efficient and effective scaling up of tested VAW prevention and response programmes.

The aim of this workshop therefore was to develop a deeper collective understanding of effective programming for the prevention of violence against women; reflect on lessons and issues emerging from the scaling up of effective interventions in the region; and develop a vision for addressing the challenges in relation to scale up, particularly through an East and Southern African network for policy makers, funders, practitioners, researchers and others.

Discussions over the two days led to the identification of some of the challenges and opportunities for scale up in the region, and what might be the role for an East and Southern African forum for strengthening and supporting scale up efforts in the region. A summary of which is to follow.

Challenges and opportunities for scale up

Ensuring research and evidence is used to inform public policy and large programme development is imperative but is fraught with challenges. During the workshop, some key challenges to scale up of evidence-based programmes were identified, including a lack of shared understanding of what constitutes scale-up and its different forms; intervention fidelity and quality; implementation modalities and the involvement of donors or policy makers.

Lack of a shared understanding of what constitutes scale up

There is a need to build and share an understanding of scale up and its different forms. The following types of scale up were presented and discussed:

- Organic / horizontal/ geographical ([SASA!](#))
- Vertical – government is involved in the process and the aim is institutional change ([Evidence Informed Policy-Making Network](#), WHO)
- Functional scale up - Integrating VAW prevention activities to other larger programmes ([IMAGE](#)).

Intervention fidelity and quality

One of the main challenges is to find ways to **maintain intervention fidelity and quality** while scaling up. For example, due to realities of time and funding, the scale up of a gender transformative economic empowerment intervention, shared at the workshop, involved reducing the intensity of gender transformative training activities. The impact of the programme was not as expected and a second phase of training was needed.

This led to discussions around how best to **monitor and support intervention facilitators during scale up**? An example was given where facilitators working on an intervention brought to scale did not benefit from the same monitoring and quality assurance processes as those working on the intervention during the pilot study. As a result, the intervention did not result in the same changes as experienced in the pilot.

Key challenges affecting **sustainability** emerged, including issues posed by volunteerism – how do we sustain volunteerism and is it desirable to do so? Transferring a successful pilot from a research institution to an NGO may involve decreased funding opportunities, which affects sustainability. Further, although **longer term follow up** is needed to assess the sustainability of the changes observed, usually only short-term evaluations are conducted.

Intervention implementation modalities (critical enablers)

Attention is usually focused on the content of the interventions, but not enough on “critical enablers”, i.e. all the implementation processes and tools affecting the delivery of the programmes. However, programmes’ impact are equally dependent on both. These “critical enablers” include the selection and recruitment of facilitators, the ability of the facilitator to problem solve, the management of the intervention, the accountability processes; training and technical support; and last but not least, costs - examples were given where all aspects of the scale up process had not been costed and budgeted appropriately.

During intervention development, there is a need also to consider **mechanisms for scale up**. For example, are there existing national platforms that could be used for scaling up violence prevention? Beyond schools, unions, or economic development programmes could also be explored as potential avenues. Shall we seek to use existing platforms or create new ones?

Participants all agreed that a key issue for scale up is to identify these intervention fundamentals, i.e. what makes an intervention work? We often don’t have a clear answer to this – **pathways to change** need to be identified.

Challenges related to stakeholders’ involvement

Policy makers’ and donors are an essential component of the process of translating research evidence into policy and practice. The assumption is that good research will be used by policy-makers, and translated into practice. However, more often than not policy-makers are not included in research generation activities, and politics (not research), local realities and individual relationships very often drive and inform policy making. There is no clear path or formula for ensuring good research informs practice, but how we package research findings and an awareness of the policy process and its influencers assist us in the adoption of evidence informed practice.

Donors are also a key player in the process of research uptake. Workshop participants identified a lack of resources for implementation science around scale up of evidence-based interventions, both for responses and prevention of VAW. Donor decisions, like policy makers’, are influenced by a number of factors, such as the need to meet quantitative geographical targets. An awareness of these and how these influence decisions made at a local level is important.

Finally, **practitioners** must be an essential partner in intervention development and evaluation. A question raised by the group was. “Should interventions be developed by researchers or should development of

interventions be done by programmers or by partnerships between researchers and programme developers?” This issue and the other raised by the group need to be discussed and debated further.

