



# POLICY BRIEF

## Reducing violence in South Africa From research to action

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Collaboration between government, non-governmental organisations, international organisations, donors and researchers is critical to ending the pandemic of violence, particularly violence against children. This policy brief presents a framework for bringing the sectors together to take evidence-based violence prevention programmes to scale in South Africa. It is based on a series of consultations with experts from government and civil society.

## Key recommendations

- ▶ In South Africa, we know a lot about the nature and extent of violence, and are starting to know how to prevent it. The country is in a strong position to contribute to the global agenda to end violence against women and children.
- ▶ South Africa must now take the next step – to understand what it takes to make violence prevention programmes work and how to sustain them.
- ▶ Implementation research seeks to understand what, why and how interventions work in real-world settings. It feeds that information back in a way that can be used by policymakers and practitioners so that successful programmes can be adapted to changing contexts and needs.
- ▶ A concerted effort by government, researchers and implementers is necessary to build a communication bridge to facilitate the seamless flow of information, evidence, and knowledge.
- ▶ The time is ripe to establish an implementation hub to bring all stakeholders together to build a shared vision for preventing violence.

## Introduction

Preventing and reducing violence in South Africa must be a national priority if the country is to realise the development goals set by the National Development Plan 2030.<sup>1</sup> Violence exacts an enormous cost – both directly and indirectly<sup>2</sup> – and will undermine and hamper efforts to reduce poverty and inequality and to grow the economy.

In December 2017 South Africa joined 15 Pathfinding countries under the Global Partnership to End Violence against Children. Being a Pathfinding country commits South Africa to realise the United Nations' Sustainable Development Goal 16.2: to end abuse, exploitation, trafficking and all forms of violence and torture against children. It also commits the country to ensuring that all sectors – government, civil society and the private sector – work together to end violence against children.<sup>3</sup>

But ending violence experienced by children requires us also to end violence against women. Not only is this important because it will reduce children's exposure to violence, but also because violence against women is a human rights violation that impacts negatively on the society in which children are raised.

### Implementing programmes that don't work, or worse cause harm, are a waste of precious resources

If we, as civil society organisations and institutions, researchers and government, wish to ensure that the programmes and interventions designed to prevent violence are evidence-based – that is, actually do what they are intended to – the programmes must have been rigorously tested, and shown to work. This is important if they are to be made available across the country in communities where they are most needed.

Implementing programmes that don't work, or worse cause harm, are a waste of precious resources. As a country we have an ethical responsibility to ensure that adults and children receive good-quality and effective programmes to prevent and reduce violence and trauma.

While we all (policymakers, researchers, social activists, community-level practitioners) want to be sure that we are not wasting our time and precious resources on approaches that don't work, getting this right is not simple.

South African researchers are developing a strong base of knowledge and evidence for primary violence prevention programmes that show evidence of effect.<sup>4</sup> But we don't know nearly enough about how to roll these out in many different communities and reach many children and parents at community level, while also making sure that they remain effective. We do not yet know if a programme that's been tested in one setting and shown to, for example, improve children's cognitive and language development,



or reduce parents' use of corporal punishment, will work in the same way when delivered in a different context. We also do not know if it will work with people who don't have contact with the programme developers (and possibly don't even know them), or with staff who the developers and researchers have had no role in selecting or training.

In short, the kind of evaluations we have already done (such as through randomised-controlled trials – 'RCTs') give us a good starting point.<sup>5</sup> They tell us what can work, but we need a different strategy to make sure that these programmes continue to work as they are intended in the real world, whether they are being implemented by government officials or non-governmental organisation (NGO) practitioners. This is particularly important if we must keep costs low by relying on lay staff, community members or people with a low level of skill and who are working within NGOs who may struggle to sustain funding.

There are many difficult questions to be answered: what level of skill and qualification do staff who deliver programmes, such as positive parenting programmes, need? If we are going to use lay staff (people who are not professionals), how do we train them and ensure that they keep those skills they need? How do we support and supervise them well enough that they do not burn out or become overwhelmed and leave? How do we make sure these programmes can be effective in

difficult contexts where people may experience complex adversities resulting from poverty, ill health, poor mental health, repeated trauma, crime and violence?

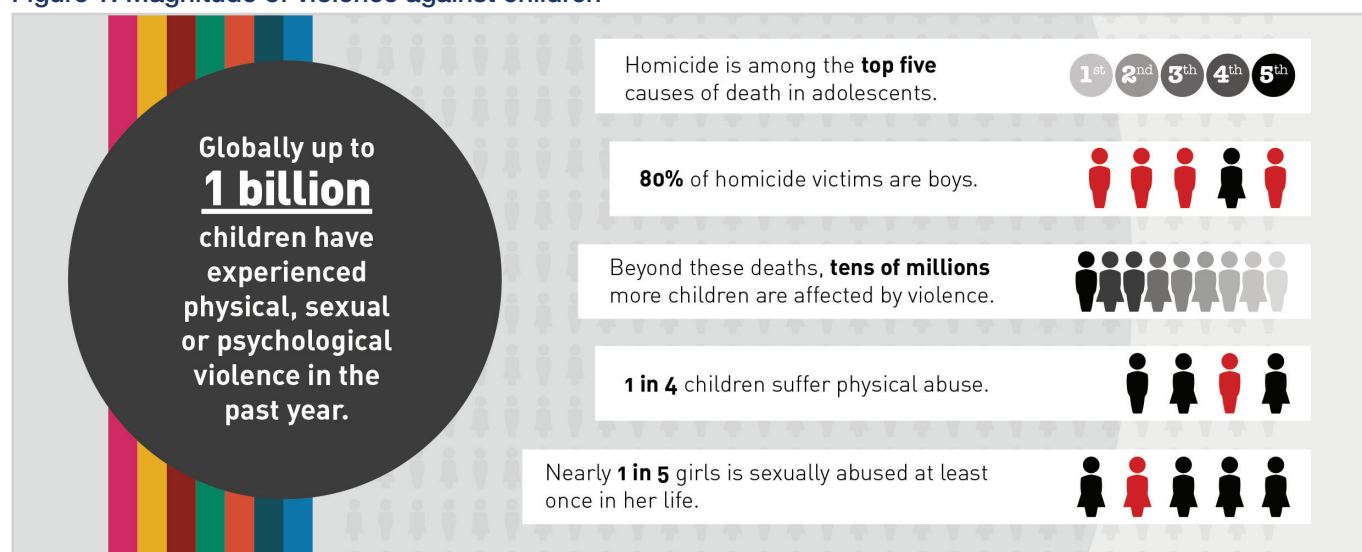
There is no easy answer to these questions, and there is no country in the world, as yet, that has found a way to do this for the range of primary violence prevention programmes that we believe need to be delivered simultaneously if we are to prevent and reduce violence.

