



Communities Care: Transforming Lives and Preventing Violence

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Communities Care: Transforming Lives and



In response to the urgent need to increase access to quality care and support services for sexual violence survivors, as well as the imperative to develop and test effective strategies to prevent violence against girls and women in conflict-affected settings, UNICEF developed the *Communities Care: Transforming Lives and Preventing Violence* programme.

Communities Care is a community-based model for preventing and responding to sexual violence against girls and women in conflict-affected settings. The programme is premised on the idea that while armed conflict causes horrendous suffering for those affected, the disruption it causes may also present an opportunity for positive change in social norms that can contribute to gender equality and decrease gender-based violence (GBV) and discrimination. *Communities Care* emphasizes that entire communities – girls, women, boys and men alike – benefit from healthier, safer and more peaceful environments in which all members enjoy their right to live free from violence. *Communities Care* is among a new generation of prevention programmes that are seeking to address girls' and women's disadvantaged economic and social status; the structural and societal conditions that sustain inequality between men and women; and social norms that enable sexual violence and other forms of GBV.

Programme Goal

The goal of *Communities Care* is to create healthier, safer and more peaceful communities for girls and women by working with communities to (i) improve access to care and support for survivors of GBV and (ii) transform harmful social norms that promote violence against girls and women into norms that promote dignity, equality and non-violence.

Objectives and Approach

The *Communities Care* programme, currently being piloted in South Sudan and Somalia, has two overall objectives that are put into operation through separate but interrelated programme strategies. The first is to improve timely, coordinated and compassionate care and support for survivors of sexual violence in conflict-affected settings by strengthening community-based response. The second is to reduce tolerance for GBV within the community and catalyse community-led action to prevent it by transforming harmful practices and social norms that perpetuate gender inequality and related violence.



and Preventing Violence

To achieve its objectives, the *Communities Care* programme uses a ‘facilitated dialogue’ method – that is, a structured conversation over 15 weeks led by trained community members. Through this, it brings groups of adults and adolescents together to build awareness and consciousness about shared values of respect for human dignity, fairness and justice; to connect their experiences of violence and injustice to the experiences of others; and to analyse how gender norms contribute to violence and injustice. Participants are empowered to work together to find solutions to the problems of GBV and inequality and are supported in translating these solutions into concrete action.

Communities Care Theory of Change

Communities Care is underpinned by a theory of change based on UNICEF research. The theory suggests that abandonment of harmful practices in a community requires more than a shift in individual knowledge and attitudes; it also involves a change in social norms, or social expectations about behaviour. The programme’s change theory uses familiar language and images to link human rights education to local values, aspirations, and people’s lives, based on the logic that communities are able to identify concrete concerns and deal critically with the reality surrounding them. It stipulates that once people have access to information from credible sources, as well as the opportunity to reflect on its implications, they are more likely to collectively and individually feel that change is in their best interest; to identify viable alternatives; and to actively pursue them. The collective nature of the process provides energy and motivation that would be far less likely for individuals on their own.

The programme’s ‘change pathway’ first includes action to **strengthen** community-based care for survivors of sexual violence. The process then concentrates on engaging community members in collective **reflection** and exploration on values, aspirations, and harmful norms that foster violence and discrimination, and then **explores** alternatives to violence and discrimination. Community members are encouraged to **commit** to taking concrete action to promote greater gender-equitable relationships in their families and communities. **Communicating** a commitment to gender-equitable beliefs and behaviours to others, and **building** an environment that supports non-violent, healthy behaviour through the adoption of laws and policies, are also vital aspects of the *Communities Care* change process.



Communities Care Toolkit

To support UNICEF staff and partners to pilot *Communities Care* in Somalia and Sudan in line with the programme theory of change, UNICEF developed the *Communities Care* toolkit. The toolkit contains information, guidance, tools and capacity-building materials to assist UNICEF and partners in working with the community to strengthen community-based care for sexual violence survivors, while also catalysing community action to prevent violence. The toolkit has four parts:

- **Part 1** is dedicated to building knowledge and awareness;
- **Part 2** provides information and guidance for planning and monitoring;
- **Part 3** focuses on strengthening compassionate, community-based care and support for sexual violence survivors; and
- **Part 4** contains guidance and resources for engaging the community in collective reflection and action for change.

Additional tools to support the implementation of *Communities Care* have been developed in partnership with John's Hopkins University, including a tool to help diagnose and measure social norms. Standard survey tools identify an individual's behaviour and her or his personal beliefs (for example, beliefs about men's entitlement to use violence over their wives). As such, they capture one dimension of a social norm. The tools developed through the *Communities Care* programme, go a step further to help determine what people believe others think and do – the critical element for measuring social norms.

Evaluation

Communities Care is under evaluation in partnership with John's Hopkins University to learn about the impact of the programme. The research component is poised to contribute to the evidence base on GBV prevention in conflict-affected areas through new and improved ways of measuring social norms and social norm change. In addition to providing important insights regarding the effectiveness of the *Communities Care* approach, it is hoped that the evaluation results will contribute much-needed measurement tools and lessons to support future efforts to establish and consolidate positive social norms and related behaviours.

The evaluation results so far demonstrate the promise of community-based and led initiatives to prevent GBV and strengthen response services through social norms change in humanitarian settings. GBV prevention programming is an emerging area of practice, particularly in humanitarian contexts. The findings suggest that carefully designed, multi-pronged communication interventions that target social norms while catalysing community action can help to reduce different forms of GBV in emergency-affected settings by leveraging the opportunity that such upheaval can offer.

Evaluation Outcomes for Somalia

In Somalia, the baseline, midline and endline data collection is now complete, and a fourth data point to measure the longitudinal aspect of the intervention is scheduled for the last quarter of 2017. Analysis of data collected indicates that participants in the intervention district had significantly greater improvement in social norms change than participants in the control district for all three of the subscales measured: 1) Response to Sexual Violence; 2) Protecting Family Honor; and 3) Husbands' Rights to Use Violence. The participants in the intervention district also had a significantly greater increase in confidence in services for women and girls that had experienced sexual violence and other forms of GBV than the control districts.

Evaluation Progress in South Sudan

While it is too early to determine the full impact of *Communities Care* in South Sudan, early indications are positive and preliminary findings point to promising trends. In particular, communities are developing action plans to address GBV, and individual men are taking action – for example, by sharing responsibility for domestic chores or sending their daughters to school. Schools are also taking action – for example, by fundraising for washrooms for girls in school and creating safe spaces for girls to seek information or advice about GBV. Other communities have initiated an advocacy campaign to create a by-law against early and forced marriage; started a street theatre group to conduct community sensitization; and educated community members about the benefits of non-violent and respectful relationships and the importance of human dignity.

What's Next?

After the pilot phase is completed, monitoring and evaluation data – along with the recommendations and lessons from *Communities Care* staff and communities – will be used to make adjustments to the toolkit so that it can be shared for adaptation and use by other communities. The research findings and the second edition of the toolkit, along with other resources, will be invaluable to promoting peaceful and safe communities and addressing GBV in conflict-affected countries around the world.



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