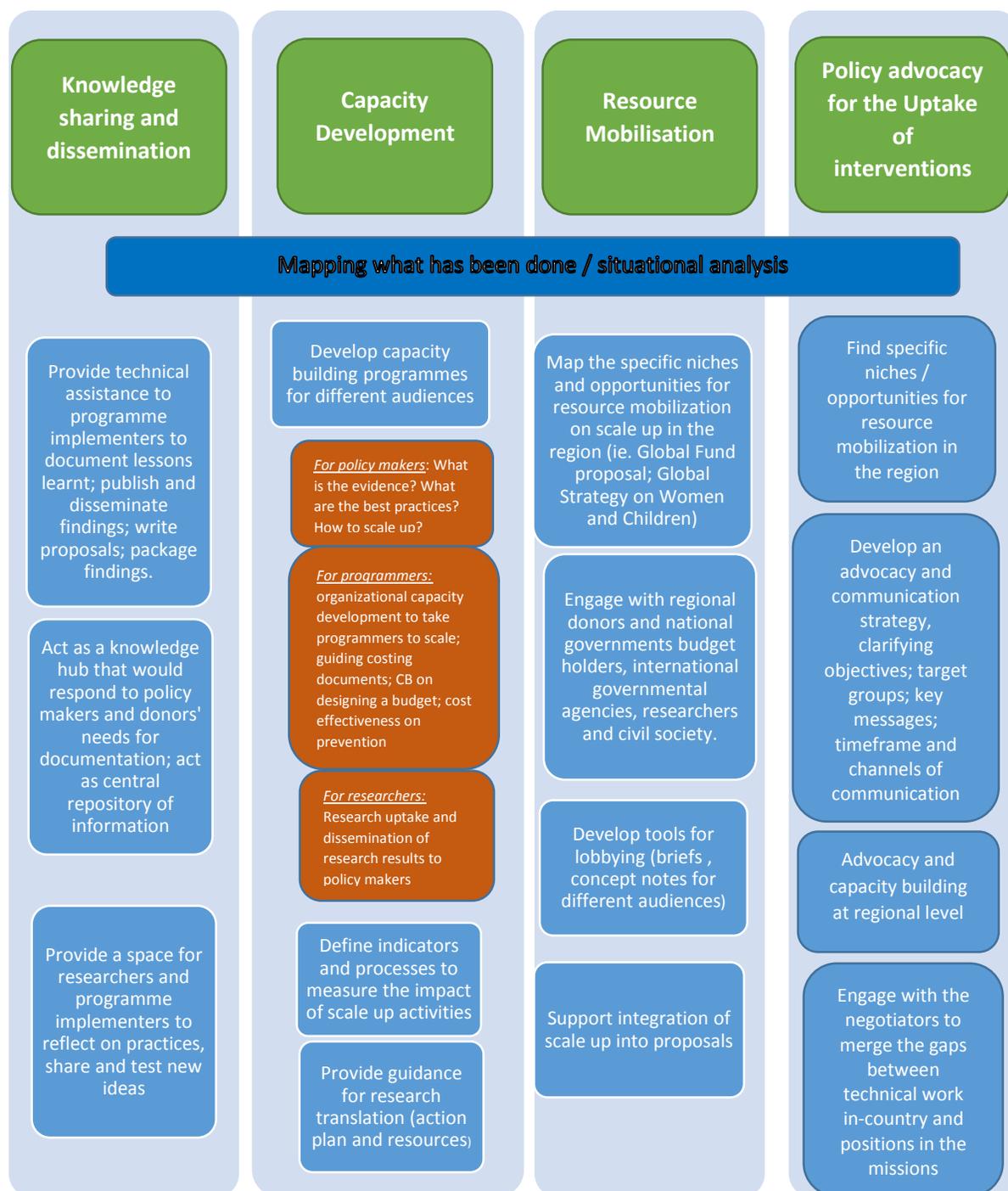
[Outline of an East and Southern Africa Forum to strengthen VAW prevention scale up](#)

Through various participatory activities, the participants discussed the relevance of and need for a regional Forum. Participants agreed to the need for a Forum which seeks to respond to the challenges identified during the workshop.

Participants discussed in groups the objectives and activities of such a regional Forum. Four key focus areas for the Forum emerged, including knowledge sharing and dissemination; capacity building on research uptake and scale up of evidence-based interventions; resource mobilization and advocacy for bridging the gap between research and policy-making (See diagram below).

Forum members would include regional VAW networks; women parliamentarians; interested national and regional policy makers; researchers; donors; programmers; influencers.

Figure 1. Summary of the objectives and activities of the forum proposed during the workshop



Way Forward

The 30 workshop participants, women and men from four continents, all working in the region as researchers, policy makers and donors, are committed to scale up effective interventions to prevent violence against women. They are driven by a genuine motivation to bring their different and complementary skills together in a Forum to support and strengthen scale up efforts in East and Southern Africa.

