Chapter 16

What Works to Prevent Adolescent Intimate Partner and Sexual Violence? A Global Review of Best Practices

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BACKGROUND

Intimate partner and sexual violence (IP/SV) among adolescents is common throughout the world, with devastating effects on their physical and mental health and well-being that can last a lifetime. Until recently, virtually all of the rigorously evaluated interventions to prevent adolescent IP/SV came from high-income countries (Ellsberg et al., 2015; Leen, 2013; Lundgren & Amin, 2015). The majority of these interventions were conducted in schools and college campuses and largely focused on reducing perpetration and victimization among both boys and girls in dating relationships. However, in the last decade a growing body of evidence has emerged in low- and middle-income countries (LMIC), which addresses other forms of violence against adolescents including early and forced marriage, sexual violence, and intimate partner violence (IPV), both in dating relationships as well as in marriage. These interventions largely focus on male violence against adolescent girls, based on the evidence that girls are more vulnerable to IP/SV in LMIC and that gender-based norms and discriminatory practices are a major driver of such violence. This paper will review the current evidence for effective interventions to address physical and sexual violence against adolescents in relationships. We utilize the term *adolescent intimate partner and sexual violence (IP/SV)*, as it encompasses the full spectrum of partner violence that occurs during adolescence, including that which occurs within marriages.

Adolescent Dating Violence. DOI: https://doi.org/10.1016/B978-0-12-811797-2.00016-5

Although boys and girls both suffer violence during childhood and adolescence, the characteristics and consequences of this violence are often different (Thompson et al., 2004). The gendered nature of violence becomes increasingly relevant and apparent during adolescence. To effectively respond to violence in adolescence, it is essential to understand the differing dynamics, consequences, and implications at play for both boys and girls. We argue that a gender perspective is crucial for understanding how structural factors such as differential access to education, resources, and rigid gender norms define the different challenges and opportunities that boys and girls face and their experiences of violence, particularly IPV.

In high-income countries, dating violence is the most common form of IPV reported among adolescents. Dating violence refers to physical or sexual violence that occurs in a relationship that is neither marriage nor a long-term dating relationship. International research, mostly collected in Europe and North America, suggests that adolescents start dating between 13 and 15 years. In the United States, 72% of adolescents 13–16 years have had dating experience, whereas in the United Kingdom 88% of adolescents 15 years or older report dating experience (Leen, 2013). Research on adolescent dating violence in these settings is seldom approached with a gender lens, resulting in the assumption that it affects girls and boys to a similar degree and in similar ways. A review of adolescent violence found a prevalence of physical adolescent dating violence between 10% and 20% of general population samples. The prevalence estimates were similar for both boys and girls, with a trend towards slightly higher male victimization (Leen, 2013). In a study of Swedish adolescents, male victimization was substantially higher (20%–59% in boys, 10%–43% in girls), particularly for the most serious abuse (Danielsson, Blom, Nilses, Heimer, & Hogberg, 2009). For sexual dating violence, the tendencies are reversed. Although great variability is found, sexual dating victimization is higher for girls than for boys (Leen, 2013; Lundgren & Amin, 2015). This is consistent with IPV data from LMIC.

In LMIC, there are few surveys that specifically look at dating violence in this age group, and many of the studies on adolescent IP/SV are not comparable. A fairly recent source of information is the Violence against Children Surveys (VACS), which have been conducted in over 11 countries to date (Sumner et al., 2015). The VACS collect information on all forms of physical and sexual violence experienced by boys and girls before the age of 18 years. These surveys typically do not disaggregate findings by age groups, so it is difficult to determine whether the violence occurred during early childhood or adolescence. Although main perpetrators of sexual violence against girls are romantic or intimate partners, the VACS do not provide a specific measure of IP/SV among adolescents.

Another important source of information is the studies that measure the prevalence of different forms of violence against women and girls (VAWG), including IPV. The WHO Multi-Country Study on Women's Health and

Domestic Violence against Women, the Domestic Violence Module of the Demographic and Health Surveys, the CDC Reproductive Health Surveys, the International Men and Gender Equality Survey, and the UN Multi-Country Study on Men and Violence all measure physical and sexual violence by a current or former intimate partner against women aged 15–49 years (Contreras et al., 2012; Devries et al., 2013; Fulu, Jewkes, Roselli, & Garcia-Moreno, 2013). It is possible to disaggregate these numbers by age groups to estimate the prevalence of IPV in the group of women aged 15–19 years. In countries where dating is uncommon, only women who have been married or lived with a male partner are asked the questions about IPV.

Due to these differing conceptions of the violence experienced by adolescents, it is difficult to compare the different estimates between high-income countries and LMIC, and between the data collected using different survey instruments. However, existing data from LMIC indicate that the prevalence and characteristics of sexual violence against boys and girls vary widely across settings. A comparative review of the VACS in 10 countries found that among 18–24 year olds, the prevalence of any form of sexual violence before the age of 18 years ranged from 4.4% among females in Cambodia to 37.6% in Swaziland, with the prevalence in most countries greater than 25%. Among boys, the range was from 5.6% in Cambodia to 21.2% in Haiti. Sexual abuse was higher among girls in all countries except Cambodia and Laos (Sumner et al., 2015). However, completed unwanted sex (pressured or forced penetrative sex acts) was several times higher among girls in all countries except Haiti and Laos. For example, in Zimbabwe, 13.5% of girls reported coerced sex compared to 1.8% of boys (Sommarin, Kilbane, Mercy, Moloney-Kitts, & Ligiero, 2014).

The perpetrators of sexual violence are also different for adolescent boys and girls. In the VACS, the main perpetrators for sexual abuse against boys were neighbors, schoolmates, and friends, whereas between 45% and 77% of sexual violence against girls was perpetrated by a romantic or intimate partner (Sommarin et al., 2014). Although these data are not disaggregated by age group, it is likely, given global patterns of sexual debut and marriage, that most of the cases of IPV occur among adolescents, rather than younger children.

The high rates of IP/SV reported by adolescent girls in the VACS are consistent with global estimates based on research on VAWG. The WHO Multi-Country Study estimates a lifetime prevalence of physical or sexual violence from an intimate partner among ever-partnered girls aged 15–19 years at about 30%. This is similar to the overall lifetime prevalence of IPV among women of reproductive age (Devries et al., 2013). This is remarkable, considering that girls have been exposed to the risk of IPV for a much shorter period. A review of data from the WHO Multi-country Study on Women's Domestic Violence in nine countries found that the 12-month prevalence of IPV among adolescent and younger women aged 15–24 years ranged from 8% to 57%. This rate was significantly higher than IPV rates in older women in all but one country, indicating that IPV starts early in the

relationship (Stockl, March, Pallitto, Garcia-Moreno, & WHO Multi-country Study Team, 2014).

