POLICY BRIEF

How to prevent violence in South Africa

Violence Prevention Forum

Violence in South Africa has an enormous cost on individuals, health and social protection systems, and the economy. There is growing evidence about the substantial return on investment that violence prevention can deliver, and about what works to prevent violence. Now is the time to invest in evidence-based interventions to prevent all forms of violence. This policy brief summarises lessons learnt from research, policy and practice over the past three years.

Key findings

▶ Violence costs the economy, companies, and health and social systems. There is evidence for a positive return on investments when violence is prevented. This means it is cheaper to fund effective violence prevention than a criminal justice system, which reacts to violent crime.

▶ There is a growing body of research and practice-based knowledge of what works to prevent violence in South Africa.

▶ There is a strong association between violence and inequality, unemployment, food insecurity and poverty.

▶ Parenting and community-based interventions show significant effects on preventing or reducing intimate partner violence and violence against children.

With regard to violence against women:

▶ The chances of getting justice for a murdered woman are low and decreasing. Police fail to make arrests despite an intimate partner or family member being involved in more than 70% of cases.

▶ Experience of trauma and poor mental health increase the chances of women students in higher education institutions being targeted for sexual violence.

▶ Circumstances that lead male students to perpetrate violence include abuse during childhood, and cultural norms equating masculinity with dominance over women.

▶ Burnout and exhaustion in frontline workers significantly hamper violence prevention efforts.

Recommendations

▶ Evidence of what works in violence prevention and data showing the return on investment in evidence-based interventions must be shared with government and NGOs, with guidance on how to implement and scale up proven programmes.

▶ Funding for violence prevention should include costs of support for frontline staff from government and NGOs.

▶ While it's necessary to coordinate efforts to prevent and respond to violence, new structures are not the solution. Government and NGOs should evaluate existing structures before investing in strengthening their implementation capacity. The government must avoid creating structures that merely add to the already heavy meeting loads of partners within and outside of the state.

▶ Designers and funders of interventions must take account of links between violence and inequality,

unemployment, food insecurity and poverty. Addressing individual factors that increase the risk of violence isn't sufficient to achieve sustained decreases.

▶ It's impossible for a single actor or intervention to do everything. Better coordination between stakeholders and partners at local level is likely to lead to better outcomes.

▶ Higher education institutions that have not yet adopted policies on preventing and responding to gender-based violence should do so. These policies should clarify the goals, mandate and scope of services, and focus on delivering services, co-creating solutions and leveraging expertise and experiences.

▶ Higher education institutions should consider implementing evidence-based interventions, such as Ntombi Vimbela! which has helped prevent violence experienced by female students.

Introduction

Preventing violence is more urgent than ever in an environment of fiscal constraints, slow economic growth, and the threat to the global economy due to a trade war between the US and the rest of the world.

Violence has an enormous cost on individuals, the economy, businesses, and health and social protection systems. There is growing evidence for the return on investment in violence prevention, and a growing body of knowledge about what works to prevent violence.

This is the time to invest in evidence-informed and evidence-based interventions to prevent all forms of violence.

In November 2024, researchers, policymakers, NGO practitioners, development partners and donors gathered as the Violence Prevention Forum (VPF) to take stock of what we know about how to prevent and respond to violence, and to grapple with the obstacles to effective prevention.

The 20th VPF, hosted by the South African Medical Research Council (SAMRC) in Pretoria, provided an opportunity for researchers, policymakers and practitioners to share insights from their studies on interpersonal and structural violence, and how to prevent it.[1]

There was a strong focus on gender-based violence and violence against children due to the volume of new studies on these types of violence.

This policy brief offers a synopsis of the key findings about the problem of violence, what drives it, and the issues South Africa needs to grapple with to break cycles of violence.
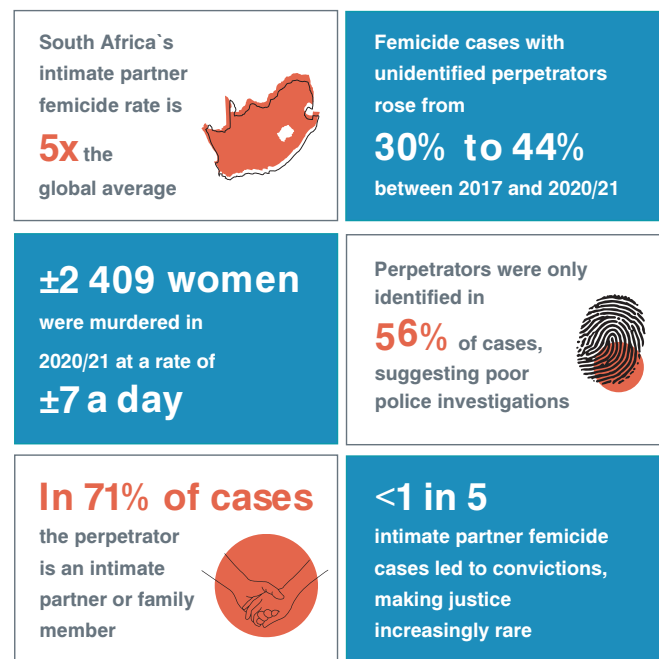
What we know about violence against women