The next steps are:

- To develop a **programme document** for the Forum that is underpinned by a robust theory of change and detailed costed activities and methodologies to seek funding to launch the Forum; and,
- To **create a list-serve** between participants and individuals who had showed interest in this process to share and disseminate information on scale up efforts in the region and globally (documents, events, funding opportunities).

An Advisory Committee was established to comment on the Forum concept note and assist with moving the process forward. It is composed of Chi Chi Undie (Senior Associate, Reproductive Health Programme, Population Council, Kenya), Sophie Namy (Learning Coordinator, Raising Voices, Uganda), Jean Kemitare, (Program Manager, GBV Prevention Network, ESA regional network); Ellen Hagerman (SRHR Regional Network), Jessie Kwabila (Malawi and SADC Parliamentarian, Chair of the Women Caucus), Pinky Mahlangu (Snr Scientist, South African Medical Research Council), Lisa Vetten (Honorary Research Associate, Wits Institute for Social and Economic Research (Wiser) and gender activist, South Africa); Elizabeth Dartnall, (Programme Manager, Sexual Violence Research Initiative, Global Network; Snr Research Manager, SAMRC), Celine Mazars (Evidence and Research Specialist, UNFPA ESARO), with technical advice from Dr Avni Amin (Technical Officer, WHO RHR).

Introduction: Why this workshop and why now?

In her opening remarks, Seynabou Tall, Gender Advisor at UNFPA ESARO, noted that prevention of violence against women is high in the current regional agenda. There is a stronger **enabling political environment**, illustrated by the inclusion of prevention of violence against women and girls in several continental and international policy frameworks¹. In addition, there is a **growing evidence-base** on effective programmes and interventions for preventing VAWC – these programmes seek to address underlying factors linked to violence.

However, despite the progress, a disconnect between policy, research and programmes implemented on the ground remains. There are many **challenges in translating evidence into action** and taking effective programmes into communities where they can improve the lives of women and girls. One key challenge is the limited number of **platforms** where researchers, programme implementers, funders and policy-makers can meet and discuss evidence, policy making and implementation opportunities and challenges.

This workshop provided such a platform, where participants were given the opportunity to discuss and share what we know works to end violence (sessions 1&2); lessons learnt from scale up attempts (session 3); policy makers, donors and WHO perspectives when turning research into action (session 4); lessons emerging from regional networks (session 5).

The workshop gathered 30 participants involved in research, funding and policy making in East and Southern Africa. See list of participants in Annexure. Based on the challenges and successes identified, participants also **discussed the relevance and role that a knowledge-translation platform could play to ensure that progress in the research field benefit a higher number of women in the region** and what type of concrete activities could be initiated.

¹ They include: *The AU Continental Agenda 2063 “The Future we want”*; the *Sustainable Development Goals (SDGs)*; *The Secretary General’s Global Strategy of Women’s, Children’s and Adolescents’ Health*; the *historical agreed conclusions of the 57th Commission on the Status of Women in 2013 (CSW)* or the *Framework to underpin action to prevent violence against women*, published by UN-Women and the UN system.

Session 1: What works to prevent violence?

Professor Rachel Jewkes, South African Medical Research Council, shared current research on what works to prevent gender based violence, **noting that economic empowerment and GBV transformative programmes, along with community action programmes** and self-defense with gender empowerment for young women are all working to reduce GBV. She highlighted the need for prevention programmes to be complemented with quality services and responses for the care and support of survivors.

She noted that they SDG #5 coupled with consolidation of the knowledge base offer phenomenal opportunities for the field. But these opportunities are faced with enormous challenges related to scale up - chiefly a lack of delivery platforms for scaling up of interventions of known effectiveness and generating evidence of impact at scale. Resource mobilisation for programming for impact is needed, as is research on new modalities of intervention and new settings including: Substance abuse prevention and depression treatment; parenting interventions to prevent child abuse and protect children and whole school interventions.

The full presentation is available for download [here](#).

Session 2: Examples of VAW prevention interventions in the region

Examples from the region of evidence-based interventions for the prevention of VAW were shared. Click on links below to access the full presentations.

1. [SHARE](#)

Fred Nalugoda presented [SHARE](#), a multi-component intervention conducted in Uganda, which involves mainly community action to change social norms that support violence and to provide improved HIV counselling, including dissemination of information on intimate partner violence and safety for women who test positive for HIV. The intervention strategies include: advocacy, capacity building, community activism, learning materials and special events.

