

# Preventing Individual-Level Violence in Conflict Settings



As humanitarian crises increase in frequency and protraction, their impacts have become more widespread and long-lasting. From loss of livelihoods, weakening of infrastructure, and backsliding on development gains, to heightened tensions between groups, increased competition for resources, and displacement, these crises can change the physical, social, political, and economic landscapes of communities for generations.

Though crises often impact all members of a community, marginalized and vulnerable populations are generally the hardest hit. As these groups recover, they often have access to fewer resources and experience higher rates of violence during and after crises. In particular, gender-based violence (GBV), intimate partner violence (IPV), and violence against children (VAC) have been shown to significantly increase in humanitarian crises ([Delkhosh et al. 2017](#)). This is especially acute in conflict-affected settings where women, adolescents, and children may experience violence perpetrated by combatants as well as people they know, such as their partners, parents, and other family members ([Hossain and McAlpine 2017](#)).

This policy brief unpacks the current literature on preventing and mitigating GBV, IPV, and VAC during and immediately after conflicts, to identify key lessons for policymakers and practitioners, and highlight important questions that remain unanswered. Given the limits of existing research in this context, this brief also integrates the broader literature on individual-level violence reduction in low- and middle-income countries (LMICs), drawing relevant insights into conflict settings.

Although limited evidence exists on the effectiveness of protection programs in humanitarian contexts, we identified six impact evaluations and one pilot impact evaluation assessing interventions aimed at reducing violence against women, adolescents, and children in conflict-affected settings. All of the evaluated programs were implemented by the International Rescue Committee (IRC) and included discussion groups, teacher training, life skills training, parenting programs, and safe spaces. While there is limited evidence of violence reduction across these studies, most report positive outcomes like decreased support for wife-beating, strengthened social networks, and improved family interactions. All seven studies provide important insights into dynamics that contribute to and reduce individual-level violence in crisis-affected settings.



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## Key Lessons

- 1. Combining interventions that target household gender norms with those that target resource strain may be effective in reducing IPV in conflict-affected settings.** While resource strain may be an important driver of IPV in crisis settings, addressing household gender inequities is needed to reduce and prevent IPV.
- 2. Reducing violence requires targeting across generations and genders.** Witnessing violence in childhood increases the likelihood of perpetration as adults, particularly in intimate relationships. Breaking cycles of trauma requires targeting interventions across generations and genders.
- 3. Building community and networks is important to reducing violence against women and girls.** Community-level approaches, including edutainment programs and life skills sessions, can effectively shift social norms and support networks to reduce violence against women and girls.
- 4. Measuring our impact is essential.** This can effectively inform policy and practice aimed at preventing individual-level violence in all its forms.

# Policy Takeaways

## 1) Combining interventions that target household gender norms with those that target resource strain may be effective in reducing IPV in conflict-affected settings.

Across conflict- and non-conflict-affected settings, there is mixed evidence that economic interventions—such as cash transfers, microcredit, and employment—are effective in alleviating familial stress and increasing women’s bargaining power, to ultimately reduce intra-household conflicts. The evidence suggests that these interventions may be more effective in reducing IPV when paired with gender training or family dialogues that target underlying norms that might affect men’s use of violence in domestic disputes ([Kim et al. 2009](#); [Gupta et al. 2013](#); [Ismayilova et al. 2018](#); [Roy et al. 2019](#)).

Increases in IPV during conflict are often attributed to strains on resources that heighten tensions at the household and community level ([National Institute of Justice 2009](#)). A 2013 randomized evaluation assessed the impact of adding gender dialogues to a group savings program in rural Côte d’Ivoire during a period of violence following elections. The study found that though the program did not lead to a significant reduction in women’s reported experience of IPV more broadly, women who attended more than 75 percent of gender dialogues with their partners reported declines in physical abuse ([Gupta et al. 2013](#)). Moreover, the program reduced the likelihood of women experiencing economic abuse and couples’ acceptance of wife-beating. Attitudes towards refusal of sex, however, did not change. In line with conclusions from the broader evidence base, these findings suggest that while resource strain may be an important driver of IPV, addressing household gender inequities is crucial to reducing and preventing this type of individual-level violence.