How do we support the people who deliver programmes so that they don't burn out or become overwhelmed?

The Global Partnership<sup>6</sup> to End Violence Against Children aims to accelerate action to end violence against children. The partnership provides clear guidance as to what kind of interventions and programmes have shown success in doing this. The seven interlinked strategies that are detailed in the World Health Organisation's INSPIRE package are programmes that:

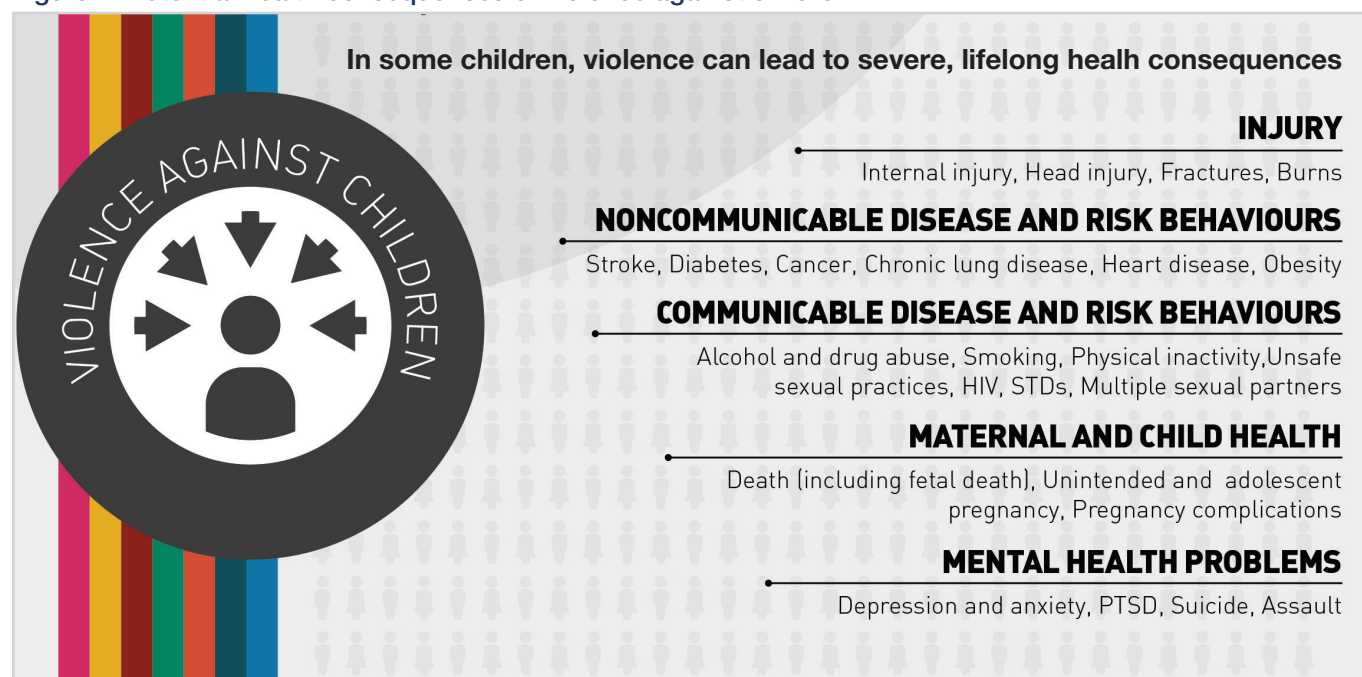
- Change beliefs and behaviours about gender roles.
- Provide parent and caregiver support through positive parenting programmes.
- Strengthen the financial circumstances of poor families through microfinance and grants combined with training around gender norms.

Figure 1: Magnitude of violence against children



Source: World Health Organization. (2016). *INSPIRE: Seven strategies for ending violence against children*. Geneva: World Health Organization. [http://www.who.int/violence\\_injury\\_prevention/violence/inspire/en/](http://www.who.int/violence_injury_prevention/violence/inspire/en/)

**Figure 2: Potential health consequences of violence against children**



Source: World Health Organization. (2016). *INSPIRE: Seven strategies for ending violence against children*. Geneva: World Health Organization. [http://www.who.int/violence\\_injury\\_prevention/violence/inspire/en/](http://www.who.int/violence_injury_prevention/violence/inspire/en/)

- Provide response and support services after violence has been committed, such as treatment programmes for juvenile offenders and counselling services for victims of violence (to break cycles of violence and victimisation).
- Improve safety at school and after school and improve children's life skills and social skills.<sup>7</sup>

South Africa is already doing quite well. Not only is there an existing wealth of research that tells us what the problem of violence is and how big it is,<sup>8</sup> but also a growing wealth of information about the root causes of violence, and what can and needs to be done to address it.<sup>9</sup> Through the South African Medical Research Council's What Works programme,<sup>10</sup> a huge investment has been made to develop and test programmes that are intended to reduce gender-based violence in South Africa and in other developing countries.