2. [SASA!](#)

Sophie Namy shared [SASA!](#) - an intervention / activist kit for mobilizing communities to prevent violence against women and HIV. The intervention operates through four phases, which are: a) Fostering 'power within' staff and community activists; b) Encouraging critical thinking about men's 'power over' women; c) Joining 'power with' others to support change; d) Fostering the 'power to' make positive change. It was first tested through a cluster randomized trial baseline in a sample of 1,583 people in Uganda. SASA! is delivered through different activities including: Community conversations, door-to-door discussions, quick chats, trainings, public events, poster discussions, community meetings, film shows, soap opera groups.

3. [Stepping stones](#)

Nwabisa Jama-Shai presented the [Stepping Stones and Creating Futures](#) group intervention, which aims to decrease the rate of intimate partner. The intervention was piloted in two informal settlements near Durban, South Africa over 12 weeks with 233 young people (average age 21.7 years). The study findings show improved gender attitudes and reduced IPV.

4. [SKhokho](#)

Pinky Mahlangu presented [SKhokho](#), a multifaceted project with a set of interventions targeting grade 8 learners, their parents and teachers in 24 schools in Tshwane district, Pretoria, South Africa. The interventions include: Life-Skills workbook, positive discipline training for teachers, and activities for families. The project methodology includes: A cluster randomized controlled trial with a baseline, 6 and 12 months questionnaires, a rapid appraisal, as well as a qualitative evaluation of Skhokho for Families.

5. [Parenting interventions](#)

Prof Mark Tomlinson shared current evidence on [parenting interventions as prevention](#) for Violence against Women. He highlighted the importance of parenting as a violence prevention tool, he shared details of evidence-based parenting interventions, and finally explored the gap between evidence and policy.

6. [One Man Can](#)

Dumisani Rebombo presented the [One Man Can \(OMC\) Campaign](#). OMC encourages men to become actively involved in preventing and responding to gender-based violence (GBV), and HIV and AIDS. The target group is men residing in Diepsloot-Soweto, South Africa. One Man Can aims to refine the multi-level OMC model and determine its effectiveness in preventing men's use of VAWG. Activities include: Door to door campaigns, workshops, theatre, street soccer as well as digital story screening.

Session 3: Lessons learnt from Scale up efforts

In this session, **Lufuno Muvhango** (director of the Intervention with Microfinance for AIDS and Gender Equity (IMAGE) Program, South Africa) shared [lessons learned from scale up](#) of [IMAGE](#) in South Africa and the region. IMAGE is an evidence-based microfinance gender transformative intervention which aims to: a) Improve women's economic wellbeing and financial independence, b) reduce vulnerability to HIV and gender-based violence, and c) foster wider community mobilization to address the key drivers of the HIV pandemic. Whilst **Sophie Namy**, learning coordinator at [Raising Voices](#) shared lessons and experiences of scale up of the [SASA!](#) Intervention.

Through the presentations of effective interventions and the discussion around lessons learnt from scale up efforts (sessions 2 and 3), a number of challenges and enabling factors for scale up of effective interventions in the region emerged. These included: lack of shared understanding of what constitutes scale-up; intervention fidelity and quality; intervention critical enablers and stakeholder involvement.

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Elements facilitating scale up

Lessons learnt from scale up efforts show research designed with scale up in mind from the outset is likely to be more successful - scale up needs to be built in to the project design. Further, to be effective, scalable and sustainable, interventions need to extend beyond simple awareness raising, be based on a clear **theory of change**, and involve from the start implementing and government partners, or a partner who can implement the intervention at scale. Clarifying the roles of the researchers, implementing and government partners in the scaling up effort is also key.

Advocacy is another important factor. Throughout the course of a project, it is strategic to identify opportunities in the policy agenda and moments to advocate for implementation and upscaling of evidence-based programmes.

Ongoing monitoring, evaluation and budgeting of scale up efforts is also essential. Implementation quality must be monitored tightly and a **framework for fidelity** developed. Costing the scale up of the intervention is needed and funding for technical support when scaling up included in plans and budgets.

Participants felt that developing **regional guidelines for VAW scale up** would be useful, together with a typology of the various modalities for scaling up.

Session 4: Turning Research into action and scale up: Policy maker, donor, UN perspectives

This panel discussion sought to gain deeper insight into how we understand scale up and what we expect from it, from different perspectives. The panelists discussed the challenges and opportunities they experience to translate research into action and scale up, in their role of policy maker, researcher, civil society or donor. They also shared ideas on how to address the disconnect between what we know is effective and what gets implemented and scaled up in ESA.