More research is needed to understand how the physical, mental, and social consequences of humanitarian crises impact IPV and other individual-level types of violence. In addition, more evidence is necessary to understand if and how programs and policies aimed at responding to humanitarian and development needs may be inadvertently reinforcing gender norms that drive GBV as well as contributing to more subtle forms of IPV, such as psychological and financial abuse.

## 2) Reducing violence within households requires targeting across generations and genders.

Both the perpetration and experience of violence against women and girls (VAWG) and IPV are often deeply rooted in childhood exposure to household-level violence. Witnessing IPV as a child has been shown to increase boys’ likelihood of becoming perpetrators of IPV as adults. Moreover, witnessing violence against their mothers increases the likelihood that girls will experience violence in their intimate relationships ([Rubenstein et al. 2017](#)). In conflict settings, these experiences are compounded by witnessing and surviving other forms of trauma and violence. A pilot study in the Democratic

Republic of Congo (DRC) found that trauma caused by conflict and displacement significantly increased the likelihood of co-occurring IPV and child maltreatment within households ([Falb et al. 2022](#)). Thus, effectively addressing VAW, IPV, and VAC requires the breaking of cycles of violence and trauma across generations.

Though men and boys can be victims of both GBV and IPV, they make up the majority of the perpetrators of these and other forms of violence ([Fleming et al. 2015](#)). Integrating interventions targeting men is essential to preventing and reducing violence. A randomized evaluation in Côte d’Ivoire found that adding men’s discussion groups, aimed at shifting pervasive gender norms and notions of masculinity, to a community-wide

## Defining Violence

**Gender-Based Violence (GBV):** An overarching term for violence that is rooted in gender inequality and harmful gender norms. This can include violence against men, boys, sexual minorities, and gender non-forming identities, as well as women and girls ([World Bank](#)).

**Violence Against Women and Girls (VAWG):** A type of gender-based violence that is experienced by women and girls and is often, but not exclusively, perpetrated by men ([World Bank](#)).

**Violence Against Children (VAC):** Violence against children includes all forms of violence against people under 18 years old ([World Health Organization](#)).

**Intimate Partner Violence (IPV):** Behavior by an intimate partner or ex-partner that causes physical, sexual, or psychological harm, including physical aggression, sexual coercion, psychological abuse, and controlling behaviors, such as economic abuse ([World Bank](#)).

**Sexual Violence:** Any sexual act, attempt to obtain a sexual act, or other act directed against a person’s sexuality using coercion, by any person regardless of their relationship to the victim, in any setting ([World Bank](#)).



GBV prevention programs decreased men's intentions of using physical violence on partners, improved their acceptance of women refusing sex, increased their ability to control their hostility and manage conflict, and increased their participation in household tasks. However, the evaluation found no effects on IPV reduction ([Hossain et al. 2014](#)). Integrating these lessons, a later iteration of this program focused on empowering male allies to advance non-violent intimate relationships in the DRC. Researchers evaluated the impact of this program on both men who had reported using violence in intimate relationships and those who had not. They found that among men who had reported using violence, the program significantly reduced the probability and severity of physical and sexual IPV ([Cuneo et al. 2023](#)).

Preventing children from witnessing and experiencing violence, as well as mitigating the harm caused by violence in childhood, are important steps in stopping individual-level and gender-based violence. In non-conflict settings, parenting programs—such as group parenting sessions, home visits, or a combination of both—have been effective in reducing harsh discipline practices, improving parent-child interactions, and increasing parenting knowledge, in addition to having positive outcomes on child development and behavior ([Kabay and Smith 2022](#)). Evidence from three randomized evaluations in conflict-affected DRC, Tanzania, and Thailand revealed that caregiver and teacher training programs did not affect children and adolescent girls' experiences of sexual, physical, or emotional violence. Though caregivers enrolled in the program were more likely to have an

affectionate and warm parenting style than unenrolled caregivers, reports of physical violence reduction were mixed ([Stark et al. 2018a](#), [Puffer et al. 2017](#), [Fabri et al. 2021](#)).