The SAMRC has found that an estimated 2 409 women were murdered in 2020/21. This is a rate of almost seven women murdered every day. In 71% of these cases, the perpetrator was an intimate partner or family member. Guns were the most likely weapons used to murder women.[2]

Despite the prevalence of femicide by family members, there was a reduction in the identification of perpetrators by the police, suggesting a deterioration in police investigation of these cases.

The SAMRC study showed that in 2017, 30% of perpetrators of femicide were not identified. This increased to 44% in 2020/21.[3] Fewer than one in five intimate partner femicides ended in a conviction. The chances of convictions of perpetrators of femicide and justice for the families of murdered women are thus low, and decreasing.

Chart 1: Femicide in South Africa at a glance

South Africa`s intimate partner femicide rate is 5x the global average

Femicide cases with unidentified perpetrators rose from 30% to 44% between 2017 and 2020/21

±2 409 women were murdered in 2020/21 at a rate of ±7 a day

Perpetrators were only identified in 56% of cases, suggesting poor police investigations

In 71% of cases the perpetrator is an intimate partner or family member

<1 in 5 intimate partner femicide cases led to convictions, making justice increasingly rare

Source: South African Medical Research Council

Factors that drive violence

South Africa is the most unequal country in the world.[4] In countries where inequalities are stark, higher rates of violence are observed in communities and homes.[5] There is a strong association between violence and poverty. In areas where incomes are low and unemployment high, levels of violence are also high.[6]

According to Statistics South Africa's General Household Survey, in 2021, 2.1 million (11.6%) South African households reported experiencing hunger.[7] These households were home to over half a million (683 221) children aged five years or younger.[8] Severe acute malnutrition has increased in five provinces since 2020/21. Food insecurity and hunger are both drivers of violence that have a significant impact on the health, well-being and educational outcomes of those affected.[9]

Research conducted by the SAMRC, with the support of the Department of Higher Education and Training (DHET), revealed the high rate of violence experienced by women at universities and technical and vocational education and training (TVET) institutions. A SAMRC survey of 1 293 female students in eight TVET and university campuses found that 20% had experienced sexual violence in the past year, with 17% reporting intimate partner violence and 7.5% non-partner rape.[10]

The study confirmed the link between sexual and intimate partner violence and food insecurity, which is one of many risk factors for violence against women.[11]