Panelists were:

- [Virginia Francis](#), Gender Advisor at [USAID](#) South Africa.
- [Dr Jessie Kabwila](#), SADC Member of Parliament, Chair of SADC Women Caucus, Salima North West member of Parliament, academic, feminist, educator and activist.
- [Lisa Vetten](#), honorary research associate at the Wits Institute for Social and Economic Research (WiSER)
- [Jean Kemitare](#), the Program Manager for the GBV Prevention Network at Raising Voices
- [Dr Avni Amin](#), Technical Officer, [Department of Reproductive Health and Research](#), World Health Organization

The discussion led to a better understanding of the **donors' interests and constraints and of the policy making processes** – elements that are necessary to better grasp to successfully influence donors and policy maker.

Donors' interests and constraints

- There is a need to understand the constraints regional and local donors operate in – they work in a global environment and all of their programmes are linked to an evaluation framework. They are often faced with tight deadlines and fixed reporting guidelines, which may limit their agency.
- Although most donors investments are evidence-based, their primary interest is often on to geographic scale-up, potentially at the cost of intervention fidelity, with a focus on number of people reached and meeting globally set targets that may have little relevance to local settings and realities.

Policy making processes unpacked

- Policy making is not always a rational process, it is political;
- Policy makers are a diverse group that involves different levels of power, which need to be identified and targeted differently (from the local chief to the Member of Parliament), with different messages.
- Advocacy for policy change needs to be supported by data and research: In this sense, policy making can be influenced by evidence. However, there is a danger to “tweaking the evidence to make it sensational” and more convincing, taking the risk of desensitization.
- Institutional scale up is a long process involving relationship building, development of mutual trust and respect between partners as well as ongoing negotiations. It is important to be clear on the

essential elements of an intervention; what is essential and what can be cut without compromising on those elements that make the intervention work. There is a need to balance science and politics, taking into consideration that final intergovernmental negotiations are led by politicians who may have different opinions, interests and a different level of openness to evidence than the technocrats.

- There is often a mismatch between the length of time prevention efforts take to show visible results, the programmes' timeframes and the length of the electoral mandate.

The following recommendations were highlighted

- Build and nurture relationships between researchers and policy-makers
- Define the contexts where changes happen and “what is non-negotiable” in the intervention.
- If politicians do not understand the relevance of the evidence for their portfolios, they will not translate it: Package it!
- Clearly identify the interests of the technocrats.
- Develop an implementation science around scale up.
- Grassroots organisations have a clear vested interest in policy implementation and they should be involved.
- Research should not take funds away from grassroots organisations that have less power and limited access to funding sources.
- Training regional bodies could have a ripple effect into countries (i.e. SADC women Caucus).
- Examples of successful advocacy exist in the region (such as the advocacy processes that led to the Child marriage Model Law) and we need to learn from these processes.

Session 5: Insights and lessons emerging from existing networks seeking to influence policies

A panel of five participants involved in various VAW regional networks was gathered to share their experiences. The guiding questions were: What has worked well in terms of influencing policies and programmes? What has not worked well and the barriers you could not overcome? What lessons can be drawn for a regional platform bringing policy makers and researchers together?

Their network is briefly described below and the lessons learnt summarized (more information on the panelists and/or their network is available on the weblinks).

[Chi-Chi Undie](#) is a senior associate with the **Population Council's Reproductive Health program** in Nairobi. Since 2006, the Population Council has provided technical assistance and conducted research to strengthen the evidence-base on sexual and gender-based violence (SGBV) programming in sub-Saharan Africa. An active network of partners from across the region (known as the 'Africa Regional SGBV Network') has emerged as a result of these activities.

[Elizabeth Dartnall](#) manages the Sexual Violence Research Initiative. The [SVRI](#) is a global network for sharing and promoting good quality research on sexual and intimate partner violence for improving response and prevention efforts, particularly in low and middle countries. The SVRI has over 4500

members globally. Almost two-thirds of whom are based in low and middle income countries, with around 36% based in Africa, 15% in Asia and Pacific, and almost 5% from LAC region.

[Kennedy Odhiambo Otina](#) is the Regional Program Associate of the **Men to Men Programme at FEMNET**. FEMNET is a formal network of organizations advocating to advance women’s agenda, including at the African Union or the Panafrican Parliament. FEMNET’s scope of work includes advocacy, capacity building and information sharing.

[Jean Kemitare](#) is the Program Manager for the [GBV Prevention Network](#), a network of activists and organizations with more than 500 members, working in 18 different countries in the Horn, East and Southern Africa to build a just and violence-free world for women. It is composed of organizations, individuals, academics, and activists. It seeks to influence the knowledge and practices of the policy makers. They engage with individuals, NGOs, CBOs and academia. The network thematic action groups identify what can be influenced.

