

# Mapping the evidence

## South African interventions to prevent violence against women and children

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# Introduction

The violence prevention evidence map is a product of a partnership between the Institute for Security Studies (ISS), the Centre of Learning on Evaluation and Results – Anglophone Africa (CLEAR-AA) at the University of Witwatersrand and the Africa Centre for Evidence at the University of Johannesburg (ACE).

The key objective was to enable policy makers, civil society organisations and research institutions to quickly identify the extent to which there is evidence to support the effectiveness of violence prevention interventions. To achieve this objective empirical research and evaluations of interventions to prevent violence against women and children in South Africa were mapped. This work was funded by the Hanns Seidel Foundation.

The evidence map was informed by, and supported the work of the Violence Prevention Forum. It is available free of charge.<sup>1</sup> It is a contribution to the body of knowledge about what evidence exists for interventions, policies and programmes aimed to address the risk factors for violence.<sup>2</sup>

The primary policy question that underpins this map is “what evidence exists for interventions that reduce violence against women and children”?

## Why it is important for violence prevention

Government departments, civil society organisations, communities, academics, and development partners all acknowledge the high levels of violence against women and children in South Africa. It is also commonly understood that the impact of violence on society is devastating. Across the sectors, South Africans are looking for solutions and interventions that are known to be effective.

Violence is complex, and no single intervention or programme will address all its risk factors, nor will all programmes be suitable for all contexts. Risk and contributory factors exist at individual, household, community and societal level. They manifest differently at different stages of an individual’s life.

In 2019, the Violence Prevention Forum identified the urgent need to document and acknowledge the work that has, and is already being done to prevent violence, and the services and programmes that already exist.<sup>3</sup> This, the Forum argued, would provide a basis from which to scale-up, or alter and review approaches as the need arises. It is critical to evaluate and verify interventions to prevent violence; to know who is doing what, where and how, and to know whether what is being done works, or why it fails.

This evidence map is a first attempt to collate and map interventions to address the risk factors for violence, across disciplines and sectors. It is a living platform to present, in an accessible manner, evidence for programmes and interventions that have been evaluated.

## Evidence Map: what it is, what it is not and why we did it

‘Evidence mapping’ is a research methodology used to assess existing evidence on a particular topic. Formally, it can be defined as: ‘[A]n evidence synthesis methodology to systematically source and organise a body of knowledge to provide a high-level overview of the size and nature of the available evidence in order to inform and facilitate the use of this evidence-base’.<sup>4</sup>

Spearheaded by the Initiative for Impact Evaluations (3ie),<sup>5</sup> a range of organisations have started to produce evidence maps. Both UNICEF<sup>6</sup> and 3ie<sup>7</sup> recently published evidence maps related to violence against women and children across the world. In South Africa, the Department of Planning, Monitoring and Evaluation (DPME)

has developed a methodology for policy-relevant evidence maps and has produced evidence maps for five areas of the National Development Plan.<sup>8</sup> This work has been supported by ACE since 2015.<sup>9</sup>

An evidence map is presented as an interactive on-line tool, that can quickly show users how much evidence exists, and the nature of that evidence for a given research or practice area, and where the gaps are in the evidence-base. Maps are intended to be used to inform decision-making and, more frequently, serve as a tool to start a shared conversation about the available evidence-base and how it overlaps and links to the existing policy or practice. However, the maps on their own are not intended to provide recommendations on the effects of specific interventions because they do not conduct a synthesis of evidence.

Evidence maps also serve to support knowledge management and help highlight areas where further research is required. This is because evidence maps present the evidence in a way that can be organised and customised around the needs of the user. This allows for an effective organisation and maintenance of the available knowledge for a given practice, policy, or research community.