Drawing from these lessons, IRC's Safe at Home program combines IPV and VAC programming through single-sex discussion groups and family discussion groups. The program aims to target power sharing, gender norms, harsh discipline practices, and positive parenting. A pilot study found this intersectional approach to be highly effective in preventing multiple forms of violence in the home, particularly child maltreatment, and improving equitable attitudes and skills in couples ([Falb et al. 2022](#)). These results emphasize the interconnectedness of violence within households and underscore that drivers of violence are often exacerbated by conflict.

### 3) Building community and networks is important to reducing violence against women and girls.

In all contexts, responding to violence against women and girls is particularly challenging given the limited visibility of the problem, both from traditionally low rates of reporting ([Palermo, Bleck, and Peterman 2013](#)) and inadequate responses from local, state, and international actors. Social norms can also prevent women from seeking help due to fear of retaliation or lack of trust in the police or other state institutions.

Though VAWG is experienced and perpetrated by individuals, normative change happens at the community level. In more stable contexts, interventions aimed at



Enumerator Aaron Aruho teaches a faith leader how to use a smartphone for the project Becoming One in the district of Kamwenge, Uganda, on December 4, 2018





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addressing gender attitudes and norms around violence—including through training, dialogue, and mass media campaigns—has shown promise in reducing GBV prevalence. A randomized evaluation of an edutainment program showing VAWG videos to large audiences during community film festivals in Uganda found that survivors and bystanders became more willing to report violence to village authorities. Moreover, women were less likely to think that they would face social repercussions for intervening in a violent incident ([Green, Cooper, and Wilke 2020](#)). These insights illustrate how media interventions could offer a cost-effective method for changing norms and behaviors related to violence.

Given that community support is important to reduce VAWG, contexts where communities have been displaced or disrupted may pose additional risks. A randomized evaluation of life skills sessions in safe spaces among Sudanese and South Sudanese adolescent girls in Ethiopian refugee camps strengthened girls' social support networks, including friends and trusted non-family female adults. It further improved attitudes around rites of passage, such as a desire to complete an additional year of schooling, waiting to get married, and having children after the age of 18. However, the intervention did not reduce girls' exposure to specific forms of violence and did not affect girls' perceived feelings of safety. While a longer follow-up period may be needed to capture changes in protection outcomes, it is important to note that adolescent girls are rarely in full control of their own safety. Thus, programming aimed at changing perpetrator behaviors and attitudes and reducing opportunity may be more effective in reducing VAWG ([Stark et al. 2018b](#)).

#### 4) Measuring our impact is essential

As crises and conflict continue to rise, understanding the

impacts of protection programs is essential to effectively inform policy and practice aimed at preventing individual-level violence in all its forms. Decision-makers need more information about what drives violence against women and girls in crisis settings, as well as how these crises impact violence experienced by sexual minorities and gender non-conforming individuals. Given that drivers of violence may be different in conflict-affected settings, evaluating adapted interventions is key to understanding what works to reduce gender-based and intimate partner violence. We encourage decision-makers at governmental and non-governmental organizations not only to consider existing evidence but also to take the crucial step of assessing their own programs to better inform design, budgeting, and scaling decisions.

Questions remain about how to break cycles of violence attributed to witnessing and experiencing GBV, IPV, and VAC during childhood, as well as what programs can be utilized to change adults' violent behaviors towards children. Finally, to prevent and mitigate the effects of VAWG and IPV, we need to build our understanding of methods for targeting and delivering information to communities that strengthen support systems and change attitudes and behaviors towards VAWG and IPV.

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Through the new [Humanitarian Protection Initiative](#) (HPI), funded by UK International Development, we are supporting research focused on preventing and mitigating harm to conflict-affected populations, including measuring the effectiveness of interventions to prevent and mitigate sexual- and gender-based violence. Additionally, HPI synthesizes and shares research findings with the right decision-makers for better programs and policies to protect the lives of vulnerable populations.