Gender disparities with respect to access to education, health, economic, and social opportunities exist across the life span; however these disparities surge during adolescence. Girls and boys in cultures throughout the world are treated differently from birth onward (and even prenatally where selective abortion of female fetuses is practiced), but at puberty this gender divide increases significantly. During adolescence, opportunities expand for boys and contract for girls. As boys begin to take advantage of new privileges reserved for men, girls endure new restrictions reserved for women. Boys gain autonomy, mobility, opportunity, and power (including power over girls' sexual and reproductive lives), while girls are systematically deprived of these assets. During adolescence, gender socialization is reinforced and pressures to conform to hegemonic notions of masculinity and femininity are heightened (Barker, Ricardo, Nascimento, Olukoya, & Santos, 2010; Ricardo et al., 2011). Adolescent boys are encouraged to be aggressive and dominant, including sexually. In contrast, girls are expected to be chaste and submissive in the face of male domination. During this period, as adolescents are beginning to engage in romantic and sexual relationships, the internalization of these norms has important implications both for perpetration and victimization of violence, and negotiation of sexual relationships.

For adolescent girls in LMICs, IPV is closely linked to child marriage. It is estimated that one in three girls in the world are married before the age of 18 years. Currently, nearly 70 million girls between the ages of 18 and 24 years were married before the age of 18 years, and many of these marriages are forced upon the girl against her will (UNFPA, 2013). In the VACS report from Malawi, 27% of women 18−24 years were married or cohabiting with a partner before the age of 18 years, compared to 3% of men (Maksud, 2014). The negative consequences of child marriage are well documented and extend throughout a girl's lifetime. A girl who is married before the age of 18 years is not only more likely to suffer IPV, she is also less likely to continue her education, her earning potential is greatly diminished, and she is likely to be isolated from family and social networks. In addition to child marriage, there are other forms of violence and harmful practices to which only girls are also subjected, including violence related to dowry/bride price and honor-related violence (Garcia-Moreno et al., 2015). Because of the direct impact of early/child marriage on the risk of IP/SV for girls, we will include interventions to delay the age of marriage in our review of effective interventions.

EFFECTIVE INTERVENTIONS TO ADDRESS ADOLESCENT IP/SV

As mentioned above, the great majority of rigorously evaluated interventions to reduce adolescent dating violence as well as IPV overall are derived from only a few high-income countries, particularly the United States and Canada

(Arango et al., 2014). Despite this, there is an emerging body of evidence coming from LMICs on interventions that show promise in reducing VAWG. In high-income countries, most interventions to address dating violence among adolescents are based in schools, with an emphasis on secondary schools or universities (Leen, 2013; Lundgren & Amin, 2015). In contrast, interventions in LMICs to prevent adolescent IP/SV are more focused on group training for either boys or girls, or both, and some community-level programs. These interventions are more likely to focus on empowering girls to make decisions around their sexual and reproductive health (SRH) and on changing the behavior of both boys and girls by challenging traditional views regarding gender. These interventions are also more likely to explicitly describe themselves as "gender transformative," in that they aspire to encourage new ideas and behaviors among participants and communities about the balance of power between men and women in households and in society.

Although most interventions in LMICs focus on adolescents and young adults, increasingly programs are targeting preadolescents in schools to address the gendered norms that lead to IP/SV in adolescents. These programs will also be included in the review. The following pages describe the most effective or promising approaches to address adolescent IP/SV. This analysis is based on a systematic review of reviews conducted in 2014 (Arango et al., 2014; Ellsberg, et al., 2015) addressing interventions to reduce all forms of VAWG. This was updated in 2017 to include papers published between 2014 and 2017, as well as papers that included perpetration of dating violence against adolescent boys, which were not included in the original review.

School-based Interventions to Prevent and Respond to Adolescent IP/SV

One of the most important sectors in the efforts to prevent adolescent IP/SV is that of education. Schools are environments in which children and adolescents learn and develop social and behavioral norms. Therefore, the education sector presents a unique entry point to shape future generations' ideas of healthy relationships and balanced power dynamics (Leach, Dunne, & Salvi, 2014; Gennari, Urban, McCleary-Sills, Arango, & Kiplesund, 2014). At the highest level, policymakers can develop and enforce laws and policies that outline how education systems will work in an integrated manner with other sectors to prevent violence. At the institutional level, administrators can implement training curricula for teachers and students that focus on fostering gender equitable attitudes and norms. Finally, at the community-level, teachers and school administrators can work with other influential community members to hold conversations, workshops, and other activities that will strengthen community knowledge and capacity to respond to and prevent IP/SV, potentially leading to broader social change (Gennari et al., 2014).

There are a variety of school-based approaches to preventing or reducing adolescent IP/SV. Relevant school-based interventions are those that address adolescent relationships directly, as well as those that address broader themes of gender equality. Only a few school-based interventions have been rigorously evaluated.[1] Effective interventions are those that have been rigorously evaluated, show significant reductions in physical, emotional/psychological, or sexual adolescent IP/SV, and/or improve behaviors, attitudes, and knowledge that promote gender equality and healthy power dynamics. A total of 11 interventions were found that fall under this category (Table 16.1). Four of those interventions directly address adolescent IP/SV, while the other seven target broader gender norms, attitudes, and conflict resolution skills relating to the large school and community. The majority of these interventions engage communities with a gender approach using a comprehensive methodology over a sustained period of time.

Both *Stop Violence against Girls in Schools (SVAGS)* and *Safe Schools* programs demonstrate how multifaceted and culturally relevant school-based interventions implemented over a longer period of time can affect change not only among students and teachers but also within the surrounding communities. Within these interventions, religious and community leaders, parents, and community organizations, among others, were engaged in sensitization training and broader discussions about gender, different types of violence, and girls' education. Students and teachers showed significant improvements in knowledge, attitudes, and key behaviors (i.e., help-seeking) (Parkes & Heslop, 2013; USAID, 2008). Looking specifically at the Girls' Clubs in the *SVAGS* program, participating girls had higher mean attitude index scores[2,3] and significantly improved knowledge on relevant laws and policies, reporting mechanisms, and support organizations at the end of the intervention. *SVAGS* has been adapted to the Tanzanian and Nigerian context, *Transforming Education for Girls in Nigeria and Tanzania*, extending beyond the focus on violence against girls to encompass more of a "whole-school approach" to address other forms of school-related violence (Parkes & Heslop, 2013; ActionAid International, 2012). Similarly, educational programs that aim to improve social networks and decrease tolerance for violence have shown significant reductions in bullying and overall school violence while demonstrating promising results for reducing IP/SV (Farrington, 2012).

1. Rigorously evaluated interventions are those that employed experimental or quasi-experimental evaluation designs.

2. Only students in Kenya and Mozambique showed statistically significant differences in the mean attitudes index score.

3. "Challenging violence and gender equality index": score between 0 (does not challenge attitudes on gender inequality) and 1 (challenges attitudes on gender inequality) based on a series of eight statements.