If we are to realise the value of this, and other investments, we have to work collectively, as government, NGOs and academics, to determine how to take those programmes that work to scale in a way that is mindful of context, respectful of the implementing staff and organisations, and of the beneficiaries of the programmes at community level. Ultimately programmes must be both effective and sustainable.

In this policy brief we suggest that implementation research may offer us the tools we need to make this happen. This is the third policy brief in a series focusing on violence prevention. It describes how government, NGOs and academics might begin to work out how to take evidence-based violence prevention programmes to scale in South Africa. The first two policy briefs in the series are titled 'Reducing violence in South Africa: From policing to prevention' and 'Reducing violence in South Africa: Challenges and opportunities for resourcing violence prevention'.

Ultimately programmes that prevent and respond to violence must be effective and sustainable

The intention of this policy brief is to offer insights gained through consultation with practitioners, scholars and policymakers about how implementation research might support the sustainable scale-up of evidence-based programmes that address the risk factors for violence. It begins by offering a definition of implementation research. It then addresses how research, implementation and policies might interact to support one another and how

the use of implementation research methodologies can, and must, enable effective collaboration and communication across sectors.

## Setting the scene

In South Africa reference is often made by government, NGOs and academics to the ‘implementation gap’. In other words, while as a country we have strong and progressive policies and legislation, implementing these policies and turning them into practice has been a challenge.<sup>11</sup> There are many reasons for this, not least that effective implementation is massively complicated by the messiness of the real world. This is not peculiar to South Africa. As Dean Fixsen et al have noted, the ‘challenges and complexities of implementation far outweigh the efforts of developing the practices and programs themselves’.<sup>12</sup>

## What is implementation research?

Public health literature defines implementation research as ‘the study of methods to improve the uptake, implementation, and translation of research findings into routine and common practices’. Implementation research thus offers a way to find out what works and doesn’t, in practice. This knowledge can then be used to inform improvements in the delivery of programmes and services that address the risk factors for violence, and inform the integration of tested programmes in new areas and communities.<sup>13</sup>

Ultimately, implementation research seeks to understand what, why, how, and if interventions work in real-world settings and feed that information back in a way that can be used by policymakers and practitioners. This is important if programmes with proven effectiveness are to be adapted to different and changing contexts and needs.

Implementation research emphasises finding solutions to real-world problems, as opposed to controlling for conditions or removing their influence as causal effects. This is perhaps best articulated by Fixsen et al, ‘As a field, we have discovered that all the paper in file cabinets plus all the manuals on the shelves do not equal real-world transformation of human service systems through innovative practice.’<sup>14</sup>

In September 2017, Save the Children South Africa and the Institute for Security Studies (ISS) convened an expert consultation with representation from government, civil society, research institutions and international agencies. This was a unique gathering where participants actively reflected on their experiences and collectively contributed to building a common implementation research agenda. We agreed that implementation research encompasses these principles:

- It is a collaborative investigation (‘implementers hearing beneficiaries, government hearing implementers, academics hearing policymakers and policymakers and implementers hearing academics’).
- It is an ongoing and practice-informed undertaking with strong feedback loops.
- It is research that is informed by and contributes to practice, and involves the active participation of practitioners and implementers.
- It is a process that recognises the importance of context and changing conditions. It helps ensure that there is a good match between the programmes delivered, the problem that needs to be addressed, and the skills and ability of implementing staff and their institutions.
- It is about translating research so that it is understandable and relevant to non-academic audiences.
- It speaks to existing policies and government goals.
- It involves understanding what we need to replicate something that works.
- It requires good communication across sectors so that learning can be shared. Effective implementation research requires sectors to answer the question: ‘How can we hear each other?’

The next section offers insights gleaned from this group of experts into how implementation research can inform and support efforts to prevent violence.

## Where does implementation research fit and why is it important?

One reason for the difficulty in taking violence prevention solutions to scale is that violence has become deeply entrenched across generations in South African society.

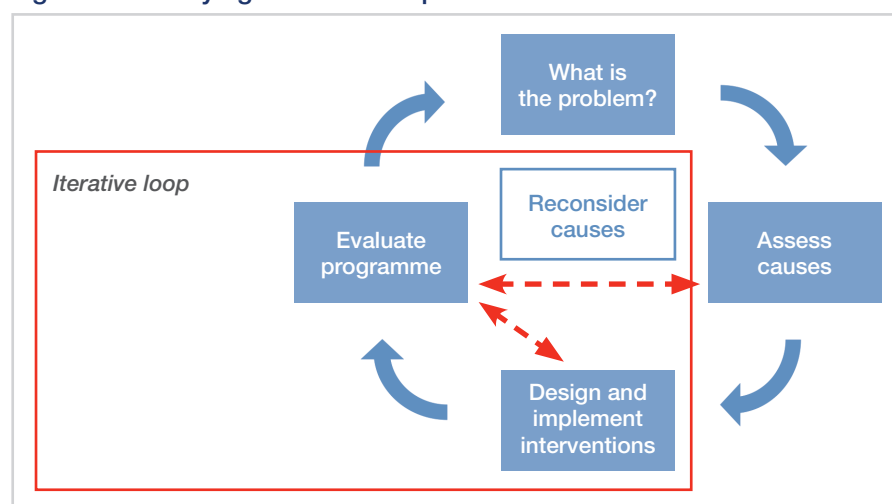
The use of violence is often supported by norms that value violence as a way to solve problems.<sup>15</sup> Implementing solutions is further complicated by a strained economy and thus constrained government spending (as outlined in the second policy brief of this series, ‘Reducing violence in South Africa: Challenges and opportunities for resourcing violence prevention’).

Now that we understand the problem and its causes, the next step is to know what kinds of programmes can reduce and prevent violence

This means that it is vital for policymakers, academics and practitioners to identify and have a shared understanding of the responsibilities, strengths and weaknesses of the sectors that all have a critical role to play in implementing and supporting violence prevention programmes.