By providing a snapshot view of what we know, do not know, and not know enough of, about a particular issue, evidence maps can inform research commissioning. For example, they highlight total evidence gaps (i.e. where insufficient primary research is available) as well as evidence synthesis gaps (i.e., where sufficient primary evidence is available, but this has not been synthesised for policy and practice).<sup>10</sup>

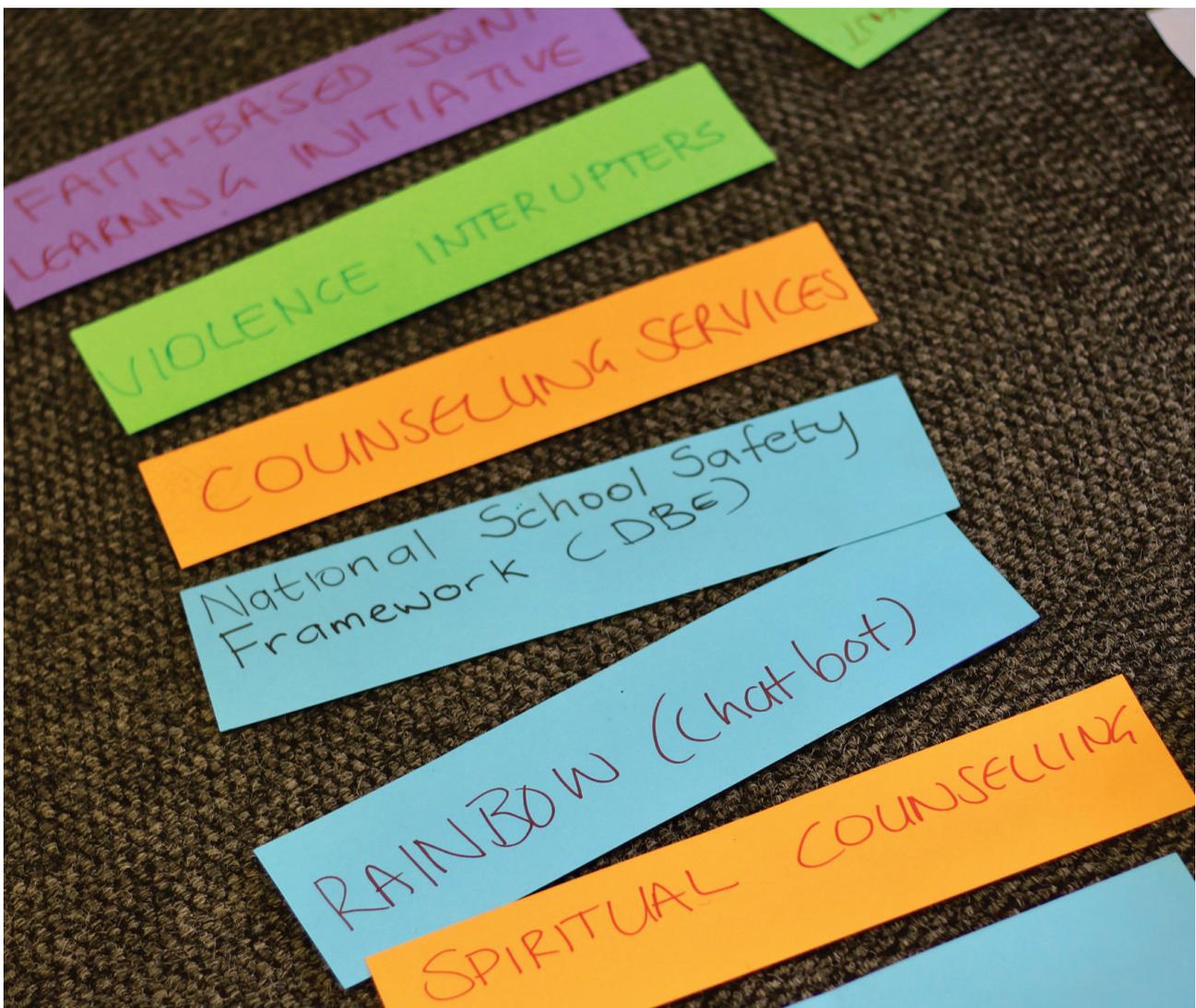


Image credit: Amelia Broodryk/ISS

# Methods: The evidence mapping process

## **Step 1: Developing a conceptual framework and search strategy (September–November 2018)**

The first step was to develop a conceptual framework for the map and to identify the inclusion criteria for evidence that would be part of the map.

The framework was developed through consultation with sector experts and members of the Violence Prevention Forum. During this phase of the project, the research team identified institutions delivering programmes or undertaking research relevant to violence against women and/or children, and leading experts and seminal work through a transparent and consultative process. This allowed the team to identify and make contact with professionals and organisations who might be missed if the map were to focus only on literature from peer-reviewed journals.