TABLE 16.1 Effective Primary and Secondary School-Based Interventions for Adolescent IP/SV

Author	Summary of Intervention	Study Details	Population	Outcome(s)	Main Results
Dating Violence Programs					
Levesque et al. 2016	**Teen Choices** is a web-based multimedia intervention consisting of three sessions that are individually tailored, with five different tracks matched to dating history, dating violence experiences, and stage of readiness for using healthy relationship skills.	Cluster-randomized trial with follow-up at 6 and 12 months.	Students enrolled in Grades 9–11 (ages 14–17 years)	Perpetration and experience of emotional and physical violence Relationship skills and dating violence attitudes	In the subset of participants who reported a past-year history of dating violence at baseline and/or who dated during the study, the program was associated with significantly reduced odds of all four types of dating violence.
Sosa-Rubi et al., 2016	The intervention, "Amor… pero del Bueno" (**True Love**) consisted of two components delivered over one semester: school climate and individual-level. It consisted of a classroom-based curriculum delivered over 16 weeks and school-wide activities that promote prevention and awareness of dating violence.	Quasi-experimental evaluation using matching and fixed-effects models	Students enrolled in low-income high schools at risk for violence (ages 14–18 years)	Perpetration and experience of psychological, physical, and sexual violence Attitudes and beliefs about general violence and sexism, gender norms in dating, and knowledge about potential source of support to prevent and cope with violence	The study found a significant reduction in the prevalence of perpetrated and experience of psychological violence among male students in the combined program. Additionally, the study found a significant reduction in beliefs and attitudes justifying sexism and violence in dating relationships among both females and males.
Wolfe et al., 2009	In the **Fourth R: Skills for Youth Relationships**, trained teachers implemented a provincially mandated 21-lesson curriculum in a Grade 9 health class that focused on fostering knowledge and skills regarding safety and injury prevention and health-related issues.	Cluster-randomized trial with 2.5 year follow-up	Students enrolled in Grade 9 (14–15 years of age)	Self-reported perpetration of PDV 2.5 years after the baseline among all boys Self-reported perpetration of PDV 2.5 years after baseline among boys who had dated in the previous 12 months	After 2.5 years of follow-up, those in the control group had close to three times higher odds of perpetrating violence than those in the intervention group.

(*Continued*)

TABLE 16.1 (Continued)

Author	Summary of Intervention	Study Details	Population	Outcome(s)	Main Results
Wolfe et al., 2003	**Youth Relationships Project** is an 18-session intervention that aimed to strengthen participants' problem-solving and communications skills, improve attitudes on gender norms and healthy relationships, and mobilize social action through a series of participatory and educational activities.	Randomized longitudinal study	Adolescents (14–16 years of age) with history of child maltreatment	Self-reported perpetration of physical dating violence using the Conflict in Adolescent Dating Relationships Inventory among boys and girls	There were greater rates of reductions in perpetration of dating violence by boys in the intervention group as compared to those in the control.
Broader Programs Targeting Gender Norms and Attitudes and Conflict Resolution					
Achyut et al., 2011	The **Gender Equity Movement in Schools (GEMS)** is a 1- or 2-year intervention that involved either group educational activities (45 minutes each) + an awareness campaign (1-week long), the awareness campaign alone, or neither.	Quasi-experimental randomized control design	Boys and girls in Grades 6 and 7	Gender attitudes; behaviors; levels of VAWG	At follow-up, boys and girls in the intervention groups had higher gender equality scores. In addition, girls in the GEA + campaign intervention group self-reported positive changes in behavior. Boys and girls in the GEA + campaign intervention group were more likely to report a positive reaction by peers in response to gender-based violence.

Parkes & Heslop, 2013	**Stop Violence Against Girls (SVAGS)** is a multicomponent intervention which included clubs to increase knowledge on gender equality for students, Reflect Circles to engage parents and community members, sensitization training for community leaders and teachers on VAWG-related issues and with parents on the importance of girls' education, as well as community-wide campaigns and national-level advocacy work.		Primary school students, teachers, community leaders, and parents	Prevalence of violence Knowledge and attitudes related to gender, and reporting behaviors	After the intervention, girls in both Ghana and Mozambique were more likely to report experiencing violence. Positive effects on knowledge and attitudes related to gender were seen among participants of Girls' Clubs.
Farrington, 2012	**Educational programs** were implemented in schools to improve social networks and decrease tolerance for violence.	Control and comparison	School-going children	Behaviors: Bullying perpetration decreased by 20%–23% Experiencing of being bullied Decreased by 17%–20%	Effective: reducing bullying Emerging: reducing IP/SV Emerging: decreasing sexual harassment
Miller et al., 2014	An adaptation of the Coaching Boys into Men approach, **PARIVARTAN** works with high school cricket athletes in India. Coaches participated in a 3-day workshop and then facilitated discussions on gender equitable attitudes, bystander behaviors, and violence with their athletes on a weekly basis for 4 months.		High school male athletes		Greater positive changes in gender attitudes and greater reductions in negative bystander behaviors were demonstrated among those in the intervention than in the control.

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TABLE 16.1 (Continued)

Author	Summary of Intervention	Study Details	Population	Outcome(s)	Main Results
Miller et al. 2012.	In the program **Coaching Boys into Men (CBM)**, trained coaches held brief group discussions (15 min) with athletes on a weekly basis over the course of a sports season (approximately 12 weeks) on knowledge, attitudes, and behaviors related to violence against women		High school male athletes		Athletes in the intervention group experienced positive changes in intentions to intervene when witnessing dating violence and improved bystander behaviors as compared to the control group.
Rijsdijk et al., 2011	**Computer-based interactive learning** to address socio-cognitive determinants of safe sex behavior (condom use and noncoercive sex)	Quasi-experimental pre-test post-test, mixed-model repeated measures analysis	48 secondary schools	Knowledge and attitudes	Participants noted a statistically greater sense of self-efficacy in dealing with sexual coercion than the control group. Students also reported a greater likelihood of intervening in sexual harassment, and boys and girls self-reported greater positive changes in their behavior than those in the control group.
USAID, 2008	**Safe Schools** included advocacy campaigns, sensitization training of teachers and supervisors and creating relevant codes of conduct, capacity training with local leaders and community organizations, and teacher training to guide students on attitudes and knowledge on gender-related issues.		Policymakers, teachers, peer leaders, community leaders, and students (upper primary, lower secondary schools)	Knowledge, attitudes, and awareness	Among both teachers and students, there were shifts in knowledge of gender-based violence, increased awareness of rights, and reductions in acceptability towards violence.

Early Interventions

The *Gender Equity Movement in Schools (GEMS)* program in India involved multimodal and gender-specific interventions over a relatively lengthy period of time. It did not, however, explicitly involve activities that engaged the broader community outside of the school.[4] *GEMS* consisted of a series of educational activities for groups of boys and girls centered around gender, healthy relationships, health, and violence. In addition, a week-long school-wide campaign was launched to engage all students in participatory activities on issues related to IP/SV. Students in the intervention groups obtained higher gender equality scores, and there were improvements in self-reported positive behavior changes (Achyut, Bhatla, Kandekar, Maitra, & Verma, 2011). It is important to note that while one of the main objectives of the effective interventions mentioned thus far was to reduce IP/SV, methodological challenges, especially for community-wide and multilevel interventions, limit measurability.