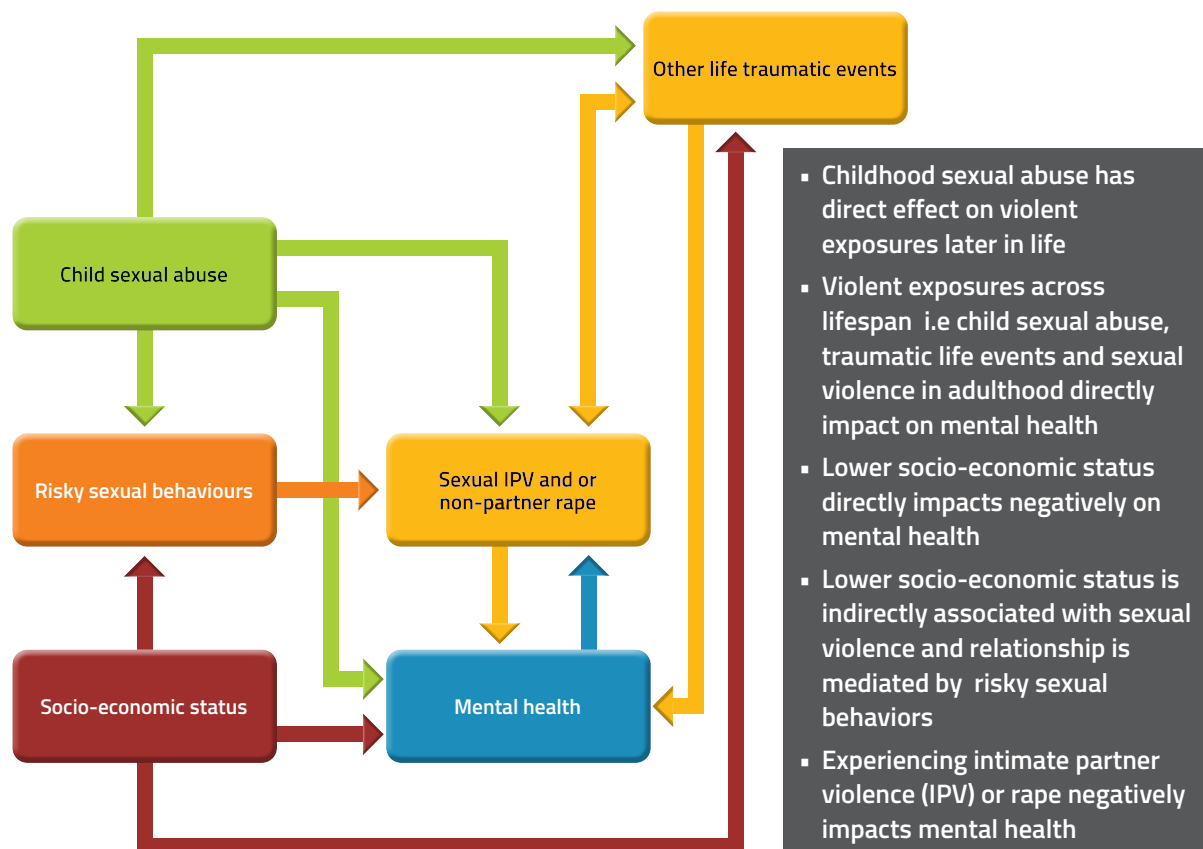Factors that increase women's risk of violence include:

- Having experienced sexual abuse as children or before coming to higher education. This was associated with depression, anxiety and post-traumatic stress. Evidence shows that trauma and poor mental health increase the chances of women being targeted by perpetrators, undermining healthy coping strategies by reducing the ability to sense danger, resulting in earlier sexual activity, more sexual risk-taking behaviour in adulthood, and increased use of alcohol and drugs.[12] Female students were targeted in social settings where alcohol was consumed and were violated when incapacitated.[13]

- Transitioning into higher education exacerbated female students' feelings of loneliness and isolation. Those who began relationships during this period were more likely to be in abusive relationships where they were manipulated or controlled.

- Many female victims conformed to traditional gender norms, and believed that men should have more power in a relationship. They prioritised their male relationships over their own well-being. Their partners were highly controlling and emotionally abusive, often escalating into physical and sexual violence. Some female students stayed in abusive relationships because they were financially dependent on partners or felt pressured to engage in sexual activities for financial gain.[14]

- Women who experienced financial difficulties and food insecurity were more likely to have mental health challenges and engage in transactional sex. They were also more likely to have had multiple partners and have engaged in sexual risk-taking, which increased the risk of experiencing violence.[15]

- Few of the women who experienced violence had a supportive social network or peer group. They struggled without social support and found it difficult to seek help or report instances of violence. Many lacked knowledge about and had limited access to mental health services.[16]

SAMRC research on men's violence has shown that where men lack the perceived status of jobs, money and cars, they appropriate hypermasculine behaviour as a form of resistance.[17]

FOOD INSECURITY AND HUNGER ARE AMONG THE DRIVERS OF VIOLENCE IN SA

Chart 2: Pathways to female students' increased vulnerability to sexual violence experience

The diagram contains the following boxes and flows:

- **Other life traumatic events**
- **Child sexual abuse**
- **Risky sexual behaviours**
- **Sexual IPV and or non-partner rape**
- **Socio-economic status**
- **Mental health**

Key points (right panel):

- Childhood sexual abuse has direct effect on violent exposures later in life
- Violent exposures across lifespan i.e child sexual abuse, traumatic life events and sexual violence in adulthood directly impact on mental health
- Lower socio-economic status directly impacts negatively on mental health
- Lower socio-economic status is indirectly associated with sexual violence and relationship is mediated by risky sexual behaviors
- Experiencing intimate partner violence (IPV) or rape negatively impacts mental health

Source: South African Medical Research Council

The SAMRC study identified factors that led male students to perpetrate violence against female students and peers. These included:

- Male students who experienced violence or abuse during childhood were at a higher risk of becoming perpetrators.

- Acceptance of cultural and societal norms that equate masculinity with dominance and control over women decrease the barriers to the use of violence. Men used violence and displayed hostile attitudes towards women to assert their masculinity, not least because they felt pressured to conform to normative ideals and to be accepted and approved of by peer groups.