The model below, borrowed from the health sector, shows the process that starts with understanding the problem and what causes it. The next step is finding solutions and testing whether they work. Once this has been done we need to sustain learning and adapt the programmes as the context and needs change. At the same time we need to make sure that this is done in a way that respects communities and children who benefit from the programmes, and the people and organisations who deliver them.

**Figure 3: Identifying the role of implementation research<sup>16</sup>**



### What is the problem?

Over the years, South Africa has built up a wealth of research showing that violence is pervasive and affects women, children and men in South Africa. This includes, but is not limited to, the Optimus Study,<sup>17</sup> the School Violence Study by the Centre for Justice and Crime Prevention,<sup>18</sup> the Violence Against Children costing study by Save the Children,<sup>19</sup> the Child Death Reviews Study by the Children’s Institute, the study on masculinity in male homicide



SOUTH AFRICA HAS A WEALTH OF RESEARCH ON VIOLENCE AND ITS AFFECTS

victimisation by the South African Medical Research Council (SAMRC),<sup>20</sup> the Femicide<sup>21</sup> and Infanticide<sup>22</sup> studies by the SAMRC, the Gauteng Gender Based Violence Indicators Study by Gender Links,<sup>23</sup> and the South African Stress and Health Study.<sup>24</sup> We thus have a good basis for understanding the nature and extent of the enormous problem South Africa faces.

## What causes violence?

Again, South Africa has a healthy body of knowledge about the factors that cause violence. Qualitative and quantitative studies include the four-part study undertaken by the Centre for the Study of Violence and Reconciliation commissioned by the Minister of Police,<sup>25</sup> the life history studies by the SAMRC,<sup>26</sup> ISS<sup>27</sup> and University of Johannesburg,<sup>28</sup> the study to identify the structural determinants of violence against women and children (VAWC) commissioned by the Inter-Ministerial Committee on VAWC,<sup>29</sup> and a study on risk factors for male perpetration of violence.<sup>30</sup>

## What are the solutions?

Now that we understand the nature and extent of the problem, and its causes, the next step is to know what kinds of programmes and interventions, alone or together, can reduce and prevent violence. Researchers, NGOs, intergovernmental organisations (IGOs) and government (separately and in collaboration) have been designing, testing and evaluating interventions. These include (but are not limited to):

- Skhokho, a school-based programme to prevent intimate-partner violence, developed by the SAMRC.<sup>31</sup>
- Thula Sana,<sup>32</sup> a home-visiting programme developed by Stellenbosch and Oxford universities to increase attachment between mothers and their babies and hence reduce the likelihood of young children being abused. (Other home visiting programmes that are currently being implemented by NGOs in Gauteng and the Western Cape have also been evaluated).
- The Sinovuyo kids and teen programmes that aim to reduce child abuse and neglect and increase positive parenting, developed by academics at the universities of Cape Town (UCT), Oxford and Bangor.<sup>33</sup>
- The Stepping Stones and Creating Futures programme that seeks to change gender norms and strengthen

livelihoods to reduce women's experiences of intimate partner violence (IPV) and men's perpetration of IPV, and reduce controlling behaviours while increasing household income.<sup>34</sup>

- MenCare+ delivered by Sonke Gender Justice.<sup>35</sup>
- The Talking Taboos curriculum on sex, gender and violence by the Gender Health and Justice Unit of UCT.
- The National School Safety Framework by the CJCP.

There are also many programmes and interventions being delivered in South Africa that have either not been evaluated, or that have been evaluated using valid methods other than RCTs, that are known to be effective.

In summary: We know that there is a problem, we know what it is and how big it is, and we know what factors come together to lead to violence. We are also beginning to know what kinds of programmes are necessary, and that work to reduce these factors. This is an excellent start and puts South Africa in a good position to begin understanding how to take evidence-based programmes to scale.

South Africa is in a good position to begin understanding how to take evidence-based programmes to scale

What we need now is knowledge about the relevance, generalisation, and applicability of interventions at scale, in complex situations, and in communities that experience multiple adversities. We also need to know how to create systems to monitor and evaluate programmes that can inform changes and improvements over time (we need to know that the programmes keep working, and when they do not). We also need to find ways to communicate this information, and other operational information about what kind of skills implementing staff need, what kind of ongoing support they require, and what institutional, managerial and supervisory support they need.

We need to know how to provide effective training for implementing staff, and how best to recruit and retain good implementers. We also need to understand what kind of relationship is necessary between the people who design and develop programmes and those



who implement them. This information must inform further programme development. We also need to determine what kind of governance is necessary to support and sustain these programmes at scale.

In the next section we look at a case study that demonstrates what implementing organisations can contribute to our knowledge about delivering programmes in communities affected by violence.

## What we can learn from parenting programme implementers

In May 2017, Save the Children and the ISS conducted a focus group discussion with UNICEF and five organisations who are implementing positive parenting programmes in South Africa. The NGOs were Ububele, the Seven Passes Initiative, Save the Children South Africa, Clowns Without Borders, and the Parent Centre. The aim was to understand the key challenges, barriers and facilitators experienced when implementing parenting programmes (all of which were open to all caregivers, whether they were the biological parent or not), and what these organisations do to overcome the problems.

Implementing organisations can contribute to our knowledge about delivering programmes in communities affected by violence

The three implementing challenges the group discussed were recruitment (how to attract parents to attend the programmes), retention (how to keep parents involved for the duration of the programme), and referral systems (for problems the programmes can't or don't address).<sup>36</sup> Below are a few examples of the implementation challenges that organisations faced on a daily basis and how they overcame them.

### Recruitment

Parents fear being judged or stigmatised as having a 'naughty child' or being bad parents. They worry that signing up for a parenting programme will make them look bad. If this is the case parents are unlikely to want to take part in parenting programmes. A focus group participant said:

... facilitators may approach parents with the notion that you are being invited to join this programme because your child has been deemed naughty. Already there's stigma ... because nobody will say that my child is naughty or has got a problem, or we have a problem as a family.