There are comprehensive programs that have shown a decrease in the prevalence and perpetration of IP/SV. The program *"Amor... pero del Bueno" (True Love)* implemented in high schools at risk for violence in Mexico found a significant reduction in the prevalence of perpetration and victimization of psychological violence among male students who participated in the program, though no impact was found among female students (Sosa-Rubi, Saavedra-Avendano, Piras, Van Buren, & Bautista-Arredondo, 2016). However, the intervention, which included both school-wide campaigns and activities and individual-level programming, also demonstrated a significant reduction in beliefs and attitudes justifying sexism and violence in dating relationships among both female and male students. The *Fourth R* program, implemented in classrooms in Canada as part of the health curriculum, also showed significantly lower odds of perpetrating violence for boys in the intervention than those in the control after 2.5 years of follow-up (Wolfe et al., 2009). The healthy relationships approach, which is the foundation of the *Fourth R* program, has also been applied in a variety of other settings across Canada through programs such as *Making Waves, Respectful Relationships (R + R)*, and *Healthy Relationships in Rural Youth*, although evaluation results for these three programs have not been published (Tutty, 2011). The *Youth Relationships Project*, which utilized a similar *Fourth R* approach, has been rigorously evaluated and resulted in a reduction in the perpetration and victimization of IP/SV among higher risk youth (both boys and girls) who grew up in abusive homes (Wolfe et al., 2003).

Other targeted school-based interventions include those that have engaged coaches and male athletes to reduce perpetration of violence as well as

4. Although they were not measured, this does not mean that ripple effects of the intervention into the community were not possible.

improve gender equitable attitudes. *Coaching Boys into Men (CBIM)* is an innovative intervention which trains coaches to facilitate discussions about norms and attitudes on gender inequalities to high school athletes. A rigorous evaluation showed increases in reported intentions to intervene and positive bystander intervention behaviors (Miller et al., 2012). *CBIM* has also been adapted to the Indian context into a program known as *PARIVARTAN*, which engages cricket coaches and their school athletes. An initial rigorous evaluation showed significant increases in positive attitudes on gender equality (Miller et al., 2014). The program is now being expanded to include girls in an effort to empower and create safe spaces for participants (Das, 2015).

There are five additional interventions that showed promising results; however, the results were not disaggregated by sex. At the middle/high school level, *Shifting Boundaries* and *Safe Dates* showed overall reductions in the perpetration and victimization of dating violence among participating adolescents as a result of a series of gender-sensitive and multiple component interventions implemented over a long period of time (Taylor, Stein, Woods, & Mumford, 2011; Foshee, et al. 2004). Another program, *Connections*, evaluated in six high schools in California, also showed reduction in the perpetration of violence through teaching high school students about healthy relationships (Gardner, Giese, & Parrott, 2004). Similarly, the *Katie Brown Educational Program*, which delivers targeted content about dating behaviors and healthy relationships over the course of just three sessions, showed significant reductions in IP/SV (Joppa, Rizzo, Nieves, & Brown, 2016).

There are several other interventions that have shown promising results but were either not rigorously evaluated or did not provide enough information on the evaluation methodology to draw reliable conclusion on the programs' effectiveness of reducing IP/SV and/or improving related knowledge and attitudes. Similar to those in the effective category, these interventions applied participatory approaches that engaged students and teachers over a long period of time. Activities included awareness campaigns and the development of curricula that addressed healthy relationships, balanced power dynamics, human rights, and/or harmful gender norms. The *Young Men Initiative (YMI)*, coordinated by CARE International Balkans, is an adaptation of the innovative and well-evaluated *Program H* developed by Promundo (Namy, Heilman, Stich, & Edmeades, 2014; Barker, Nascimento, Pulerwitz, & Segundo, 2006). The *YMI* program focuses on adolescent boys and consists of several sessions about gender, sexual health, and violence. An initial evaluation showed a significant improvement in gender equitable attitudes, knowledge, and behaviors in some of the schools (Namy et al., 2014). In the United Kingdom, *WOMANKIND* implemented an education program in several schools by integrating lessons on violence and other gender-related issues into "citizenship lessons" (Maxwell, Chaise, Warwick, Aggleton, & Wharf, 2010). The *C-Change Program*, implemented in the Democratic Republic of Congo, went a step further to involve parents

and other community members. While we cannot say for certain that these programs were effective, preliminary evidence shows promising results (C-Change, 2013).

Finally, a few innovative school-based programs exist that are currently being implemented but have yet to be fully evaluated. *Expect Respect*, a long-standing program implemented by SafePlace in Texas, includes school-based support groups to engage middle- and high school students in discussions about healthy relationships. A preliminary evaluation demonstrates an improvement in healthy conflict resolution skills among participants (Ball et al., 2012). SafePlace is also working in partnership with EngenderHealth on the *Gender Matters* project to reduce levels of teenage pregnancy through discussions and campaigns around healthy relationships, SRH, and support networks (EngenderHealth, 2015). *Dating Matters*, a CDC-led initiative, is also in the implementation phase and includes a series of interventions that help prevent dating violence among young adolescents (aged 11–14 years) in high-risk schools and communities throughout four cities in the United States. This project specifically emphasizes the need to work with children during early adolescence, in addition to engaging their schools, families, and broader communities (CDC, 2015).

When examining effective school-based interventions, it is important to note that the majority of effective interventions that used a gender-specific approach were more broadly focused on gender norms and attitudes rather than adolescent IP/SV, specifically. These, as well as many of the promising and innovative programs, aim to improve behaviors, attitudes, and knowledge that promote gender equality and healthy power dynamics. Thus, while not specifically targeting partner violence, these programs can provide participants with the tools to question and challenge attitudes and behaviors that perpetuate gender inequalities and drive IP/SV and VAWG. Significant methodological weaknesses, such as small sample size, lack of comparison groups, and controlling for confounding factors, have prevented the rigorous evaluation of adolescent IP/SV programs. Many evaluations do not disaggregate data by sex, making it difficult to understand whether the impact of programs is different according to gender. In addition, many effective and innovative programs have been implemented in the Global North, resulting in a dearth of information on how to adapt interventions into different contexts. Overall, a deeper understanding of effective programming within the education sector is greatly needed.

Campus-based Interventions to Prevent and Respond to IP/SV

Colleges and universities are working to prevent and respond to IP/SV on campus. Though prevalence of campus IP/SV is high (Fedina, Holmes, & Backes, 2016), there are few rigorously evaluated interventions that directly address it, making the selection and implementation of effective programs

challenging. Of 16 rigorous evaluations of campus-based interventions addressing IP/SV identified, 12 of these interventions demonstrated statistically significant, effective results in attitudes, behaviors, or prevalence measures related to violence. Effective interventions are displayed in Table 16.2. All evaluations were conducted in the United States. Half of the 12 interventions that were evaluated and showed effectiveness were some form of bystander intervention training. All of these interventions were delivered in person, usually as a workshop, except for one intervention that was delivered online (Kleinsasser, 2015). Theater was also used in two effective interventions as a mechanism for educating students about campus IP/SV and was shown to be a promising mechanism in other studies (Milhausen, 2006). Most of these evaluations used attitudes (e.g., rape acceptance myths, intent to intervene as a bystander) or behaviors (e.g., bystander behaviors) related to IP/SV as outcome variables. Only three of these evaluations used prevalence of self-reported victimization or perpetration as outcome variables (Coker et al., 2015; Marx, Calhoun, Wilson, & Meyerson, 2001; Rothman & Silverman, 2007). Thus, even among the few interventions that have demonstrated effectiveness in rigorous evaluations, only three of these evaluations were measuring whether the intervention actually reduced violence.