- Based on these beliefs, some male students developed a sense of entitlement towards their girlfriends and viewed them as objects for their pleasure rather than as equals. For them, this justified coercion of and violence against female students.

- Many abusive male students lacked an understanding of consent or healthy relationships and had low empathy. This prevented them from seeing or considering the impact of their actions.

- Male students targeted female students in social settings where alcohol and drugs were consumed. This impaired the judgement of both men and women, reduced inhibitions, and lowered the chances that victims would recall or report the incident.

- Some male students who experienced economic hardship felt frustrated and powerless. This manifested as aggression towards women, particularly when women were perceived as having greater social or economic advantages.[18]

Having looked at the data on violence against women, and the factors driving violence, the VPF meeting was presented with research evidence on what works to prevent violence.

What works to prevent violence?

A systematic review of interventions that prevent or respond effectively to intimate partner violence, and violence against children, was published in the *Lancet* in 2024.[19] The review found 19 prevention interventions that had been evaluated. Eighteen of these were in low- and middle-income countries, including South Africa.

Sixteen parenting and community-based interventions showed significant effects on preventing or reducing both intimate partner violence and violence against children. Two school-based interventions showed mixed results. Both effectively reduced violence against children, but only one also reduced intimate partner violence.

Key findings

Prevention interventions build behaviours, skills, practices, ideas, attitudes and norms that are incompatible with violence. Instead of focusing on telling people what not to do, they guide people to critically reflect and practise what to do.

Successful interventions are usually interactive group-based sessions with trained facilitators who lead participants through activities, including critical reflection, discussion and dialogue, role play and other practical exercises.

These interventions generally take place over 12 to 24 sessions.

The interventions addressed:

- Communication and conflict-resolution skills
- Building non-violent behaviour management
- Strengthening emotional expression and regulation techniques
- Promoting gender-equitable relationships, including shared involvement in caregiving
- Promoting gender-equitable norms and practices
- Promoting positive relationship models based on respect and trust
- Improving relationship quality and family functioning and cohesion
- Recognising the harmful effects of intimate partner violence and harsh discipline on children and the family.

The evidence suggests that parenting and community-based programmes have the best success in preventing both intimate partner violence and violence against children. Delivering only individual components of effective interventions, and once-off workshops, did not work.

The systematic review affirmed the value of evidence-informed parenting programmes as a contributor to the prevention of violence in South Africa.

Family violence prevention programmes can change the lives of families by reducing violence and improving relationships within the home. Investments in this type of programming can yield multiple positive outcomes.

Research conducted by the SAMRC on an intervention to prevent and reduce intimate partner and sexual violence against women in higher education institutions also shows promising results.

The intervention, called Ntombi Vimbela! (NV!), is designed to reduce the risk of sexual violence by raising awareness about sexual rights, promoting gender equality, and equipping students with skills to navigate high-risk situations. It aims to empower participants, enhance resilience and improve access to mental health and legal services.

The intervention was piloted in 2019 before being implemented across multiple campuses with first-year female students aged 18–30 years.[20] The pilot study yielded promising results, including:

- Reduced sexual violence
- Enhanced self-efficacy: women reported increased self-confidence and ability to protect themselves
- Positive attitude shifts: women reported shifts in attitudes about rape myths and beliefs, and gender inequality
- Improved communication: women who attended workshops reported having acquired communications skills which they use in their relationships
- Improved mental health: some women reported lower levels of depression and anxiety
- Healthier relationships: most perceived their intimate relationships to be healthier and more equitable

What stands in the way of violence prevention?

Burned-out workforce

A 2019 VPF policy brief noted that a significant factor hampering efforts to prevent violence[21] was burnout and exhaustion in frontline workers providing services on behalf of the state and through NGOs.

In 2024 the South African Parenting Programme Implementers Network (SAPPIN) undertook research to assess staff well-being in NGOs in its network. The study sought to understand how best to enhance the well-being of workers by recognising their levels of burnout and what helps to keep them well.

The study included a survey of 209 NGO staff from 17 organisations in Gauteng, Mpumalanga, KwaZulu-Natal, Eastern Cape, Western Cape, North West province and Limpopo. Thirty-three workers were interviewed, seven participated in a focus group discussion and 28 individuals submitted photos of their lives and work.