[Nwabisa Jama](#) is a founding member of the **South Africa Dialogue Forum**, a small group of individuals working in academia and civil society on violence against women and children, slowly transforming into a network. It seeks to bring policy makers around the table to shift the violence agenda. The forum was initiated by Civil Society and government is invited – which changes the dynamics between the stakeholders.

The discussions between the panelists and the participants led to identify the following **lessons learnt**:

- Be strategic, **manage the “clash of culture” between researchers and programme implementers, researchers and policy makers** by identifying the interests of each stakeholders:
 - Tensions can appear between researchers, who have to stick to the research protocol, and implementers, who are tempted to deviate from the protocol to adapt to changing contexts and ensure smooth implementation of the activities;
 - The interests of most politicians do not reside in women issues, and those who are willing to change the patriarchal status quo are “scarce and often silent”. Hence, the economic argument is a better entry point to engage policy makers than the women’s rights agenda.
 - Not all donors’ interests are the same and they need to be unpacked.
 - To successfully influence policies and programmes, it is important to identify how budget decisions are made and who are the government decision makers
- **What counts as evidence?**
 - **Several participants regretted that little space is given to programme-based learning** and that many programmes are excluded from recommended packages of interventions because there is “no rigorous evaluation”.
- **Who to engage?**
 - Engaging grassroots communities is important
- **Coordinate**
 - We need to develop **some key core messages** around scale-up that we can share with policymakers e.g evidence exists; evidence is important; interventions must be adapted to

- the various contexts when scaling up; intervention development and evaluation must be done in partnerships involving researchers, policy-makers, programme developers.
- A regional exchange platform promoting South-South exchanges between regional policy programme and research stakeholders is needed
 - Both response and prevention are essential and complementary. An increased emphasis on prevention should not weaken services to survivors.
- Practical elements contributing to the success of a network were shared and include:
 - A clear vision that addresses gaps in the field and is based on a clear theory of change
 - Dedicated staff to drive the network and resources
 - A shared understanding of key concepts among members and key stakeholders
 - Being innovative and inspirational – help members be ahead of the field
 - Actively interacting with members on a regular basis and managing expectations through on-going communication and interaction with members.
 - Providing a safe space for discussing challenges
 - Providing practical guidance
 - Packaging relevant information in different ways for different audiences.
 - **The women’s rights agenda does not receive enough political attention in the region** and increased **mobilization to prevent VAW is necessary**. There is a general push-back on human rights, and policies, when they exist, are often not implemented and budgets are often cut.

Session 6: Towards building a network

Based on the discussions around scale up attempts and the identification of disabling and enabling factors, participants discussed the rationale of building a new structure, in sub-groups.

The following elements emerged:

Possible Roles	Need to clarify – watch out!
<ul style="list-style-type: none">○ Joint advocacy○ Learning platform/ information sharing, to attract the interest of policy makers○ Benchmarking○ Manage an on-line knowledge hub○ Provide technical assistance○ Act as a “network of networks” in East and Southern Africa and leverage existing structures; empower local networks○ Practice-based learning on scale up; guidance on adaptation○ Identify what works to influence policy makers○ Provide space for thinking critically about our practice	<ul style="list-style-type: none">○ Do NOT re-invent the wheel: SGBV networks exist in the region, as well as global platforms for scale up (i.e. WHO Expandnet initiative)○ Not to take funds away from other structures○ Clarify membership○ Define terms: Evidence – scale up○ Clarify values○ Have concrete objectives and tangible activities

Participants agreed that there was a need to develop a forum that would facilitate scaling up of the VAW prevention interventions that work in the region. The Forum should have a regional focus and gather existing networks from the region, researchers, donors, politicians.

The group identified four key objectives for the Forum:

1. Enabling greater sharing and learning across the region
2. Building capacity on how to scale up
3. Advocating for mobilizing and influencing allocation of resources at regional level
4. Advocating for policy uptake of evidence-based interventions.

Participants were split into four groups according to these four objectives and asked to identify activities and methods for achieving the objectives. Outcome of the discussions are summarized in the Tables below.

Objective 1: Greater sharing and learning across the region

Activities identified	Methodology
Provide support/technical assistance to programme implementers to document lessons learnt; publish and disseminate findings; write proposals; package findings	<i>Capacity building: writing workshops; reading groups; M&E capacity building</i>
Act as a knowledge hub that would respond to policy makers needs for documentation; for policy makers, donors (central repository of information)	<i>Webinars (not powerpoint-based) Add-on events at conferences Online</i>
Provide a space for researchers and programme implementers to reflect on practices, share and test new ideas	

Objective 2: Capacity Development

The capacity development is linked to the knowledge sharing and advocacy objectives.