Though four interventions identified did not demonstrate effectiveness in a rigorous evaluation, these interventions still reveal important lessons about promising practices (Bradley, 2009; Breitenbecher & Scarce, 1999; Gidycz, Orchowski, & Berkowitz, 2011; Katz, 1995). Two of these interventions (Gidycz et al., 2011; Katz, 1995) worked exclusively with college men and centered discussions of healthy masculinity. These interventions showed some improvements in the men's knowledge around laws related to campus IP/SV and their willingness to engage in bystander behavior, and reductions in their self-reported sexual aggression and association with sexually aggressive peers. One intervention focused on reducing revictimization of students that had already experienced IP/SV (Breitenbecher & Scarce, 1999). Though this particular intervention did not show statistically significant effects, other interventions affirm the importance of focusing on a previously victimized group, demonstrating promising impact on preventing those who had already been victimized (Marx et al., 2001).

Overall, the findings from evaluations of effective interventions demonstrate a positive impact of bystander interventions on attitudes and behaviors related to IP/SV. One evaluation even showed positive effects sustained 1 year following the intervention (Moynihan et al., 2015). Bystander interventions have been implemented and evaluated in the United States since the mid-1990s (Katz, 1995), and have typically included interactive activities that build participants' skills to intervene in potentially violent situations, and provided the opportunity to discuss these scenarios and skills (Peterson, 2016). A bystander approach defines IP/SV as a community problem and

TABLE 16.2 Effective Campus-Based Interventions for Adolescent IP/SV

Author(s) & Year	Summary of Intervention	Study Details	Population	Outcome(s)	Results
Bystander Intervention Programs					
Alegría-Flores, Raker, Pleasants, Weaver, & Weinberger, 2017	**One Act** is a single, in-person workshop that encourages bystander behavior through observation, assessment, action, and follow-up	Quasi-experimental pre-test post-test with comparison group at a large university in SE United States	1487 college students at a large university in the Southeastern United States	**Attitudes** (date rape, bystander confidence) and **behaviors** (willingness to help in low- and high-risk situations)	**Significant positive results** for date rape attitudes and behaviors, bystander's confidence, and willingness to help
Borsky, McDonnell, Turner, & Rimal, 2016	The **Red Flag Campaign** is a 30-minute workshop on dating violence followed by a week-long social marketing campaign that raises awareness around dating violence	Quasi-experimental pre-test post-test with comparison group; difference-in-difference analysis	329 college students at two colleges in Virginia, United States	**Attitudes** (bystander intentions, self-efficacy, norms) and **behaviors** (bystander behaviors)	**Mixed**: **significant positive results** for bystander behavior, but **no significant change** for bystander intentions, self-efficacy norms or attitudes
Moynihan et al., 2015; Banyard et al., 2007	**Bringing in the Bystander** is a one-time, 4.5-hour educational workshop focusing on engaging bystanders in preventing sexual and relationship violence	Randomized control trial using two universities as the treatment and control groups; pre-test, post-test, and one-year follow-up; longitudinal regression analysis	948 freshmen college students at two universities in the Northeastern United States	**Attitudes** (bystander attitudes including readiness to help and perceptions of peer helping) and **behaviors** (reported bystander behavior and opportunity for bystander behavior)	**Significant positive results** for bystander attitudes and behaviors

(*Continued*)

TABLE 16.2 (Continued)

Author(s) & Year	Summary of Intervention	Study Details	Population	Outcome(s)	Results
Peterson, 2016	A 90-minute **adaptation of Bringing in the Bystander**, as compared to a 90-minute traditional education program on dating violence	Quasi-experimental pre-test post-test and 2-month follow-up	1001 freshmen college students at a university in the Western United States	**Attitudes** (rape myth acceptance, bystander efficacy, intent to help), **behaviors** (bystander action)	**Significant positive results** for bystander attitudes, beliefs, efficacy, intentions, and behavior
Amar, Tuccinardi, Heislein, & Simpson, 2015	**Friends Helping Friends** is a bystander intervention program using peer-education	Quasi-experimental pre-test post-test	101 college students	**Attitudes** (feeling of responsibility and intention to intervene, identification of risk, skills to act as a bystander, and rape myth acceptance)	**Significant positive results (**feeling of responsibility to intervene, skills to act as a bystander, and rape myth acceptance)
Coker et al., 2015; Coker et al., 2017	**Green Dot** is a one-time bystander intervention training consisting of one 50-minute motivational speech and a 4- to 6-hour workshop	Quasi-experiment using two universities as the treatment and comparison groups; pre-test, post-test, and 1 year follow-up; longitudinal regression analysis	7026 college students (2768 in an intervention group from University of Kentucky, 4258 in a comparison group from Universities of Cincinnati and South Carolina)	**Prevalence** (victimization and perpetration)	**Significant positive results** for prevalence of victimization, and **positive results** for prevalence of perpetration

Broader Campus-Based Programming					
Kleinsasser, 2015	**Take Care** is a one-time 20-minute online training	Quasi-experimental pre-test, post-test, and 2-month follow-up with comparison group	93 college students from a social psychology class at a midsize university	**Attitudes** (efficacy for intervening) and **behaviors** (bystander behaviors)	**Significant positive results** for self-efficacy attitudes and bystander behaviors
Hanson & Gidycz, 1993	The **Acquaintance Rape Prevention Program** is a one-time workshop with a video, worksheets, and discussion	Quasi-experimental pre-test, post-test with comparison group	360 women college students	**Attitudes** (sexual assault awareness), **behaviors** (dating behavior and sexual communication), **prevalence** (victimization)	**Significant positive results** of prevalence of victimization for college women without a history of victimization, no effect of prevalence of victimization for college women with a history of victimization
McMahon, Postmus, Warrener, & Koenick, 2014	**SCREAM Theater** is a one-time, 75-minute long, peer-education theater program	Quasi-experimental pre-test post-test	643 college students	**Attitudes** (rape myth acceptance and bystander attitudes)	**Significant positive results** in both rape myth acceptance and bystander attitudes
Rothman & Silverman, 2007	**Sexual Assault Prevention Program** that includes a one-time 90-minute drama presentation called "Sex Signals" and a one-time 90-minute small group workshop	Quasi-experimental retrospective cohort design	1982 freshmen college students in the Northeastern United States	**Prevalence** (victimization)	**Significant positive results** on victimization