A significant factor hampering efforts to prevent violence was burnout and exhaustion in frontline workers who provide services on behalf of the state and through NGOs

The study found that while the average scores for burnout, secondary trauma and moral distress were moderate, the average compassion satisfaction score was high. Compassion satisfaction is the positive feeling of fulfilment and pleasure that comes from helping others and feeling effective and committed to one's work.[22]

The study also found that higher levels of helplessness and burnout are associated with being younger and working in townships. Implementers who had experienced more adverse childhood experiences also experienced more secondary trauma, felt more helpless, had low perceived efficacy, practised fewer self-care behaviours and felt that they had less access to crisis support.

Things that protected the well-being of the participants included boundary setting, opportunities to make a positive impact, and social and family connections. Examples of support offered by NGOs included reflective supervision, peer support groups and flexible work hours.

Addressing burnout and the well-being of NGO workers will be critical for as long as NGOs provide a substantial proportion of prevention services to families. NGO services are compromised when implementers are psychologically stressed.

A SYSTEMATIC REVIEW SHOWS PARENTING PROGRAMMES HELP PREVENT VIOLENCE IN SA

The following recommendations were proposed:

- Capacity-building for reflective supervision
- Better communication between managers and staff
- Creating supportive work environments, enabling work–life balance, addressing prejudice and conflict, and facilitating difficult conversations
- Introducing wellness initiatives, including wellness events and space for somatic and trauma-informed practices
- Revisiting organisational values and policies with staff

SAPPIN is supporting its member organisations to implement these recommendations. It will develop a reflective supervision model tailored to its members, integrating trauma-informed and somatic approaches. Training opportunities will be offered to member organisations.

These collective actions aim to improve the well-being and resilience of staff working in the parenting and violence prevention sectors, ensuring they are better supported to deliver quality services to families across South Africa.

Lack of capacity

South Africa's National Integrated Early Childhood Development (ECD) Policy recognises that multiple interventions are necessary to nurture and enable children to thrive and reach their full potential, including health care, nutritional care, social assistance, educational stimulation and parenting support.[23]

ECD is pivotal in increasing equality and disrupting generational cycles of poverty. If we get ECD right, we set the foundation for building societies, communities and homes that are caring and safe. Drawing on research on the challenges of implementing the policy, Dr Penelope Parenzee from the Nelson Mandela School of Public Governance at the University of Cape Town provoked critical reflection on the following issues:[24]

- **The tendency to prioritise form over function:** The breadth of programmes to drive ECD delivery is complex, especially as services are matched to children's developmental milestones. As a means of solving complex problems, our practice preference is to establish multiple structures, which in theory provide a rational problem-solving roadmap. But in

reality they present a convoluted bureaucracy that does not automatically enable ease of access to services. Instead, should we not first clarify with local communities what mechanisms to access services would be more suitable and effective, and then establish a structure that can best serve as a vehicle to ensure that these needs are met?

- **Lack of capacity to coordinate:** Coordination is often assumed to be the convening of meetings, for which only technical competence is seen as essential. However, when it comes to the capacity to implement policies, additional political, relational and analytical competences are required. There is growing awareness among policy stakeholders that capacity to implement policy is compromised when analytical, political and technical skills are minimal or absent. And an over-reliance on technical skills weakens the implementation capacity of the state. Therefore a key action should be to identify the exact gaps in policy implementation capacity. Additionally, an understanding of the capacity to coordinate can be obtained when learning from pockets of effectiveness and applying this to ensure that people with the right skills and abilities are appointed.

- **Can we unlock alternative pathways so we can realise the potential to reduce social and economic inequality?** We were confronted with the need to be bold in order to 'dislodge our stuckness' in implementing the ECD policy. We were challenged to grapple with the following questions:

  – Is it possible to reconceptualise coordination of policy implementation so it is rooted in a bottom-up approach with top-down feedback loops?

  – Is there something in the idea of fostering relationships through dynamic bottom-up and top-down interaction?

  – The VPF itself is a model of processes that facilitate relationship building. It is possible to replicate this at a local level. How can this be done at scale?

What can and should be done?

Improved coordination at local level

The Violence Prevention Unit (VPU) in the Department of Health and Wellness in the Western Cape province

is pioneering local-level interventions to improve coordination between departments to build safety in high-crime communities. It has learned lessons about effective coordination, including connecting, aligning and making/moving the system:

- **Relationship-building is critical to building trust, but it takes time**. The soft skills that enable relationship-building, and that can lead to hard results, are undervalued.

- **New collaborations must add value to existing coordination structures.** Many government or NGO coordination structures are already in place. A challenge to be overcome is how best to use existing structures to promote and improve violence prevention.