Other challenges related to the timing of recruitment. It was hard to find a suitable time to speak to parents about the programmes. During the day caregivers may be working or are busy with household chores. Organisations also found that recruitment was easier if they had well-established relationships with the community in which they worked and had



A CHALLENGE IS KEEPING PARENTS INVOLVED FOR THE DURATION OF A PROGRAMME



established trust and credibility recruitment. A focus group participant said:

... when we were working with two organisations, there was one organisation that was using already-existing community volunteers that were known by the families, and they pulled more people than those who were total strangers to participants.

Some solutions that had been found were to recruit through existing services such as clinics, working with school principals and early child development centre managers to help advertise the programme and offer referrals, and engaging with community gatekeepers to gain trust from and access to the communities.

## Retention

In order for parenting programmes to be effective, parents need to remain engaged for the duration of the programmes. Retention of parents was compromised if it was difficult, expensive or unsafe to access the venue where programmes were being delivered, if the programme took place around meal times and meals were not provided, or if parents with children could not find someone to look after their child while attending the programme. High rates of caregiver unemployment often resulted in caregivers missing sessions due to the need to prioritise employment opportunities. A focus group participant said:

... if they are unemployed they depend on daytime jobs, so whenever somebody has an opportunity ... like you've recruited them and they agreed and are excited about it, but in the morning a person says I have a job for you, so they end up just deciding to go and meet their needs rather than just come for a programme.

When parents had to move around a lot, in search of employment, or because they needed to escape domestic abuse or natural disasters such as fires or floods, this also affected their ability to stay involved in a parenting programme.

Some best practices shared included:

- Using the first session of a programme to form a connection with caregivers.

- Demonstrating respect and empathy from the outset so that caregivers receive a sense of the core values of the programmes, which may resonate with their own values.

Getting feedback from parents was critical to understanding their needs. Organisations also found that offering a meal, transport to the venue (or money for transport) and child care during the sessions helped increase retention rates. Other solutions to maintaining high rates of retention included incorporating 'catch-up' or home-visit sessions and regular contact with participants.

## Referrals

Given the harsh experiences of violence and abuse that many of the caregivers endure, it was found to be critical for organisations delivering parenting programmes to have functional and effective referral systems. That is because experiences of domestic violence or interpersonal abuse affect the well-being of parents, and if left unresolved this impacts on a caregiver's ability to parent positively or practise their new skills.

### Functional and effective referral systems are critical for primary violence prevention interventions

One of the insurmountable challenges faced by all the organisations was the difficulty they had navigating the child-protection system, with its long waiting lists and frequent lack of follow-up. The lack of a referral system for cases requiring child protection interventions poses both a programmatic and a moral and ethical challenge:

It poses a challenge both for the family and the facilitator, that the family problem has not yet been solved and what does the facilitator do, should they continue trying to help or continue offering this parental programme while the family's 'biggest problem' has not yet been solved?

Some of the organisations had overcome these problems by establishing a referral system made up of psychologists, psychiatrists, paediatricians, and medical doctors who volunteered their services to the organisation. But this cannot happen in areas where there is a severe shortage of specialist skills.

Taking lessons from the experiences of practitioners is vital to successful scale-up. It can prevent us from repeating mistakes and it helps to share successes and solutions.

### Staff support, supervision and coaching

A particular set of challenges exists for organisations in relation to the training and maintenance of the well-being of staff who deliver parenting programmes. High burnout rates, demotivation, shortage of skilled trainers and inattention to facilitator mental health all can lead to poor programme quality and high staff turnover rates. Good quality, regular clinical supervision was identified as essential to supporting staff, helping them problem-solve, and maintaining their motivation.

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The core values conveyed by the parenting programmes are warmth, support, empathy, and good communication. It is clear that those delivering the programme must experience these values in their working environments themselves if they are to deliver the programmes effectively and sustainably, especially if they have had traumatic experiences themselves. It is also important for implementers to internalise and practise the values of the programmes in their own lives.

### Why this is important for scale

While emphasis during the design and evaluation of a programme is placed on its *intervention components* (e.g. developing a group activity around understanding empathy, or developing tools to measure parent behaviour change), less attention tends to be paid to the *implementation components* (how the programme content is delivered to whom, by whom and under what conditions and with what incentives). These influence the design, evaluation, and delivery of the programme. For instance, if implementers don't know how to keep participants in a programme and if the number of people who complete the programme is low the programme is less cost-effective, and staff become demotivated.

Similarly, good recruitment plans and strategies, and the ability to be flexible and try different approaches (without affecting the core elements of the programme), are critical to ensure that a programme can actually be delivered. And if an effective referral system or network is not in place, many positive effects of the intervention may not last beyond the duration of the programme.

In short, we have to consider and address the real-world implementation challenges in the planning phase, and as the programme is delivered.



SA HAS MANY EXAMPLES  
OF EFFECTIVE SMALL-SCALE  
PROGRAMMES IN  
SPECIFIC CONTEXTS

It is also important for donors, policymakers and implementers to learn from the experience of delivering programmes, and budget for implementation components and intervention components. This is referred to as the 'iterative loop' reflected in Figure 3.

In short, one cannot simply address the implementation gap without bringing implementation realities to the table. We (implementers, designers, evaluators and donors) need to find ways to share information in a co-ordinated, sustained way to ensure that the implementation challenges are addressed and that we learn from them and adapt as necessary.

### **Multisectoral approach: the questions we need to ask ourselves**

It is only through effective communication, and good working relationships across sectors, that we stand a chance of addressing the implementation gap and effecting real change. In the next section we present a set of questions that we need to answer collectively if we are to take evidence-based violence prevention programmes to scale in South Africa. These were identified during a consultation with experts from government, NGOs and academia. They are categorised into four broad areas: governance, understanding implementation, responding to context and evidence required to support scale-up.