(*Continued*)

TABLE 16.2 (Continued)

Author(s) & Year	Summary of Intervention	Study Details	Population	Outcome(s)	Results
Woodin & O'Leary, 2010	**Drinker's Check-Ups** are brief, motivational sessions including an assessment and 1 hour session with feedback	Quasi-experimental with comparison group; hierarchical linear modeling used for analysis	50 college dating couples between 18 and 25 years old who reported at least one act of male-to-female physical aggression in their current relationships at a university in New York, United States	**Behaviors** (in men: physical aggression perpetration during the previous 3 months, harmful alcohol use, acceptance of female psychological aggression; in women: acceptance of male psychological aggression)	**Significant positive results** on incidence in men of physical aggression perpetration during the previous 3 months, harmful alcohol use, acceptance of female psychological aggression; and in women: acceptance of male psychological aggression
Marx et al., 2001	**Revictimization Prevention Program** is a program of two, 2-hour sessions that combine psychoeducation and skills training	Quasi-experimental pre-test post-test	66 college women with a history of sexual victimization from two large universities in the southeastern (34 women) and midwestern (32 women) United States	**Prevalence** (incidence of sexual revictimization within 2 months of the intervention)	**Significant positive results** for rape revictimization specifically (but no significant results for sexual revictimization more generally)

encourages all members of a community to adopt a role with which they can identify and intervene to prevent violence (Banyard, Moynihan, & Plante, 2007). These interventions help shift community-level norms that perpetuate IP/SV and are also essential in the prevention of violence. This shifting of norms includes increasing bystanders' awareness/knowledge of IP/SV, their sense of responsibility to intervene, and their ability to take action safely (Banyard, 2011). Bystanders learn about IP/SV and their role in prevention of violence in the community through the interaction and discussion of the intervention. The community begins to change, as a function of individual learning of each bystander.

Two key bystander programs emerge as particularly effective following rigorous evaluation. *Bringing in the Bystander* is a bystander intervention program developed by researchers at the University of New Hampshire in close consultation with IP/SV practitioners in local crisis centers. *Bringing in the Bystander* is delivered in multiple in-person workshops. Two facilitators, one man and one woman, lead participants through discussions that include how to identify a potentially violent situation, how to intervene, and how to respond to a person who discloses that they are a survivor of IP/SV. Workshops also include active learning exercises. Each workshop is 90-minute long, and campuses can adapt how many sessions they facilitate based on their individual time constraints (Banyard, 2007; Moynihan et al., 2015). *Green Dot* is a bystander intervention that engages college students in educational workshops thematically similar to the *Bringing in the Bystander* program. Staff members who are trained in *Green Dot* first deliver a 50-minute long motivational speech, known as the "*Green Dot* speech," within an introductory course for college freshmen. This speech includes educational content around the importance of being an active bystander and how relatively simple it is to intervene. The goal of this speech is to motivate bystander behavior in participants. The motivational speech is followed up with a 4- to 6-hour bystander training session, in small groups of 20−25 students, which teaches safe and effective bystander intervention skills (Coker et al., 2015). Both *Bringing in the Bystander* and *Green Dot* incorporate elements of discussion and skills training. Both programs are delivered in-person, and neither program is delivered as a singular event.

Available research paints a limited picture of what interventions effectively address IP/SV on campus. There is significant research focus on bystander interventions as prevention of campus IP/SV (Storer, Casey, & Herrenkohl, 2016). Additional evaluations of a more diverse set of intervention types are needed to understand what other mechanisms are effective in addressing campus IP/SV. This should include interventions with diverse target populations. By focusing primarily on bystander interventions, rigorously evaluated programs tend to target only bystanders and not perpetrators or survivors. Bystander interventions also focus solely on prevention, leaving a dearth of rigorously evaluated interventions that respond to campus IP/SV.

There are response mechanisms available to survivors in the wake of an assault, including the filing of a complaint against their campus through the Office of Civil Rights in the Department of Education under Title IX. Initial qualitative research has demonstrated that this mechanism is slow-moving and inadequate in providing access to justice for survivors (Peterson et al., 2016), but further evaluation of response interventions around campus IP/SV are needed.

It is important to note that the rigorously evaluated campus-based interventions that showed positive effects primarily used attitudes and behaviors, as opposed to actual reductions in prevalence of violence, as outcomes. This weakness limits the ability of these evaluations to demonstrate impacts on rates of actual violence. In addition, all of the rigorously evaluated interventions with positive effects were delivered once and not sustained over a longer period of time. The impacts of one-off interventions may be limited (Bradley, 2009), but there is little evaluation research of interventions that follows up on outcomes longer than a year post-intervention. Further evaluation of longer term, more comprehensive interventions is necessary to understand whether a higher intensity, higher frequency intervention is more effective than a low-intensity, one-off intervention. Notably, only two interventions (Hanson & Gidycz, 1993; Rothman & Silverman, 2007) addressed which demographics in their samples were more likely to be victimized. These populations included individuals who had previously experienced IP/SV, members of the LGBTQIA community, and students who consumed alcohol and/or engaged in binge drinking (Rothman & Silverman, 2007).

While bystander interventions appear to be effective in reducing attitudes that accept rape myths and increasing bystander knowledge and behaviors, these interventions raise the question of whether or not they address the root causes of IP/SV, or work within the paradigm of existing gender inequality. Interventions that promote gender equality are more effective in producing a variety of positive outcomes, including reduction of violence (Brush & Miller, 2017). With the hope that future evaluations focus on perpetration and victimization of IP/SV as outcome variable, measuring the impact of interventions on violence, this lesson about the effectiveness of interventions that transform gender norms is increasingly salient.

Group-based Targeted Interventions to Prevent and Respond to Adolescent IP/SV

Group-based Training Interventions to Empower Women and Girls

The vast majority of violence prevention programs in LMICs to prevent IP/SV use participatory group training, which typically consists of a series of

educational meetings or workshops with targeted groups of individuals. The ultimate goal of such programs is not only to reduce male perpetration of VAWG but also to address underlying expectations about male and female roles and behavior, and to support the development of new skills for communication and conflict resolution through a process of critical reflection, discussion, and practice. There is a wide diversity in terms of the duration of training, target groups, and components. Intervention components vary between interventions, and are often embedded in programs whose primary purpose is to improve SRH, or livelihoods programs such as microfinance or vocational training (Table 16.3.)

A successful program in Uganda sought to empower adolescent girls through life skills training to build knowledge and reduce risky behaviors, as well as through vocational training enabling them to establish small-scale enterprises (Bandiera et al., 2012). A randomized control trial tracked 4800 girls over 2 years and found significant improvements in SRH knowledge and behavior among girls in the intervention group, as well as a large reduction in coerced sex. In Kenya, an empowerment-based intervention for girls living in poor Nairobi neighborhoods included six 2-hour sessions on empowerment, de-escalation, and self-defense skills. A cluster-randomized trial found that 10.5 months post-intervention, the rate of sexual assault among the intervention group decreased by 60%, whereas no difference was found among the comparison group. Disclosures of sexual assault also increased significantly in the intervention group but not in the comparison group (Sarnquist et al., 2014).