- **Negotiate a 'power with' as opposed to a 'power over' approach.** In some areas, other departments established similar coordination structures. This was about power, turf and influence. The VPU learned that navigating power dynamics is part of its work.

- **Demonstrate the benefits of working together and leveraging one another's strengths.** The VPU learned that having a clear and specific purpose for meetings helps to build momentum and makes it easier to get stakeholders on board.

- **Choosing the right people is key to achieving desired outcomes.** Asking heads of department to nominate officials to participate in local coordination platforms did not always result in the right match of skills and interest to achieve coordination. Working with local champions was more effective.

- **Area-based work was only successful if it took both a bottom-up and a top-down approach.** We need policy direction and strong empathetic leadership that can hear diverse opinions and needs, and then be decisive. Communities need to be able to identify and articulate their needs in a way that leaders in government can hear. Only then is collaboration possible. Holding both requires a strong strategic vision, empathetic leadership and skilled facilitation and convening. This requires an openness to doing things differently at all levels of seniority, which is difficult in government.

- **Showing quick wins builds momentum and strengthens relationships**. It also provides a springboard from which to tackle more complex and long-term challenges.

There are a number of challenges faced by efforts to coordinate responses in high-crime areas, including chronic under-resourcing. Coordinating the use of state and community assets requires trust and takes time, and there is a need to match the scale of resource allocation to the scale of the problem.

Participating in collaborations makes additional work. Most people are overworked and will only participate if it adds value to their core work.

Achieving results requires an ability to be experiential and adaptive. There is a need for an approach that is flexible enough to respond to each local reality, while being coherent and solid enough to address the enormous needs and expectations of communities.

Generation, use and sharing of data

Reliable and accessible data, and the ability to use it to inform responses, are key to reducing violence. Dr Harsha Dayal from the Department of Planning, Monitoring and Evaluation (DPME) argued that making data available and encouraging its use by government, NGOs and researchers is a key role of the End GBVF Collective that gives effect to the National Strategic Plan on Gender-based Violence and Femicide (NSP on GBVF).

Key datasets include:

- Empirical: quantitative and qualitative data about the prevalence of violence

- Administrative and operational data from government and NGOs that monitor the implementation of programmes

- Spatial data showing population, services and structures

- Social media (big data): a currently untapped data source

A priority for the state should be improving access to data, updating it regularly, and strengthening the ability of NGOs and policymakers to use it to inform prevention and response interventions.

Conclusion

The VPF has, since 2015, provided a platform for knowledge and evidence sharing between and within sectors. The ultimate goal of the forum is to ensure that South Africa is able to use the best knowledge and evidence to prevent violence at scale. This policy brief provides the basis for action: we know the nature and scale of the problem of interpersonal and structural violence; we have evidence for what can work, and guidance on what is needed for us to use this evidence and knowledge more effectively. It requires the resources, commitment and participation of a range of actors, from government and business to communities, NGOs, individuals, development organisations, researchers and donors working in concert, with good leadership.

Notes

1 The organisations and individuals presenting to the forum included: Assistant Prof. Yandisa Sikweyiya, Assistant Prof. Nwabisa Shai, Assistant Prof. Mercilene Machisa and Dr Pinky Mahlangu, South African Medical Research Council (SAMRC); Dr Penny Parenzee, Nelson Mandela School of Public Governance, University of Cape Town (UCT); Dr Jill Ryan, University of Stellenbosch; Dr Harsha Dayal, Department of Planning, Monitoring and Evaluation (DPME); Wilmi Dippenaar, South African Parenting Programme Implementers Network (SAPPIN); Gwen Dereymaeker, Violence Prevention Unit (VPU) of the Western Cape Department of Health and Wellness; Jeff Rudin, Alternative Information Development Centre (AIDC); Kate Lefko-Everett, Institute for Justice and Reconciliation (IJR); Andisiwe Makwecana, Institute for Security Studies (ISS); Sinelizwi Ncaluka, MOSAIC; Thamsanqa Mzaku, Phaphama Initiatives; Dr Anik Gevers, Independent Consultant.