#### **Governance**

A strong and effective governance mechanism is critical to effective, relevant and sustainable programme implementation at scale. In South Africa many questions remain unanswered about 'who' would be responsible for 'holding' violence prevention programming. Policymakers, international NGOs, inter-governmental organisations, NGOs, donors and academics need to address the following critical questions about governance. These include:

- What kind of governance structure is required to ensure the accountability of implementers and policymakers? (e.g. is the South African National Aids Council (SANAC) a model for a violence prevention governance structure? Or, could the national crime and violence prevention centre (as proposed by the White Paper on Safety and Security) play this role?

- Where should this structure be located in order for it to be effective (e.g. should it be a parastatal or be located in the office of the president)?
- What inter-governmental and inter-sectoral partnerships are required to ensure a shared agenda, shared resources, shared information and a shared understanding of policy?
- How do we (and can we) create a structure or institution linked to, or within, government to act as a purveyor of programmes? What would such a structure look like? Could it:
  - Co-ordinate the evaluation of programmes that are already being implemented but have not been assessed?
  - Match communities and their needs to evidence-based programmes?
  - Oversee and support fidelity?
  - Co-ordinate training?

One cannot simply address the implementation gap without bringing implementation realities to the table

- Could such a structure be enabled to ensure that all government funded primary prevention and early intervention programmes are in line with the principles of non-violence, gender equality and are human rights based?
- How do we ensure that such a structure aligns and interacts with the Programme of Action Addressing Violence Against Women and Children (PoA: VAWC) and Improvement Plan – could it also help to align policy?
- How do we ensure that a governance mechanism also links effectively with local and provincial government?

Although these questions appear to assume that a new structure may be necessary, there is little consensus about this. Whatever structure is decided upon, the governance functions identified here are critical to the effective scale-up of programmes and interventions.

## Understanding violence prevention implementation

Although we have numerous examples of programmes that have been shown to be effective when delivered on a small scale in specific contexts, a number of key questions remain:

- How do we (as researchers, practitioners and funders) identify the core components of an intervention that form the mechanism of change?
- How can we measure quality and ensure that core elements are retained without losing quality, if a programme needs to be adapted?
- How can successful interventions, practices and processes be integrated into government supported systems? What will the impact be on those systems and on the intervention?
- What systems and structures, practices and processes are necessary for the successful delivery of an intervention, and can they be defined?
- How do different programme components interact to enhance or inhibit impact?

Programmes that are delivered by NGOs and government must be sensitive and responsive to the realities in which they are being implemented

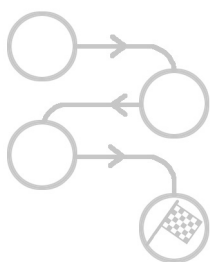
## Context

Programmes that are delivered by NGOs and government must be sensitive to the realities and contexts in which they are being implemented. Any violence prevention programmes that are taken to scale must meet the needs of beneficiaries and their communities, and the organisations or government officials who deliver them. In short, they must be appropriate and relevant to the context in which they are delivered. The following questions will need to be asked and answered:

- What are the main drivers of violence and prevalent forms of violence in the community?
- How will the programmes address these issues? How will we know if these issues have been addressed?
- What needs to accompany an intervention to sustain change?
- If violence is prevalent, what is the minimum basket of services required?
- How do we shift cultures and norms in contexts where they undermine violence prevention?
- What social mobilisation strategies will support scale-up?

## Evidence required to support scale-up

There is a pressing need to identify the mechanisms that will enable and support the scale-up of evidence-based programmes. This is relatively



SOUTH AFRICA STRUGGLES  
TO TRANSLATE POLICIES  
INTO PRACTICE



uncharted territory. Here are some of the questions we will need to answer:

- What data is needed to support scale-up and can we institutionalise its collection and sharing?
- How do we build capacity to collect and process data to inform scale-up?
- How do we effectively and sustainably monitor and evaluate interventions to ensure fidelity, and that mechanisms of change remain relevant to the changing needs and context?
- How do we define the roles and responsibilities of stakeholders in the inter-sectoral partnership as we move to scale up?
- What resources (financial, HR and technological) are available and required for scale-up?
- How do we realistically cost programmes?
- How do we audit existing resources?
- How do we prioritise communities for intervention?

The intricacies of these questions reflect several things. The first is that taking evidence-based violence prevention programmes to scale effectively and efficiently is a complex task with many challenges. It is unthinkable that we can achieve this if we, as government departments, NGOs, researchers, academics and donors, do not come together and share our resources, knowledge and experience. Without this collaborative approach, we run the risk of missing key actions or opportunities, with detrimental and costly consequences.

This first step has been to identify the key questions we need to answer and arrive at a shared definition of the problem. Now a framework for solutions must be developed that incorporates all major actors and influencers, such that they can contribute actively and equally. In the next section a methodology that may offer a way forward is discussed.

## Recommendations

In South Africa, experienced and credible researchers have gathered substantive evidence about the extent and nature of violence and its causes. There is a vibrant civil society that delivers violence prevention and response services and programmes to children,

caregivers and their families, but it does not meet the huge and growing need for these services yet. South Africa also boasts one of the most progressive and inclusive constitutions in the world with laws that are human rights focused.

Yet we are continuously haunted by the poor translation of policies into practice. As a Pathfinding country under the Global Partnership to End Violence Against Children we are committed to realising the Sustainable Development Goals 16.2, to 'end abuse, exploitation, trafficking and all forms of violence and torture against children'.<sup>37</sup> The time is ripe to establish an implementation hub to bring all stakeholders together to build a shared vision for preventing violence.

Taking evidence-based violence prevention programmes to scale is a complex task with many challenges

A concerted effort by government, researchers and implementers is necessary to build a communication bridge to facilitate the seamless flow of information, evidence, and knowledge. For instance, while researchers test the effectiveness of violence prevention programmes to determine whether a programme works, there needs to be a corresponding effort to assess which programmes are most cost-effective.

**Government** needs to make explicit the type of evidence departments need to inform their decisions about budgeting and resourcing.