Group Training Targeting Men and Boys

As presented by Jewkes and colleagues (2015), there is a diverse range of interventions involving boys and men in violence prevention, although the evidence of their effectiveness is still limited. One successful program, Yaari Dosti, was carried out in Mumbai and Gorakhpur, India (Verma, Pulerwitz, Mahendra, et al., 2008). The program, based on "H," an intervention developed for young men in Brazil (Barker et al., 2006), aimed to reduce male VAWG by transforming gender inequitable norms through group training and "social lifestyle marketing." The participants were both married and unmarried young men between 15 and 29 years. Men in the intervention arms in Mumbai and Gorakhpur were five times and two times less likely, respectively, to report having used physical or sexual violence against a partner during the last 3 months than participants in the comparison group.

Other similar programs targeting young men have been implemented globally (Das, 2015; Namy et al., 2014; Pulerwitz et al., 2010). Evaluations of these interventions indicate promising outcomes in changing young men's attitudes towards gender equality and views on the justifications for violence but did not result in significant behavioral changes. It is not clear why Yaari

TABLE 16.3 Effective Group Training Programs for IP/SV

Author(s) & Year	Summary of Intervention	Study Details	Population	Outcome(s)	Results
Group Training for Women and Girls					
Bandiera et al., 2012	The **Empowerment and Livelihood for Adolescents (ELA) Program** is designed to improve the cognitive and noncognitive skills of adolescent girls. The program operates through "adolescent development clubs." The two forms of skills training, life and vocational skills training, operated through "adolescent development clubs." Clubs also host popular recreational activities.	Randomized Control Trial. Intention to Treat (ITT) Analysis.	Adolescent girls (approximately 14–20 years)	Report of having had sex unwillingly	The evaluation is based on a 2-year panel of over 4800 adolescent girls. A fall of around 17 pp starting from a baseline level of 21% meaning that almost no girls resident in communities where the ELA program operates, report being subject to such situation.
Erulkar & Muthengi, 2009	**Berhane Hewan** was a 2-year pilot project that aimed to reduce the prevalence of child marriage in rural Ethiopia, through a combination of group formation, support for girls to remain in school and community awareness.	Quasi-experimental. Analysis used chi-square tests, proportional hazard models and logistic regressions	Girls aged 10–14 years	Ever married, girls aged 10–14 years	At baseline, the likelihood of having ever been married among girls 10–14 years decreased with years of education. At endline, intervention girls were much less likely than girls at the control site to have gotten married, suggesting that the program may have helped delay marriage in this age group. However, among girls aged 15–19 years, those in the intervention area had an elevated likelihood of having gotten married by the endline.

Pande, et. al., 2006	**IHMP consisted of a year-long life skills course**. The course was 1 hour each weekday evening, taught by a trained village woman with at least a seventh-grade education. A total of 225 1-hour sessions, divided into five sections: social issues and institutions, local bodies, life skills, child health and nutrition, and health; girls also conducted community service. IHMP held monthly meetings for parents.	Quasi-experimental study. Bivariate and multivariate logistic regression used to examine the effect of the intervention on age at marriage.	Unmarried adolescent girls, ages 12–18 years, with a focus on out-of-school and working adolescents	Proportion of marriage to young girls (11–17 years) between 1997 and 2001	One of marriage in young girls (aged 11–17 years) steadily decreased in the intervention villages (including girls who did not participate in life skills training). Median marriage age increased from 16 to 17 years. No significant changes were noted in the control group.
Sarnquist et al., 2014	Empowerment and self-defense intervention. Six 2-hour intervention sessions for 6 weeks	Quasi-experimental study in four neighborhoods in informal settlements in Nairobi in 2012.	Adolescent girls aged 13–20 years, attending secondary schools	Incidence of sexual assault (forced or coerced penetration and sexual harassment)	10.5 months after the intervention, the rate of sexual assault among the intervention group decreased by 60%, whereas no difference was shown for the comparison group. Disclosures of sexual assault also increased significantly in the intervention group but not in the comparison group.
Group Training for Men and Women					
Jewkes et al. 2008	**Stepping Stones**, a program that uses participatory learning to build HIV risk awareness, knowledge, and communication. Group-based delivery of intervention, with separate groups for men and women. The intervention consisted of 50 hours of training.	Cluster RCT of 70 villages (clusters) in eastern Cape province of South Africa. Villages randomized to receive either stepping stones or 3 h intervention on HIV and safer sex.	Young men and women (aged 15–26 years), who were mostly attending schools	Perpetration (for men) and victimization (for women) of physical and/or sexual intimate partner violence in the past-year	Reported IPV perpetration was significantly reduced among men in the intervention group compared with the control group at 24 months, but not at 12 months. No significant reduction in reported victimization by women at 12 months or 24 months.

(*Continued*)

TABLE 16.3 (Continued)

Author(s) & Year	Summary of Intervention	Study Details	Population	Outcome(s)	Results
Group Training for Men					
Verma et al., 2008	The intervention consisted of different combinations of intervention activities on young men's support for inequitable gender norms, HIV/STI risk behaviors, and partner violence.	Quasi-experimental 3 group design in urban slums of Mumbai and in rural villages in Gorakhpur, 2006–07. Used multivariate logistic regression analysis.	The sample included married and unmarried young men aged 16–29 years in urban settings and aged 15–24 years in rural settings.	Violence against a partner (physical or sexual) reported by men in the last 3 months	Young men in the intervention groups in Mumbai and Gorakhpur were about five times and two times, respectively, less likely to report perpetration of partner violence than those in the comparison sites. The levels of partner abuse rose in both comparison sites.

Dosti was more successful than the other interventions, but it could be related to the intensity and duration of the interventions or underpowered studies. More research is needed to understand what elements of the interventions with men and boys are key for achieving behavioral changes (Ricardo et al., 2011).

Group Training with Men and Women—Synchronizing Gender Approaches

In response to the increasing recognition that both men and women should be engaged in efforts to prevent VAWG, more programs are using "gender synchronized approaches." According to Greene and Levack (2010, p 5), "By intentionally reaching out to both men and women in a coordinated way, gender synchronized approaches seek to equalize the balance of power between men and women, in order to ensure gender equality and transform social norms that lead to gender-related vulnerabilities."

Stepping Stones is a widely adapted program that uses participatory learning approaches with both young men and women to build knowledge, risk awareness, communication, and relationship skills around gender, violence, and HIV. A cluster-randomized trial conducted in South Africa with young men and women found that at 2 years post-intervention, men's self-reported perpetration of physical and/or sexual IPV was significantly lower, compared to men in the control villages. The program also achieved a significant reduction in HSV-2 infections among both men and women. No differences were found in women's reports of IPV victimization between the intervention and control villages (Jewkes et al., 2008).