The conceptual framework and inclusion criteria define the population of focus, how violence is conceptualised, and the type of research that will be included or excluded. In this map, the following concepts were applied.

### **Population**

The map includes all studies focused on violence against women and children. Violence was defined as all forms of physical, emotional violence, injury or abuse, neglect or negligent treatment, maltreatment of exploitation and sexual abuse.

Women were defined by biological sex. The map therefore includes all studies of interventions to address any form of violence against women, including biological women who identify as men. Women did not need to have been the target of the intervention nor did they need to be the only focus of the studies. Thus, a study on intervention targeting men to address their behaviour towards women was included, whereas a study of an intervention for women to address their perpetration of violence against men was excluded. Similarly, studies focusing on reducing violence directed at men who have sex with other men (even men who identify as women) were excluded, whereas studies on interventions to address violence against gender non-conforming or women who identify as lesbian were included.

Children were defined in accordance with South African law that identifies any individual 18 and younger to be a child. Studies targeting both boy and girl children were included in the map. The map focuses on interventions tested or implemented in South Africa.

### **Time frame**

Studies undertaken between 1990 and 2018 were included.

### **Intervention**

The primary policy question that underpins this map is: what works to reduce violence against women and children? The map includes studies that researched specific interventions. The term 'intervention' was used to refer to a programme, policy, strategy, set of actions and activities, input, etc. that tangibly intervened in social systems to alter existing conditions. This could be at societal, community, household, or individual level. The location and setting of the intervention (e.g. school-based, online, health centers) was not considered as a variable for exclusion. This means that all interventions regardless of setting, location, and audience were eligible for inclusion as long as they intended to alter conditions that produce violence against women and children.

## Study designs included

The map only includes empirical research studies. Empirical research was defined as a study that has a structured and documented process to collect empirical data from research participants (either qualitative or quantitative) and has a structured and documented process to analyse this data to establish results.

This included, for example, experimental and quasi-experimental research, evaluation studies (formative, summative, process), implementation research, descriptive quantitative research designs such as surveys, qualitative research designs such as ethnographies, participatory appraisal, community surveys and case studies, amongst others.

This map excluded any study without a documented research process. These included studies reporting on administrative data, census and monitoring data where no structured analysis had been conducted.