2 N Abrahams, S Mhlongo, B Dekel, E Chirwa, A Ketelo, C Lombard, S Mathews, G Labuschagne, LJ Martin, T Manganyi, T Gounden, L Ramsoomar, N Jama-Shai, R Matzopoulos, M Prinsloo and R Jewkes (2024). *Research brief: 20 years of femicide research in South Africa*. Cape Town: South African Medical Research Council. https://www.samrc.ac.za/sites/default/files/attachments/2024-10/FemicideBrief2024_0.pdf

3 Ibid.

4 Victor Sulla, Precious Zikhali and Pablo Facundo Cuevas (2022). *Inequality in Southern Africa: An assessment of the Southern African Customs Union (English).* Washington, DC: World Bank Group. http://documents.worldbank.org/curated/en/099125303072236903

5 G Harris and C Vermaak (2015). Economic inequality as a source of interpersonal violence: Evidence from sub-Saharan Africa and South Africa. *South African Journal of Economic Management Science* 18(1). G</author><author>Vermaak, C</author></authors></contributors><titles><title>Economic inequality as a source of interpersonal violence: evidence from sub-Saharan Africa and South Africa</title><secondary-title>South African Journal of Economic Management Science</secondary-title></titles><periodical><full-title>South African Journal of Economic Management Science</full-title></periodical><volume>8</volume><number>1</number><dates><year>2015</year></dates><urls></urls><electronic-resource-num>https://doi.org/10.17159/2222-3436/2015/v18n1a4</electronic-resource-num></record></Cite></EndNote> https://doi.org/10.17159/2222-3436/2015/v18n1a4

6 Y Sikweyiya and A Gibbs (2022). Sexual aggression in a global perspective: Theory and intervention efficacy. In Lindsay M Orchowski and Alan D Berkowitz (eds). *Engaging boys and men in sexual assault prevention: Theory, research, and practice* (pp. 365–378). Cambridge, MA: Academic Press.

7 Statistics South Africa (2021). General Household Survey. Statistical Release (P0318). Pretoria: Statistics South Africa. https://www.statssa.gov.za/publications/P0318/P03182021.pdf

8 Statistics South Africa (2023). Assessing food inadequacy and hunger in South Africa in 2021 using the General Household Survey (GHS)/ Statistics South Africa. Report no. 03-00-20. https://www.statssa.gov.za/publications/03-00-20/03-00-202021.pdf

9 R Lindberg, H McKenzie, B Haines and FH McKay (2022). An investigation of structural violence in the lived experience of food insecurity. *Critical Public Health* 33(2), 185–196. https://doi.org/10.1080/09581596.2021.2019680

10 MT Machisa, ED Chirwa, P Mahlangu, Y Sikweyiya, N Nunze, E Dartnall, M Pillay and R Jewkes (2021). Factors associated with female students' past year experience of sexual violence in South African public higher education settings: A cross-sectional study. *PLOS One* 16(12), p.e0260886.

11 Ibid.

12 MT Machisa, ED Chirwa, P Mahlangu, Y Sikweyiya, N Nunze, E Dartnall, M Pillay and R Jewkes (2022). Suicidal thoughts, depression, post-traumatic stress, and harmful alcohol use associated with intimate partner violence and rape exposures among female students in South Africa. International Journal of Environmental Research and Public Health 19(3), 7913. https://doi.org/10.3390/ijerph19137913

13 MT Machisa, ED Chirwa, P Mahlangu, Y Sikweyiya, N Nunze, E Dartnall, M Pillay and R Jewkes (2021). Factors associated with female students' past year experience of sexual violence in South African public higher education settings: A cross-sectional study. *PLOS One* 16(12), p.e0260886.

14 N Nunze, M Machisa, P Mahlangu, Y Sikweyiya, M Pillay, E Chirwa, … R Jewkes (2019). Developing a sexual gender-based violence intervention targeting female students in South African tertiary institutions: Mapping the process. Paper presented at the Sexual Violence Research Initiative Forum, Cape Town.

15 MT Machisa, ED Chirwa, P Mahlangu, Y Sikweyiya, N Nunze, E Dartnall, M Pillay and R Jewkes (2021). Factors associated with female students' past year experience of sexual violence in South African public higher education settings: A cross-sectional study. *PLOS One* 16(12), p.e0260886.

16 N Nunze, M Machisa, P Mahlangu, Y Sikweyiya, M Pillay, E Chirwa, … R Jewkes (2019). Developing a sexual gender-based violence intervention targeting female students in South African tertiary institutions: Mapping the process. Paper presented at the Sexual Violence Research Initiative Forum, Cape Town.

17   Hypermasculinity is a maladaptive form of masculinity in which attributes such as displays of invulnerability, hardness and bravado are exaggerated. Gregory Herek describes that among a subgroup of men who express hypermasculinity, violence, sexual violence and control of women are often central to their identity. GM Herek (1986). On heterosexual masculinity: Some psychical consequences of the social construction of gender and sexuality. *American Behavioral Scientist* 29(5), 563–577.