**Researchers and development agencies** need to gather information to show how programmes deliver a return on investment.

**Civil society and community-based organisations** that deliver violence prevention programmes need to be enabled and supported to systematically document their implementation challenges and solutions, and share them with researchers and government so that they can be considered in the design and measurement of interventions.

**Researchers** who generate innovation and evidence must make their work accessible to those outside the academic community.

Through the work we have undertaken, we have learnt that as bridges for the flow of information are built, there is a concurrent need to ask challenging and evaluative questions and use the knowledge shared to inform timely actions. This will require the input of diverse perspectives from different stakeholders.

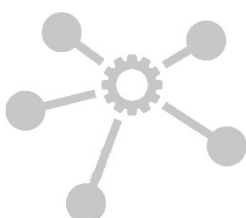
An Implementation Hub must develop and execute strategies to use the diversity of knowledge and skills and enable effective communication across sectors.

As bridges for the flow of information are built, there is a need to ask challenging and evaluative questions and use the knowledge shared to inform timely actions

Finally, it is essential that politicians, government departments, NGOs and researchers commit themselves to achieving the shared vision of preventing all children in South Africa from experiencing any form of violence, abuse or neglect. This will ensure a safe and prosperous future.

## Notes

- 1 National Planning Commission, National Development Plan 2030: Our future – make it work, The Presidency, Pretoria, 2012. C Gould, Violence Prevention: Critical to National Development, 2015. C Gould and C Hsiao, Building an inclusive economy: why preventing violence and supporting families is essential, 2017. A joint submission to National Treasury by the Institute for Security Studies (ISS) and Save the Children South Africa, Pretoria, ISS and Save the Children South Africa.
- 2 X Fang, DA Fry, G Ganz, T Casey and C Ward, The Social and Economic Burden of Violence Against Children in South Africa, Save the Children South Africa, 2016.
- 3 The Global Partnership to End Violence Against Children, Country Guidance, Global Partnership to End Violence Against Children, 2016.
- 4 S Mathews and C Gould, Preventing violence: from evidence to implementation. South African Child Gauge: Survive, thrive and transform, L Jamieson, L Berry and L Lori, Cape Town, Children's Institute, 2017.
- 5 L Cluver, F Meinck, Y Shenderovich, CL Ward, RH Romero, A Redfern, C Lombard, J Doubt, J Steinert, R Catanho, C Wittesaele, S de Stone, N Salah, P Mpimilashe, J Lachman, H Loening, F Gardner, D Blanc, M Nocuza and M Lechowicz, A parenting programme to prevent abuse of adolescents in South Africa: study protocol for a randomised controlled trial, *Trials*, 2016.
- 6 The Partnership includes Together for Girls, the United Nations Office on Drugs and Crime, USAID, the World Bank, and the World Health Organisation.
- 7 World Health Organisation, New strategies to end violence against children, 2016.
- 8 S Mathews, N Abrahams, R Jewkes et al. The epidemiology of child homicides in South Africa. *Bull World Health Organ* 2013; 91:562-8 doi:10.2471/BLT.12.117036, first published online 31 May 2013. South African Police Services, *Crime Statistics: April 2013-March 2014*, Pretoria, SAPS, 2014. L Artz, P Burton, CL Ward et al, Optimus Study South Africa: Technical Report, Sexual victimisation of children in South Africa; Final report of the Optimus Foundation Study: South Africa, Zurich: UBS Optimus Foundation, 2016.
- 9 S Mathews, R Govender, G Lamb, F Boonzaier, A Dawes, C Ward, S Duma, L Baerecke, G Warton, L Artz, T Meer, and R Smith, Towards a more comprehensive understanding of the direct and indirect determinants of violence against women and children in South Africa with a view to enhancing violence prevention, Safety and Violence Initiative: University of Cape Town, 2016.
- 10 <http://www.whatworks.co.za/>.
- 11 Department of Planning Monitoring and Evaluation and the Department of Social Development, Diagnostic Review of the State Response to Violence against Women and Children, 2016, available at : <http://genderjustice.org.za/wp-content/uploads/2017/12/Report-Diagnostic-Review-State-Response-VAWC.pdf>. C Ward, A van der Merwe, A Dawes, Ed., Youth Violence: Sources and



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KNOWLEDGE AND SKILLS  
ACROSS SECTORS