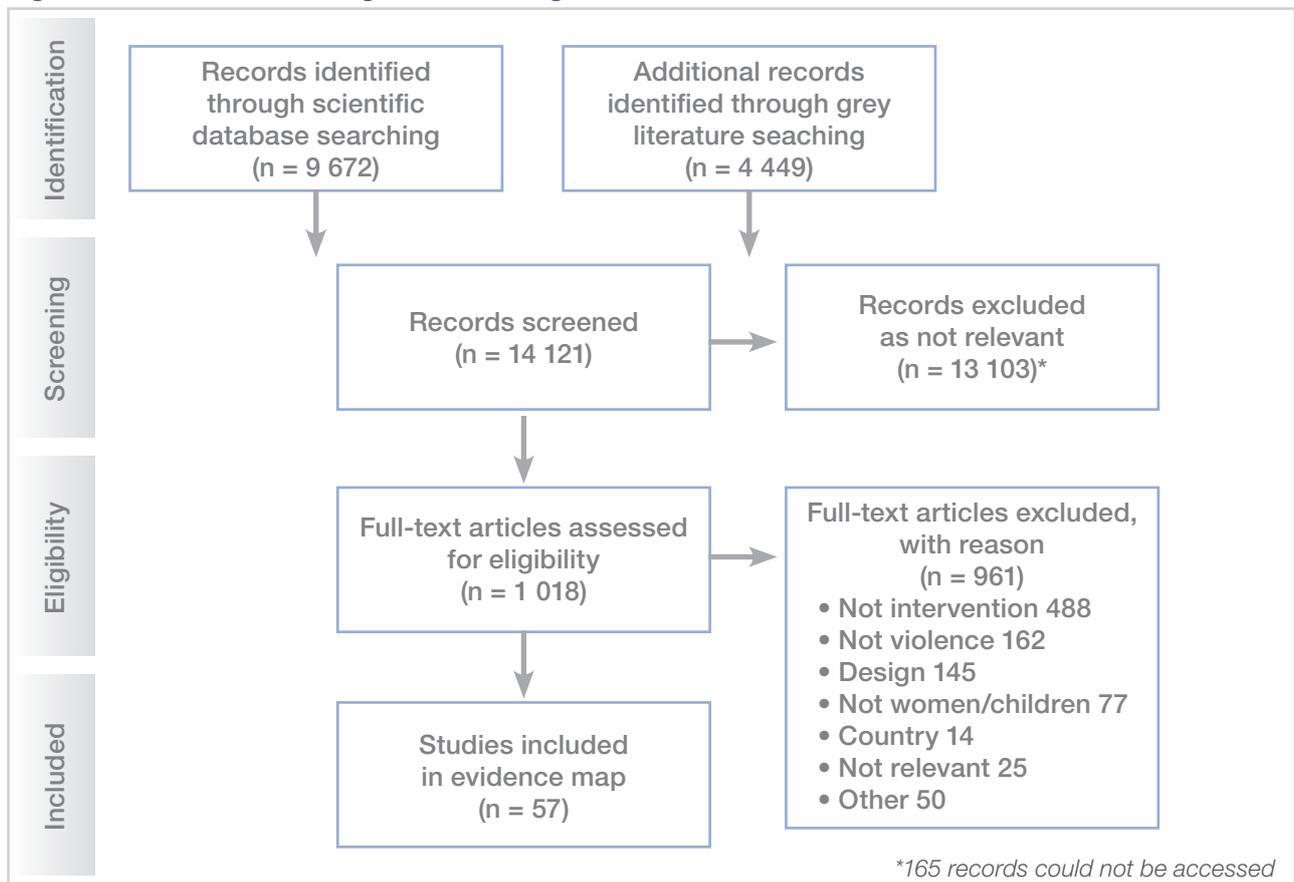
The map also excluded systematic reviews and other types of synthesis of existing research and data. Synthesis studies were excluded because their inclusion can result in double counting when both the synthesis and the primary studies they synthesised are included in the same map.

Conceptual and theoretical studies that do not collect empirical data and analysis such as studies developing new theories and conducting conceptual inquiry and synthesis, opinion pieces, commentaries, and discussion papers were all excluded.

## Step 2: Systematic search for evidence (November 2018–April 2019)

A systematic search for evidence was conducted by the research team in two parts: first, a systematic search for all the scientific evidence indexed in academic journals; and second, a full search of relevant 'grey' literature sources for evidence not indexed in academic databases. These search hits were then screened on title and abstract for inclusion in the evidence map. The team identified a total of 14 121 citations through the search. Figure 1 provides a full overview of the search and screening process.

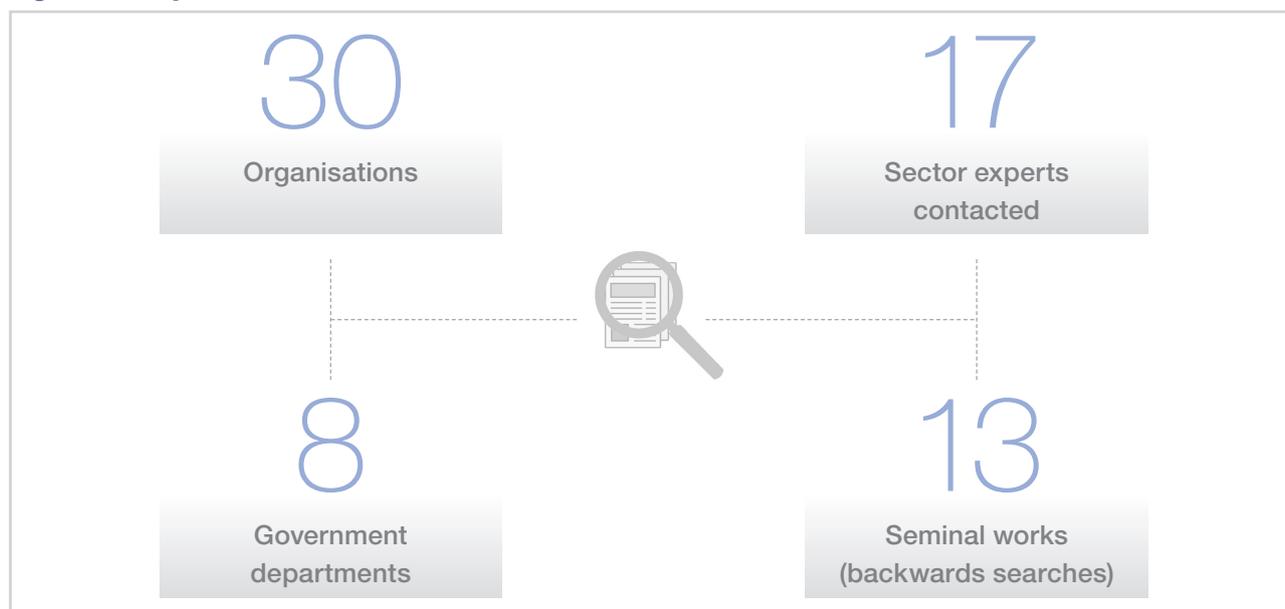
**Figure 1: Overview searching and screening**