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# Study Summaries



## **Building Caregivers' Emotional, Parental and Social Support Skills to Prevent Violence Against Adolescent Girls: Findings from a Cluster Randomized Controlled Trial in**

**Democratic Republic of Congo (2018)**, Lindsay Stark, Ilana Seff, Khudejha Asghar, Danielle Roth, Theresita Bakamore, Mairi MacRae, Cecile Fanton D'Andon, Kathryn L. Falb  
**Location:** Democratic Republic of Congo

**Method:** Randomized Evaluation

**Disaster Type:** Conflict

**Implementer Type:** INGO (International Rescue Committee)

- In partnership with the International Rescue Committee, researchers evaluated the impact of adding a caregiver component into a life skills program for adolescent girls (10-14 years old) in rural Eastern DRC from July 2015 to October 2016. The program aimed to reduce girls' exposure to violence and improve caregiver behaviors and gender attitudes.
- The program called Creating Opportunities through Mentorship, Parental Involvement and Safe Spaces (COMPASS), provided adolescent girls with 32 life skills sessions in safe spaces and female mentorship from a community member. The caregiver component added 13 monthly caregiver discussion groups focused on raising adolescent girls and improving caregiver support for girls' well-being, empowerment, and health. Designed to foster supportive caregiver-girl relationships, the program aimed to prevent and mitigate girls' experiences of gender-based violence.
- 869 girls and 764 caregivers—selected by the girls—were organized into groups based on age, language, and location. These groups were randomly assigned to participate in either the life-skills program for girls or the life-skills program plus caregiver discussion groups. Caregivers of girls who were selected to participate in just the life-skills program were put on a waitlist to receive the caregiving component at a later time.
- The addition of the caregiving component did not have an impact on girls' experience of GBV. Girls in both groups reported similar levels of sexual violence, other forms of violence, child marriage, and neglect.
- Though caregivers who participated in the program were more likely to have affectionate and warm parenting styles than those who did not, there were no discernable differences in attitudes towards physical discipline for children or gender norms.

## **Gender Norms and Economic Empowerment Intervention to Reduce Intimate Partner Violence against Women in Rural Côte d'Ivoire: A Randomized Controlled Pilot Study**

**(2013)**, Jhumka Gupta, Kathryn L. Falb, Heidi Lehmann, Denise Kpebo, Ziming Xuan, Mazeda Hossain, Cathy Zimmerman, Charlotte Watts, Jeannie Annan

**Location:** Côte d'Ivoire

**Method:** Randomized Evaluation

**Disaster Type:** Conflict

**Implementer Type:** INGO (International Rescue Committee)

- This evaluation examined the impact of adding gender dialogue groups to a group savings program on levels of IPV in rural Côte d'Ivoire from October 2010 to August 2012. Both women and their male partners participated in the dialogue groups.
- 934 women and their partners, spanning 24 villages, were selected to participate in the study. Of those selected, 513 were randomly assigned to participate in a group savings and gender dialogue program, while the remaining 421 participated in only group savings.

- Overall, adding gender dialogues to the savings program did not lead to significant reductions in women's reported experience of IPV more broadly. That said, women who attended more than 75 percent of gender dialogues with their partners reported declines in physical IPV.
- Women who participated in the dialogue program with their partners were less likely to experience economic abuse, and acceptance of wife beating also decreased among couples assigned to the dialogue intervention. Attitudes towards refusal of sex, however, did not change.
- These findings point to the importance of addressing household gender inequities alongside economic programming when tackling IPV.