- solutions in South Africa, 2012, Cape Town: University of Cape Town Press. C Gould, 2015, Beaten bad: The life stories of violent offenders, ISS, 2015.
- 12 D Fixsen, S Naoom, K Blase, R Friedman and F Wallace, Implementation Research: A synthesis of the Literature, National Implementation Research Network: University of South Florida, Tampa, Florida, 2005. vi.
  - 13 N Padian, C Holmes, S McCoy, R Lyerla, P Bouey and E Goosby, Implementation Science for the US President's Emergency Plan for AIDS Relief (PEPFAR), *Journal of Acquired Immune Deficiency Syndromes*, vol. 56, no. 3, pp. 99-203, 2011. D Peters, T Adam, O Alonge, I Agyepong and N Tran, Implementation research: what it is and how to do it, *British Medical Journal*, vol. 347, p. f6753, 2013.
  - 14 D Peters, T Adam, O Alonge, I Agyepong and N Tran, Implementation research: what it is and how to do it, *British Medical Journal*, vol. 347, p. f6753, 2013.
  - 15 Centre for the Study of Violence and Reconciliation, Streets of Pain, Streets of Sorrow – The circumstances of the occurrence of murder in six areas with high murder rates, 2008.
  - 16 L Green and R Glasgow, Evaluating the relevance, generalization, and applicability of research: issues in external validation and translation methodology, *Evaluations and the Health Profession*, vol. 29, p. 126, 2006.
  - 17 The Optimus Study on Child Abuse, Violence and Neglect in South Africa, Centre for Justice and Crime Prevention and the University of Cape Town, 2015.
  - 18 P Burton, L Leoschut, School Violence in South Africa: Results of the 2012 National School Violence Study, Centre for Justice and Crime Prevention, 2013.
  - 19 X Fang, DA Fry, G Ganz, T Casey and C Ward, The social and economic burden of violence against children in South Africa, Save the Children South Africa, 2016.
  - 20 K Ratele, M Smith, A van Niekerk, M Seedat, Is it Race, Age or Sex? Masculinity in Male Homicide Victimisation in Urban South Africa, 2010; National and international perspectives on crime and policing: Towards a coherent strategy for crime reduction in South Africa beyond 2010, ISS.
  - 21 S Mathews, N Abrahams, R Jewkes, LJ Martin, C Lombard and L Vetten, Intimate femicide-suicide in South Africa: A cross-sectional study, *Bulletin of the World Health Organisation*, 86, 497-576, 2008, [www.who.int/bulletin/volumes/86/7/07-043786/en/](http://www.who.int/bulletin/volumes/86/7/07-043786/en/).
  - 22 S Mathews, N Abrahams, R Jewkes, LJ Martin and C Lombard, The epidemiology of child homicides in South Africa, *Bulletin of the World Health Organisation*; 91, 562-568, 2013, [www.who.int/bulletin/volumes/91/8/12-117036/en/](http://www.who.int/bulletin/volumes/91/8/12-117036/en/).
  - 23 M Machisa, R Jewkes, C Lowe Morna, K Rama, THE WAR AT HOME: Gender Based Violence Indicators Project, Gauteng Research Report, Gender Links and South African Medical Research Council, 2011.
  - 24 JD Gass, DJ Stein, DR Williams and S Seedat, Intimate partner violence, health behaviours, and chronic physical illness among South African Women, *South African Medical Journal*, 100, 582-585, 2010.
  - 25 Centre for the Study of Violence and Reconciliation, Streets of Pain, Streets of Sorrow – The circumstances of the occurrence of murder in six areas with high murder rates, 2008. HSRC, Case studies of perpetrators of violent crime: report by the Human Sciences Research Council on behalf of the Centre for the Study of Violence and Reconciliation, Centre for the Study of Violence and Reconciliation, 2008.
  - 26 S Mathews, R Jewkes and N Abrahams, 'I had a Hard life': Exploring Childhood Adversity in Shaping of Masculinities among Men Who Killed an Intimate Partner in South Africa, *British Journal of Criminology* 51(6): 960-977, 2011. S Mathews, R Jewkes and N Abrahams, 'So Now I'm the Man': Intimate Partner Femicide and Its Interconnections With Expressions of Masculinities in South Africa, *British Journal of Criminology* 55(1): 107-124, 2014.
  - 27 C Gould, Beaten bad: The life stories of violent offenders, ISS, 2015.
  - 28 A Kleijn, Men raping babies. Why? *The Thinker*, Vol. 54: p. 26-29, August 2013.
  - 29 S Mathews, R Govender, G Lamb, F Boonzaier, A Dawes, C Ward, S Duma, L Baerecke, G Warton, L Artz, T Meer, L Jamieson, R Smith and S Röhrs, Towards a more comprehensive understanding of the direct and indirect determinants of violence against women and children in South Africa with a view to enhancing violence prevention, Safety and Violence Initiative: University of Cape Town, 2016.
  - 30 R Jewkes, Y Sikweyiya, R Morrell, K Dunkle, Understanding men's health and use of violence: interface of rape and HIV in South Africa, Medical Research Council, 2009.
  - 31 A Gevers, Skhokho Supporting Success project: Interview with study principal investigator, Medical Research Council, 2014.
  - 32 PJ Cooper, M Tomlinson, L Swartz, M Landman, C Molteno, A Stein, K McPherson, L Murray, Improving quality of mother-infant relationship and infant attachment in socioeconomically deprived community in South Africa: randomised controlled trial, *British Medical Journal*, 338: b974, 2009.
  - 33 [www.who.int/violence\\_injury\\_prevention/violence/child/plh/en/](http://www.who.int/violence_injury_prevention/violence/child/plh/en/).
  - 34 Rachel Jewkes, Andrew Gibbs, Nwabisa Jama-Shai, Samantha Willan, Alison Misselhorn, Mildred Mushinga, Laura Washington, Nompumelelo Mbatha and Yandisa Skiweyiya, "Stepping Stones and Creating Futures intervention: shortened interrupted time series evaluation of a behavioural and structural health promotion and violence prevention intervention for young people in informal settlements in Durban, South Africa." *British Medical Journal Public Health*, 14.1 (2014): 1325.
  - 35 [www.genderjustice.org.za/childrens-rights-positive-parenting-portfolio/mencare-plus/](http://www.genderjustice.org.za/childrens-rights-positive-parenting-portfolio/mencare-plus/).
  - 36 The focus group interview was transcribed verbatim and coded using NVivo to examine and record patterns within the discussion into common themes using thematic analysis. This study received ethical approval from the Human Research Ethics Committee (Non-Medical) at the University of the Witwatersrand.
  - 37 See <http://indicators.report/targets/16-2/>, accessed 3 March 2018.

### About this policy brief

This policy brief flows from and contributes to discussions held at the Dialogue Forum for Evidence-Based Programmes to Prevent Violence Against Women and Children. The forum, established in 2015, brings together academics, non-governmental organisations and international non-governmental organisations that are evaluating violence prevention programmes and government officials from the Departments of Basic Education, Women, Social Development, Health, Justice, Performance Monitoring and Evaluation and the National Treasury. The forum seeks to build strong, healthy inter-sectoral relationships, catalyse action and support processes that will lead to the sustainable implementation of evidence-based programmes to prevent violence in South Africa. The forum is convened by the Institute for Security Studies and is guided by a driver group that includes representatives from Save the Children South Africa, the Medical Research Council, the Department of Health, the Department of Social Development, GIZ and the United Nations Children's Fund (UNICEF).

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