## Grey literature search (November–December 2018)

The first search focused on sources of grey literature. Grey literature includes all research, studies, articles and reports that are published in non-academic sources. Grey literature was sourced from organisations' websites, through sector experts, other contacts and a backward and forward citation search process. In addition, two researchers went through all seminal research in South Africa and manually searched the reference lists and checked research or articles referenced. Figure 2 provides details of the grey literature sources.

**Figure 2: Grey literature sources**



## Academic search (February–April 2019)

A senior researcher with experience in developing search strategies for systematic reviews designed a detailed search strategy for the academic databases.<sup>11</sup> This search strategy consisted of a range of search concepts and associated terms. These concepts were combined with Boolean operators as follows:

Region terms (eg South Africa OR Eastern Cape) **AND** (((VAWC terms (eg “Violence against women and children” OR “gender-based violence”)) **OR** ((population terms (eg women OR girl)) **AND** ((violence terms (eg “violence” OR “murder\*”))))))

The search strategy was applied in seven academic databases: Web of Science, SCOPUS, Pub Med, and ERIC, EconLit, Academic Search Complete and PAIS via Ebsco Host. These databases were identified as the most relevant sources for articles relating to violence against women and children. They cover a range of different academic disciplines including: health care, social work, political science, economics, psychology, gender studies, etc.

In total, 9 672 records were identified from the search of academic databases.

## Step 3: Screening for inclusion (April–June 2019)

In total, the search identified 14 121 citations in phase 1, which were then screened by looking at the abstracts and measuring them against the inclusion criteria. In phase 2 articles were screened on the basis of an analysis of the full-texts. Following the abstract screening, 13 103 citations were excluded as not relevant.<sup>12</sup> This left a total of 1 018 included studies for full-text screening which met the criteria of empirical enquiry, population, period, and intervention.<sup>13</sup> Because of the large volume of identified studies at abstract-level, the screening took much longer than initially planned.

The full-texts of the 1 018 studies were then sought and screened for inclusion. This was conducted in conjunction with the data extraction process described below. The team recorded reasons for excluding

studies in a way that could be validated by the project manager and others. A further 961 studies were excluded at full-text screening for the following reasons:

- 488 did not have an intervention
- 162 were not focused on violence<sup>14</sup>
- 145 were excluded because of study design
- 77 were studying violence, but not against women or children
- 14 were not focused on South Africa
- 25 were not relevant to the research question
- 50 for other reasons, including, duplicates, books, and non-research reports.

In total, this led to the inclusion of 57 studies in the map.<sup>15</sup>

#### **Step 4: Data extraction (June–September 2019)**

A team of five researchers worked on extracting the data from the 57 ‘included’ studies. Data extraction is a transparent process where the team extracted key variables from the identified evidence-base in order to populate the evidence map. In this, each ‘included’ full-text article was read, and the researcher proceeded to extract information about the intervention that was studied and the outcomes reported using a predefined the extraction tool.<sup>16</sup> In addition, the extraction included variables required for the evidence mapping filters including:

1. Province
2. Region
3. Socio-economic
4. Population
5. Age
6. Vulnerability
7. Implementation cost
8. Implementation length
9. Implementation scale
10. Implementation agency

#### **Step 5: Visualisation and analysis**

The final map includes 57 individual studies. It can be accessed at: <https://issafrica.org/crimehub/analysis/research/evidence-map-south-african-interventions-to-prevent-violence-against-women-and-children>.