Community Mobilization

In contrast to group training programs, which seek to reduce violence among a targeted group of individuals, community mobilization interventions aim to reduce violence at the population level by transforming public discourse, practices, and norms around gender and violence. Instead of focusing solely on adolescent boys and girls, community mobilization approaches are typically complex interventions that engage multiple stakeholders at different levels (e.g., community men and women, youth, religious leaders, police teachers, and political leaders). They use a variety of strategies, from group training to public events, and advocacy campaigns such as the 16 Days of Activism on Gender Violence (from November 25 to December 10). They often make use of mobile phone apps, such as Hollaback, Circle of Six, and Safetipin in India, to provide information about violence and neighborhood safety and to help women report violence or receive emergency help from friends and authorities (see Box 16.1) (Wagman et al., 2014). Community activists have partnered with innovative education/entertainment, or

BOX 16.1 Emerging technologies to prevent and respond to violence

Mobile technology is emerging as an important tool to prevent and respond to IP/SV on campus. Mobile apps addressing IP/SV are proliferating at secondary and university schools across the world, and in particular in high-income countries. Though none have yet been rigorously evaluated, many demonstrate promising effects. Most of these apps address the prevention of campus IP/SV, as opposed to response. *Circle of 6* is one such mobile app, where users can enter six contacts into their "circle" to contact quickly (with phrases like "come get me" or "call me") in the case he/she needs to get out of a dangerous situation. *Circle of 6* was piloted at Williams College, where it was reported that the app was contributing to a "cultural change" on campus relating to IP/SV (Rollston, 2016). *On Watch* is another mobile app of this type, where users can preprogram contacts into their phone and send a message for help. Apps like *TapShield* (piloted at the University of Florida) allow users to send their GPS location and a message for help to law enforcement with the touch of a button. Other apps are emerging that address the reporting of campus IP/SV: for example, *Callisto,* which provides on online reporting system for survivors of IP/SV, who can record an anonymous, time-stamped documentation of the incident and decide later whether or not they would like to report it. This increase in mobile technology to address campus IP/SV is encouraging, and though rigorous evaluations have not yet been performed, these evaluations are imminent (Ford-Gilboe et al., 2017; Glass et al., 2015).

While mobile apps have mostly focused on campus-based populations, several apps are attempting to reach broader populations. *Teen Choices*, a web-based intervention targeting secondary school students in the United States, showed significantly lower odds of perpetrating and experiencing emotional/verbal violence for both boys and girls in the intervention group after 3 months of follow-up (Levesque, Johnson, Welch, Prochaska, & Paiva, 2016). Other computer-based learning tools have shown similar results in secondary schools (Rijsdijk et al., 2011). A mobile app focused on IPV among all women, the *MyPlan* app, helps users evaluate the potential for violence in their relationship, and walks users through personal safety planning. The *MyPlan* app is being implemented in several different communities in both high- and low-income countries but has not yet been evaluated.

"edutainment" programs such as *Soul City*, *Sexto Sentido* and *Bell Bajao*, in the development of high-quality communication materials such as posters, street theater, radio, and television programs. While there is no evidence that social communication programs alone can prevent violence, rigorous evaluations have shown significant changes in knowledge and use of services, attitudes towards gender, and acceptance of VAWG, which can provide critical support for local efforts (Solorzano et al., 2008; Solotaroff & Pande, 2014; Usdin, Scheepers, Goldstein, & Japhet, 2005; Wagman et al., 2014).

Because of their complexity, community mobilization programs are challenging to evaluate, and very few rigorous evaluations have been conducted to date. As described by Michau et al. (2015), a cluster-randomized trial of the SASA! program in Uganda has shown highly promising results in reducing the prevalence of IPV in intervention communities compared to control sites, as well as significantly reducing acceptance of IPV among both men and women, and sexual concurrency among men (Abramsky et al., 2014). This model is now being adapted in other settings throughout sub-Saharan Africa as well as Haiti. A similar program carried out in Rakai, Uganda, found not only reductions in physical and sexual IPV but also reduced incidence of HIV/AIDS (Wagman et al., 2014). Although these interventions do not focus specifically on adolescents, they provide important insights on how IP/SV can be addressed at a community-level among adults as well as adolescents.

Financial or material incentives have also been used with promising results to reduce child marriage. The incentives include school uniforms, livestock in Ethiopia, or cash transfers. Typically, these transfers are conditional on staying in school, or staying unmarried up to the age of 18 years, although a program in Malawi showed promising results in keeping girls in school and delaying marriage through unconditional cash transfers (Baird, McIntosh, & Özler, 2011). An innovative program was established in 1994 by the Government of the State of Haryana, India, to increase the perceived value of girls and to reduce child marriage. Cash transfers were provided to parents of girls at two points; a small cash disbursement upon the birth of an eligible girl, and a savings bond in the name of the daughter redeemable at age 18 years, provided the girl was not married. An evaluation is being conducted to assess the impact of the program on the girls enrolled in the program, who are now turning 18 years. Preliminary findings show that beneficiary girls have attained higher levels of schooling and are much more likely to be currently in school compared to non-beneficiaries, controlling for other factors. Because girls typically leave school upon marriage, this is likely to represent a significant impact on age of marriage among beneficiaries (Nanda, Datta, & Das, 2014).

DISCUSSION

In light of increasing evidence of the high prevalence and severe health and social consequences of IP/SV among adolescents, it is troubling that rigorous data on prevention is still so scarce. We found many methodological weaknesses among the studies included in our review. Many of the studies had very small sample sizes (commonly with small numbers of clusters in RCTs), and some of the null findings could well be attributable to the challenge of underpowered studies. There was also a very wide range of outcome measurements and time frames, which made comparisons difficult. Many of the studies did not control for confounding factors, which may have resulted

in some bias or inaccurate results. The vast majority of the evaluations identified did not include a long follow-up period, making it difficult to determine if changes are sustained over time.

There are a number of areas where the evidence base is small or nonexistent. Few interventions were carried out in indigenous or ethnically diverse populations. With a few exceptions, the evaluations in this review did not measure cost effectiveness of interventions, which is a pivotal decision point for those that wish to implement and adapt an intervention. The adaptation of interventions to different settings is also undocumented, and information on the time and effort that this crucial step takes is also missing.

Despite the shortcomings of the current evidence base, some promising trends have emerged. Several studies have shown that it is possible to prevent IP/SV among adolescents, showing that large effect sizes can be achieved over programmatic time frames. Multisectoral programs that engage with multiple stakeholders appear to be the most successful in transforming deeply entrenched attitudes and behaviors. Strong programs not only challenge the acceptability of violence but also address the underlying risk factors for violence, including social norms regarding gender dynamics and the acceptability of violence, women's economic dependence on men and support the development of new skills, including in communication and conflict resolution.

The positive examples of intervention impact point to the imperative of greatly increasing investment in violence prevention. Alongside programmatic investment, it will remain important to support rigorous evaluations, to guide international efforts to end IP/SV among adolescents. As the field continues to develop, it will be important to learn more about the costs of programs and identify models of intervention that can be delivered at scale.

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