**Preventing Violence against Refugee Adolescent Girls: Findings from a Cluster**

**Randomised Controlled Trial in Ethiopia (2018)**, Lindsay Stark, Khudejha Asghar, Ilana Seff, Gary Yu, Teame Tesfay Gessesse, Leora Ward, Asham Assazene Baysa, Amy Neiman, Kathryn L. Falb

**Location:** Ethiopia

**Method:** Randomized Evaluation

**Disaster Type:** Conflict

**Implementer Type:** INGO (International Rescue Committee)

- In partnership with the International Rescue Committee, researchers evaluated the impact of life skills and safe spaces program on experiences of violence and social outcomes among Sudanese and South Sudanese adolescent girls residing in refugee camps in Ethiopia from July 2015 to September 2016.
- Sudanese and South Sudanese girls ages 13-19 and their caregivers were recruited and randomly allocated to either receive the life skills and safe spaces program or to a wait-list comparison group. The intervention, Creating Opportunities through Mentorship, Parental Involvement and Safe Spaces (COMPASS), consisted of 30 weekly life skills sessions in safe spaces for girls, and eight complimentary discussion group sessions for their caregivers. The girls' sessions were delivered by trained female refugee mentors, while the caregivers' sessions were delivered by International Rescue Committee staff.
- At six months, the intervention was found to improve social support networks, such as having friends and trusted non-family female adults. It was also found to improve gender attitudes around rites of passage, such as completing an additional year of schooling, waiting to get married, and having children after the age of 18.
- COMPASS did not reduce girls' exposure to specific forms of violence and did not affect girls' perceived feelings of safety.
- Researchers suggested that a longer period of follow-up may have been necessary to document changes in violence. Their third round of data collection was not possible due to funding issues.

**The EmpaTeach Intervention for Reducing Physical Violence from Teachers to Students in Nyarugusu Refugee Camp: A Cluster-randomised Controlled Trial (2021)**

Camilla Fabbri, Katherine Rodrigues, Baptiste Leurent, Elizabeth Allen, Mary Qiu, Martin Zuakulu, Dennis Nombo, Michael Kaemingk, Alexandra De Filippo, Gerard Torrats-Espinosa, Elizabeth Shayo, Vivien Barongo, Giulia Greco, Wietse Tol, Karen M. Devries

**Location:** Tanzania

**Method:** Randomized Evaluation

**Disaster Type:** Conflict

**Implementer Type:** INGO (International Rescue Committee)

- Researchers evaluated the impact of EmpaTeach—a CBT-inspired, self-guided group teacher training—on refugee students' self-reported experience of physical and emotional violence from teachers, depressive symptoms, and school attendance. The intervention was implemented by the International Rescue Committee in Nyarugusu camp in the Kigoma region of Tanzania between January and March 2019.
- 27 primary and secondary schools were randomly assigned to either deliver the EmpaTeach intervention to teachers or to a wait-list comparison group. Teachers in intervention schools were offered 12 group training sessions led by their peers over ten weeks. Sessions included empathy-building exercises and group work to shift teachers' negative thoughts and behavior patterns related to corporal punishment.
- EmpaTeach did not improve refugee students' experiences of physical or emotional violence from teachers two and ten months after the intervention.
- Researchers stated that a camp-wide educational policy change during intervention implementation resulted in 14.7 percent of teachers in the intervention group receiving a compressed version of the intervention.

**The Impact of a Family Skills Training Intervention among Burmese Migrant Families in Thailand: A Randomized Controlled Trial (2017)**, Eve S. Puffer, Jeannie Annan, Amanda L. Sim, Carmel Salhi, Theresa S. Betancourt