ACE’s open-access mapping software was used to create the evidence map. This required data input and software set-up in EPPI-Reviewer 4 followed the completion of the data extraction.

Ten of the included studies are reports from grey literature and 47 are academic studies. When interpreting the map (see Figure 3) readers need to keep in mind the criteria used to screen and include studies. Readers need to note that the size of the bubble does not mean that the intervention is effective; it simply reflects the number of studies found in that category of interventions.

Preliminary analysis of the map shows that interventions with parents or caregivers are more likely to have been subjected to empirical studies. Most of these studies measured the impact of parenting programmes on child-caregiver relationships, including improving positive parenting and reducing use of physical violence in discipline. Nine studies were found in this category.

For violence against women (VAW), social mobilisation, policing (visible policing, policing forums, protection order, etc.), income generation, and life skills interventions were more likely to be subject to empirical research for their effect on both perpetration and victimisation.

**Figure 3: Visualisation of the evidence map**



There are clear, observable gaps in the map. Areas with no or very little empirical studies to understand the effect of interventions on perpetration and victimisation include:

- government policies
- prosecution
- specialised courts
- alternative housing
- substance abuse programmes
- call centers and other phone (including mobile) services interventions
- environmental design; amongst others

This is not to say that these interventions do not work, but that we do not have enough accessible empirical evidence to know if they work.

The spread of research across provinces is uneven. Western Cape, Kwa-Zulu Natal and Eastern Cape had the highest number of studies with 16, 11 and 10 respectively. Limpopo and Gauteng have seven studies each. There are observable gaps in Free State, Northern Cape, Mpumalanga and North West with zero studies. This does not necessarily mean that there is no research being done in these provinces but that perhaps the research has not been primarily to test interventions, they could also fall in the six studies where location is not specified. Either way the limited research in these provinces is noteworthy.

Most of the studies reported findings of interventions tested in one community or area. Thirty-six studies fall in that category. Eleven studies reported findings from more than one location in one province. Only seven could be categorised as national, and even then, most of the studies represent two or three provinces. There were few studies which focused on services provided by government.

Many studies focused on whether an intervention works, that is, whether it strengthens protective factors or mitigates the effect of risk factors. Very few report on implementation in any detail. Published studies did not always report on the time period over which an intervention was implemented, how many participants were targeted or reached by the programme, who implemented the programme (i.e. NGO, CBO, government, etc.) and who the partners were.

## Emerging lessons

What is presented in this report are emerging findings and lessons. More analysis of the map and the evidence collected is required, and is planned for 2020. From the work done so far it is clear that the conceptualisation of 'violence prevention' is a challenge. Because violence and violence prevention are complex and involve a range of interventions that address multiple risk factors, what constitutes violence prevention cannot be neatly or tightly defined. This partly explains a loosely defined search strategy and number of abstracts that had to be screened.

Despite finding in excess of 14 000 studies at the outset, only 1 018 studies were initially considered relevant to the policy question guiding the map and, in the end, only 57 were included. These are the only studies in a ten-year period that evaluated interventions to prevent violence. Most research focused on explaining the nature of the problem and its consequence, rather than what works to address the problem.

There were a significant number of studies that focused on the intersection between intimate partner violence, rape and HIV/AIDS infections. This shows clearly the scale of the investment in addressing HIV and AIDS. Unless violence is seen as an equivalent epidemic, and an equivalent investment made in determining what works to prevent it, evidence-based interventions will be limited in number.

Finally, most of the studies that focused on government policies or strategic plans tended to be conceptual. There is a paucity of empirical studies to understand how government interventions, through policy or institutional responses, affect violence perpetration or victimisation. These are important gaps in our knowledge that need to be addressed for South Africa to be able to reduce the current levels of violence.