Activities identified	Methodology
Map what is being done, identify gaps and tools	<i>Identify existing structured ways to do policy dialogue (Evipnet; implementation science manual from Alliance for health system policy research)</i>
Develop different capacity building programmes for different audiences <ul style="list-style-type: none"> • For policy makers: What is the evidence? What are the best practices? How to scale up? • For programme implementers: Organizational capacity development to take programmes to scale; planning for implementation; guiding costing documents; CB on designing a budget; cost effectiveness • For researchers: Research uptake and dissemination of research results to policy makers 	<i>Capacity development and mentoring Identify and support the individuals or institutions who can be champions in their spaces of influence.</i>
Define indicators and processes to measure the impact of scale up activities	
Provide guidance for research translation (action plan and resources)	<i>Mentoring; development of guidelines</i>

Capacity development is linked to the knowledge sharing and advocacy objectives.

Objective 3: Advocacy for resource mobilization

Activities identified	Methodology
Situational analysis to understand the landscape and find specific niches and opportunities for resource mobilization in the region (e.g.. Global Fund proposal; Global Strategy on women and children)	<i>Stakeholder mapping; resource mobilization strategy</i>
Develop tools for lobbying (briefs , concept notes for different audiences)	
Engage with regional donors and national governments budget holders, international governmental agencies, researchers and civil society.	
Support integration of scale up into proposals	

Objective 4: Advocate for uptake of interventions through policy

Activities identified	Methodology
Develop an advocacy and communication strategy, clarifying objectives; target groups; key messages; timeframe and channels of communication	<i>Power mapping of influences Develop indicators to measure success</i>
Advocacy and capacity building at regional level: AU, ICGLR, EAC, SADC, IGAD and COMESA + departments of Foreign Affairs	
Engage with the negotiators to bridge the gaps between technical work in-country and positions in the missions	

Conclusion and Way forward

The 30 workshop participants, women and men from four continents, all working in the region as researchers, policy makers and donors, are committed to scale up effective interventions to prevent violence against women. They are driven by a genuine motivation to bring their different and complementary skills together in a Forum to support and strengthen scale up efforts in East and Southern Africa.

The next steps are:

- To develop a **programme document** for the Forum that is underpinned by a robust theory of change and detailed costed activities and methodologies to seek funding to launch the Forum;
- To **create a list-serve** between participants and individuals who had showed interest in this process to share and disseminate information on scale up efforts in the region and globally (documents, events, funding opportunities).

An Advisory Committee was established to comment on the Forum concept note and assist with moving the process forward. It is composed of Chi Chi Undie (Senior Associate, Reproductive Health Programme, [Population Council](#), Kenya), Sophie Namy (Learning Coordinator, [Raising Voices](#), Uganda), Jean Kemitare, (Program Manager, [GBV Prevention Network](#), ESA regional network); Ellen Hagerman (SRHR Regional Network), Jessie Kwabila (Malawi and SADC Parliamentarian, Chair of the Women Caucus), Pinky Mahlangu (Snr Scientist, [South African Medical Research Council](#)), Lisa Vetten (Honorary Research Associate, [Wits Institute for Social and Economic Research \(Wiser\)](#) and gender activist, South Africa); Elizabeth Dartnall, (Programme Manager, [Sexual Violence Research Initiative](#), Global Network; Snr Research Manager, SAMRC), Celine Mazars (Evidence and Research Specialist, [UNFPA ESARO](#)), with technical advice from Dr Avni Amin (Technical Officer, [WHO RHR](#)).

Annexures:

List of participants

Intervention Country	Participants Name	Functional Title/ Organisation	Contacts
South Africa	Mark Tomlinson	Associate Professor , Stellenbosch University	markt@sun.ac.za
South Africa	Anik Gevers	Independent Consultant (Specialization: Gender-Based Violence)	geversanik@gmail.com
South Africa	Rachel Jewkes	Director , Gender and Health Research Unit- South African Medical Research Council; Secretary , SVRI	rjewkes@mrc.ac.za
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South Africa	Lufuno Muvhango	Director of the Intervention with Microfinance for AIDS and Gender Equity (IMAGE) Program, Small Enterprise Foundation (SEF), South Africa	lmuvhango@image-sa.co.za
South Africa	Nwabisa Jama Shai	Senior Scientist , Gender and Health Research Unit-South African Medical Research Council; Founding member of the South Africa Dialogue Forum	nshai@mrc.ac.za
Kenya	Chi-Chi Undie	Senior Associate , Reproductive Health Programme, Population Council.	cundie@popcouncil.org
South Africa	Dumisani Rebombo	National One Man Can Manager , Sonke Gender Justice.	dumi@genderjustice.org.za
Malawi	Marcel Chisi	National Chairperson , Men for Gender equality Now in Malawi	marcelchisi@yahoo.co.uk
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Uganda	Jean Kemitare	Program Manager , GBV Prevention Network	jean@raisingvoices.org
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South Africa	Pumeza Mafani	Director , South African Department of Women	pumeza.Mafani@women.gov.za
Malawi	Jessie Kabwila	Malawi and SADC Parliamentarian , Chair of the Women Caucus	jkkabwila@yahoo.com
South Africa	Eka Williams	Program Officer , Ford Foundation	E.Williams@fordfoundation.org
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South Africa	Ellen Hagerman	Project Manager – Open Society (SRHR) Hivos Southern Africa Hub	ehagerman@hivos.org

South Africa	Elizabeth Dartnall	Programme Manager , Sexual Violence Research Initiative, Global Network; Snr Research Manager, SAMRC	Elizabeth.Dartnall@mrc.ac.za
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South Africa	Seynabou Tall	Gender Advisor , UNFPA ESARO	tall@unfapa.org
South Africa	Tamara Braam	Consultant, Facilitator of the workshop	tambraam@gmail.com

Workshop Programme

Scaling up interventions that work to prevent violence against women in East and Southern Africa: Opportunities, challenges and way forward - 14 – 15 June 2016

Time	Activity
<i>Tuesday 14 June</i>	
Developing a deeper collective understanding of effective programming for the prevention of violence against women and reflecting on lessons learnt from scaling up efforts	
8:30 – 9:00	Registration
Session one: Introduction	
9:00 – 9:45	<ul style="list-style-type: none"> Welcome and Opening Remarks: Seynabou Tall, UNFPA, Gender advisor, Introductions & Icebreaker
9:45- 10:30	Presentation and discussion <ul style="list-style-type: none"> What works in prevention of VAW? Professor Rachel Jewkes
10:30-11:00	Security Briefing: UNDSS and COFFEE BREAK
Session Two: VAW prevention interventions – What works, how and insights for scale-up	
11:00 – 13:00	Presentations and discussions <ul style="list-style-type: none"> SHARE –Fred Nalugoda SASA! – Sophie Namy Stepping Stones and Creating Futures – Nwabisa Jama Shai Skhokho- Pinky Mahlangu Parenting interventions – Mark Tomlinson One Man Can – Dumisani Rebombo
13:00- 14:00	LUNCH
Session Three: Lessons emerging from scale up efforts	
14:00 – 15:15	Presentations and discussions <ul style="list-style-type: none"> IMAGE : Lufuno Muvhango SASA!: Sophie Namy
15:15- 15:30	COFFEE BREAK
Session Four : Turning research into action and scale up: policy maker, donor and UN perspectives	
15:30 – 17:00	Talk Show <ul style="list-style-type: none"> Jessie Kabwila – Member of Parliament, Malawi and SADC Lisa Vetten-Wits Avni Amin – WHO Jean Kemitare-Raising Voices

Time	Activity
	<ul style="list-style-type: none"><li data-bbox="435 275 745 302">• Virginia Francis-USAID
End of Day 1	

<i>Wednesday 16 June:</i>	
Developing a vision for a regional network that would bring researchers and policy makers together to address the challenges in relation to policy uptake and scale up – towards a consensus on the relevance, objectives and activities of such a network	
08.30 – 09.00	<ul style="list-style-type: none"> • Opening Circle • Reflections on lessons emerging from day one
Session Five: Insights and lessons emerging from existing networks seeking to influence policies	
09.00 – 10:30	<p>Talk show</p> <ul style="list-style-type: none"> • Chi-Chi Undie, Africa Regional SGBV Network • Elizabeth Dartnall, SVRI • Kennedy Odhiambo Otina, FEMNET • Nwabisa Jama Shai, South Africa Dialogue Forum • Jean Kemitare, GBV Prevention Network
10:30-11:00	<i>COFFEE BREAK</i>
Session Six: Towards building a network	
11:00 – 13:00	<p>Building a network (role, objectives, activities)</p> <ul style="list-style-type: none"> • Plenary discussion • Group work
13:00- 14:00	<i>Working LUNCH</i>
Session Seven	
14:00-15:00	<ul style="list-style-type: none"> • Group work feedback • Taking the process forward • Closing Remarks: Chi-Chi Undie, SVRI Co-Chair