**Location:** Thailand

**Method:** Randomized Evaluation

**Disaster Type:** Conflict

**Implementer Type:** INGO (International Rescue Committee)

- In partnership with the International Rescue Committee, researchers evaluated the impacts of a parenting and family skills intervention for children ages 8-12 and their caregivers on parent-child relationship quality, discipline practices, and family functioning among displaced Burmese migrant and refugee families in Thailand between 2011-13.
- 479 Burmese displaced families were recruited and randomly assigned to either the intervention or a wait-list comparison group. The intervention, Happy Families, consisted of 12 weekly parallel group sessions for caregivers and their children, followed by a joint play session. Sessions were delivered by program staff and community-based lay facilitators. Caregiver sessions included information on appropriate developmental expectations, harsh punishment, non-violent discipline strategies, positive communication, and stress management. Topics for children included communication skills, the effects of drugs and alcohol, problem-solving, recognizing feelings, and dealing with criticism and anger.
- At one month, the intervention was shown to improve the quality of parent-child interactions, increase family cohesion and communication, reduce negative family interactions, reduce children's externalizing behavior (aggressive behavior, rule-breaking behavior, and social problems), and improve child attention problems.
- Changes in discipline practices were mixed, with decreases in children's reports of spanking and slapping, no impacts on the use of positive discipline strategies, and inconclusive impacts on the use of harsh discipline practices.

**Working with men to prevent intimate partner violence in a conflict-affected setting: A pilot cluster randomized controlled trial in rural Côte d'Ivoire (2014)**, Mazedra Hossain, Cathy Zimmerman, Ligia Kiss, Tanya Abramsky, Drissa Kone, Monika Bakayoko-Topolska, Jeannie Annan, Heidi Lehmann, Charlotte Watts

**Location:** Côte d'Ivoire

**Method:** Randomized Evaluation

**Disaster Type:** Conflict

**Implementer Type:** INGO (International Rescue Committee)



- Researchers evaluated the relative impact of adding male-focused discussion groups, aimed at shifting pervasive gender norms and notions of masculinity, to a community-wide GBV prevention program in conflict-affected Côte d'Ivoire from September 2010 to March 2012.
- The evaluation found no differences in levels of IPV between couples that had men assigned to discussion groups versus those that only participated in the community-level intervention. However, men participating in the supplemental intervention reported decreased intentions of using physical IPV, improved acceptance of a woman refusing sex with her husband, increased ability to control their hostility, and greater participation in household tasks.
- Despite the lack of impact of the male engagement intervention on the actual incidence of IPV, researchers highlighted a decline in IPV levels between baseline and follow-up surveys between intervention and comparison communities, suggesting that the existing comprehensive community GBV programming may also have influenced the violence perpetrated by men exposed to the community program. The men's discussion groups may further this trend by decreasing factors commonly associated with the perpetration and normalization of IPV.

**Improving family functioning and reducing violence in the home in North Kivu, Democratic Republic of Congo: a pilot cluster-randomized controlled trial of Safe at Home (2022)**, Kathryn L. Falb, Alexandra Blackwell, Jean de Dieu Hategekimana, Munjireen Sifat, Danielle Roth, Meghan O'Connor

**Location:** Democratic Republic of Congo

**Method:** Pilot Randomized Evaluation

**Disaster Type:** Conflict

**Implementer Type:** INGO (International Rescue Committee)

- Researchers conducted a pilot study of IRC's Safe at Home program in conflict-affected Democratic Republic of Congo from November 2019 to September 2021. The study aimed to measure the program's impact on co-occurring violence within homes, acceptance of harsh discipline of women and children, power sharing in couples, and gender attitudes.
- Safe at Home combines IPV and VAC programming through single-sex discussion groups and family discussion groups in order to reduce co-occurring violence within households and acceptance of harsh discipline.
- 202 heterosexual couples were recruited and randomly assigned to treatment or waitlist. The 104 couples receiving treatment met weekly for single-sex discussion groups and monthly family discussion groups. In total, the program included 24 sessions for men, 18 sessions for women, and five family sessions.
- Though the pilot study did not find improved family functioning for women in the program, women did report a reduction in co-occurring violence by their partners. Specifically, women who participated in Safe at Home programming with their partners reported greater reductions in physical, sexual, and emotional IPV, as well as in harsh disciplining of children than women who were waitlisted for the program.
- Similarly, men enrolled in the program reported reductions in their perpetration of IPV in all forms, as well as reductions in their use of harsh discipline on children.
- The study also found more equitable attitudes, skills, and behavior among couples.
- This pilot study points to the interconnectedness of multiple forms of violence within homes and emphasizes the need for a holistic approach to reducing IPV and VAC.

**Summary Writers:** Nessa Kenny, Caroline Lawton

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