## Notes

- 1 The Violence Prevention Forum brings together researchers, policy makers and community-based organisations in a long-term process to build relationships across the sectors, with the objective of ensuring that evidence-informed programmes to prevent violence are made available to communities in South Africa. See <http://www.violence-prevention.org/> for more information. The evidence map can be accessed at <https://issafrica.org/crimehub/analysis/research/evidence-map-south-african-interventions-to-prevent-violence-against-women-and-children>
- 2 A detailed technical report about the map will be released in 2020. This will be followed by a deeper analysis of the map and an elaboration of the current status of the interventions identified.
- 3 South African Dialogue Forum (2019) “What will it take to prevent interpersonal violence in South Africa”, ISS Policy brief 122, Pretoria: Institute for Security Studies. Available at <https://issafrica.org/research/policy-brief/what-will-it-take-to-prevent-interpersonal-violence-in-south-africa> [accessed 5 November 2019]
- 4 L Langer, H Dayal, P Nduku, An introduction to evidence mapping, DPME/ACE: Pretoria, South Africa, 2018.
- 5 B Snilstveit, M Vojtkova, A Bhavsar, M Gaarder, Evidence gap maps—a tool for promoting evidence-informed policy and prioritizing future research, World Bank: Washington DC, US, 2013.
- 6 For more information please see <https://campbellcollaboration.org/evidence-gap-maps.html> [accessed 5 November 2019]
- 7 For more information please see <https://www.3ieimpact.org/evidence-hub/evidence-gap-maps> [accessed 5 November 2019]
- 8 H Dayal, L Langer, Policy-relevant evidence map, A Departmental Guidance Note, DPME: Pretoria, South Africa, 2016.
- 9 ACE has developed 17 evidence maps most of which are directly focused on development issues in South Africa.
- 10 For a high-level overview of evidence map’s applications see here: <http://www.africaevidencenetwork.org/wp-content/uploads/2014/06/Evidence-Map-Primer.pdf> accessed [6 November 2019]
- 11 See online appendix A. Available at: <https://issafrica.org/crimehub/analysis/research/evidence-map-south-african-interventions-to-prevent-violence-against-women-and-children>
- 12 This large number of irrelevant citations was expected given the very broad and over-inclusive search strategy. Our aim was for sensitivity over specificity mitigating against the risk of missing relevant studies. Full text studies for 165 studies could not be located in any of the online databases and libraries, and other efforts to get the full text (i.e. trying to get hold of the lead author, asking other experts in the sector to assist with locating the full text, etc.) were not successful.
- 13 Studies for which there was insufficient information to make a decision on abstract were included and carried over into the full-text screening stage
- 14 Most of these mentioned violence but the outcomes they studied were not perpetration/victimization. In most cases these studies were in the field of HIV/AIDS and were looking at how interventions on VAW/IPV affect HIV infections, or use of ARVs, etc.
- 15 The reference list of these studies is provided can be accessed in online appendix B at: <https://issafrica.org/crimehub/analysis/research/evidence-map-south-african-interventions-to-prevent-violence-against-women-and-children>
- 16 The extraction tool provides clear criteria for final inclusion or exclusion of articles or reports and enables a researcher to make documented decisions about whether a study is included, or excluded from the map. Extraction tool can be accessed in online appendix C at: <https://issafrica.org/crimehub/analysis/research/evidence-map-south-african-interventions-to-prevent-violence-against-women-and-children>



## About the authors

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Mmabatho Molebatsi and Muofhe Mulondo were contracted junior researchers at the Institute of Security Studies and were involved in abstract screening and data extraction

Chandré Gould is a senior research fellow in the Justice and Violence Prevention Programme at the ISS. She conceptualised the project, sought funding and provided sectoral expertise to guide the project.

Diketso Mufamadi is a researcher in the Justice and Violence Prevention Programme at the ISS. She conducted screening and data extraction.

Laurenz Langer is a senior researcher with ACE. He developed the research design, search strategy and conducted academic evidence search.

## About the ISS

The Institute for Security Studies (ISS) partners to build knowledge and skills that secure Africa's future. The ISS is an African non-profit with offices in South Africa, Kenya, Ethiopia and Senegal. Using its networks and influence, the ISS provides timely and credible policy research, practical training and technical assistance to governments and civil society.

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