Rachel Jewkes and Robert Morrell note that the subgroup of men who ascribe to hypermasculinity are often shaped by experiences of poverty, trauma and violence in their own lives, substance use, poor mental health, and acceptance of gender inequitable norms. They often use violence extensively against women, including in intimate relationships, and non-partner rape. R Jewkes and R Morrell (2018). Hegemonic masculinity, violence, and gender equality: Using latent class analysis to investigate the origins and correlates of differences between men. *Men and Masculinities* 21(4), 547–571.

A Gibbs, N Abdelatif, L Washington, E Chirwa, S Willan, N Shai, Y Sikweyiya and R Jewkes (2020). Differential impact on men in an IPV prevention intervention: A post hoc analysis using latent class analysis of the Stepping Stones and Creating Futures intervention in South Africa. *Social Science & Medicine*, 113538; Y Sikweyiya and A Gibbs (2022). Sexual aggression in a global perspective: Theory and intervention efficacy. In Lindsay M Orchowski and Alan D Berkowitz (eds). *Engaging boys and men in sexual assault prevention: Theory, research, and practice* (pp. 365–378). Cambridge, MA: Academic Press.

18   Y Sikweyiya, M Machisa, P Mahlangu, N Nunze, E Dartnall, M Pillay and R Jewkes (2023). 'I don't want to be known as a weak man': Insights and rationalizations by male students on men's sexual violence perpetration against female students on campus. *International Journal of Environmental Research and Public Health* 20(5), 4550. https://doi.org/10.3390/ijerph20054550

19   L Bacchus, M Colombini, I Pearson, A Gevers, H Stöckl and A Guedes (2024). Interventions that prevent or respond to intimate partner violence against women and violence against children: A systematic review. *Lancet Public Health* 9(5), e326–e338.

20   P Mahlangu, MT Machisa, Y Sikweyiya, N Nunze, M Pillay, E Chirwa, L Dartnall and R Jewkes (2021). Preliminary evidence of efficacy of a sexual violence risk reduction intervention for female students in South African tertiary institutions. *Global Public Health*. MT Machisa, P Mahlangu, E Chirwa, N Nunze, Y Sikweyiya, E Dartnall, M Pillay and R Jewkes (2023). Ntombi Vimbela! Sexual violence risk reduction intervention: Pre and one-year post assessments from a single arm pilot feasibility study among female students in South Africa. *BMC Public Health* 23(1), 1242. https://doi.org/10.1186/s12889-023-16149-x

21   C Gould, D Mufamadi, M Amisi, E Dartnall, S Moruane, C Abdoll, J Connors, S Naicker, N Shai, E Malek, B Rezant, I Edelstein, A Mabunda, Y Mayet, K Frost, W Dippenaar, Z Kader, A Lewaks and J Moeketsi (2019). What will it take to prevent interpersonal violence in South Africa? Policy Brief 122. Pretoria: Institute for Security Studies.

22   N Dehlin and L Lundh (2018). Compassion fatigue and compassion satisfaction among psychologists: Can supervision and a reflective stance be of help? *Journal for Person-Oriented Research* 4(2), 95–107. doi: 10.17505/jpor.2018.09. PMID: 33569136; PMCID: PMC7842650.

23   Department of Social Development (2015). National Integrated Early Childhood Development Policy. Pretoria: Department of Social Development. https://www.gov.za/sites/default/files/gcis_document/201610/national-integrated-ecd-policy-web-version-final-01-08-2016a.pdf

24   Penelope Parenzee (2024). Policy implementation and co-ordination capacity: A case study of the state's capacity to implement the National Integrated Early Childhood Development Policy in a district in the Eastern Cape, South Africa. Doctoral thesis, Faculty of Commerce, Graduate School of Development Policy and Practice, University of Cape Town. http://hdl.handle.net/11427/40834

About the authors

Senzikile Bengu (ISS), Harsha Dayal (Department of Planning, Monitoring and Evaluation), Gwen Dereymaeker (Department of Health and Wellness, Western Cape Provincial Government), Wilmi Dippenaar (South African Parenting Programme Implementers Network), Anik Gevers (independent consultant), Chandré Gould (ISS), Thamsanqa Mzaku (Phaphama Initiatives), Andisiwe Makwecana (ISS), Mercilene T Machisa (South African Medical Research Council), Pinky Mahlangu (SAMRC), Sinelizwi Ncaluka (MOSAIC), Penelope Parenzee (Nelson Mandela School of Public Governance, University of Cape Town), Jill Ryan (University of Stellenbosch), Nwabisa Shai (SAMRC), Yandisa Sikweyiya (SAMRC).

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.

Development partners

9 772617 830004