

**Key  
Research-based  
Strategies  
For  
Preventing  
Violence Against  
Children**










# THRIVES Technical Package Compared to Other Agencies' Core Packages/Guidance

|   | CDC 2015 | PEPFAR OVC 2012 | PEPFAR DREAMS 2015 | Gender Strategy 2012 | UNICEF 2014 | WHO 2014   |
|---|----------|-----------------|--------------------|----------------------|-------------|------------|
| <b>Training in Parenting</b>                | +        | +               | +                  | +                    | +           | +          |
| <b>Household Economic Strengthening</b>     | +        | +               | +                  | +                    | -           | -          |
| <b>Reduce violence by legal protections</b> | +        | +               | -                  | +                    | +           | +(alcohol) |
| <b>Improved Services</b>                    | +        | +               | +                  | +                    | +           | +          |
| <b>Values and Norms</b>                     | +        | +               | +                  | +                    | +           | +          |
| <b>Education /life skills</b>               | +        | +               | +                  | +                    | +           | +          |
| <b>Surveillance</b>                         | +        | +               | +                  | +                    | +           | +          |



# THRIVES:

## A Global Technical Package to Prevent Violence Against Children

-  **T** raining in parenting for caretakers
-  **H** ousehold economic strengthening
-  **R** educe violence by legislative protection
-  **I** mprove services for victims of violence
-  **V** alue norms that protect children
-  **E** ducate and build life skills
-  **S** urveillance to monitor trends and progress



# THRIVES

**T**rainning in parenting for caretakers



|   | Program Name                | Child Age   | Program Descriptions   | Contact Information   |
|---|-----------------------------|-------------|--|---|
| Parenting for Lifelong Health – Evidence-based Programs | Thula Sana                  | 0-2 Years   | 16 home visits pre- and postpartum to encourage responsive interactions between mother and infant. RESULTS: Mothers were more sensitive and less intrusive. Infants were more secure in their attachments to their mothers   | <a href="http://www.savingbrainsinnovation.net/projects/0066-03/#innovation-summary">http://www.savingbrainsinnovation.net/projects/0066-03/#innovation-summary</a> |
|   | Sinovuyo for Young Children | 2-9 Years   | Techniques to improve the parent–child relationship, emotion regulation, and positive behavior management approaches (e.g. praising good behavior & alternatives to harsh discipline).   | <a href="http://cwbsa.org/sinovuyo/kids">http://cwbsa.org/sinovuyo/kids</a>   |
|   | Sinovuyo for Teens          | 10-17 Years | Group-based program with parent, adolescent, and joint parent–adolescent sessions. Sessions include establishing special time for parents and adolescents, specific and immediate praise, dealing with stress and anger, establishing rules and responsibilities and responding to crises. RESULTS: reductions in parents’ use of violent and abusive discipline, and in adolescent rule-breaking and aggressive behavior. | <a href="http://cwbsa.org/sinovuyo/teens">http://cwbsa.org/sinovuyo/teens</a>   |

# Parenting for Lifelong Health



- Non-professional staff, no materials needed
- Free: Creative Commons
- Tested in RCTs



- Thula Sana (pregnancy – 6 months)
- Book sharing (toddlers)
- Sinovuyo Kids (ages 2-9)
- Sinovuyo Teen (ages 10-17)



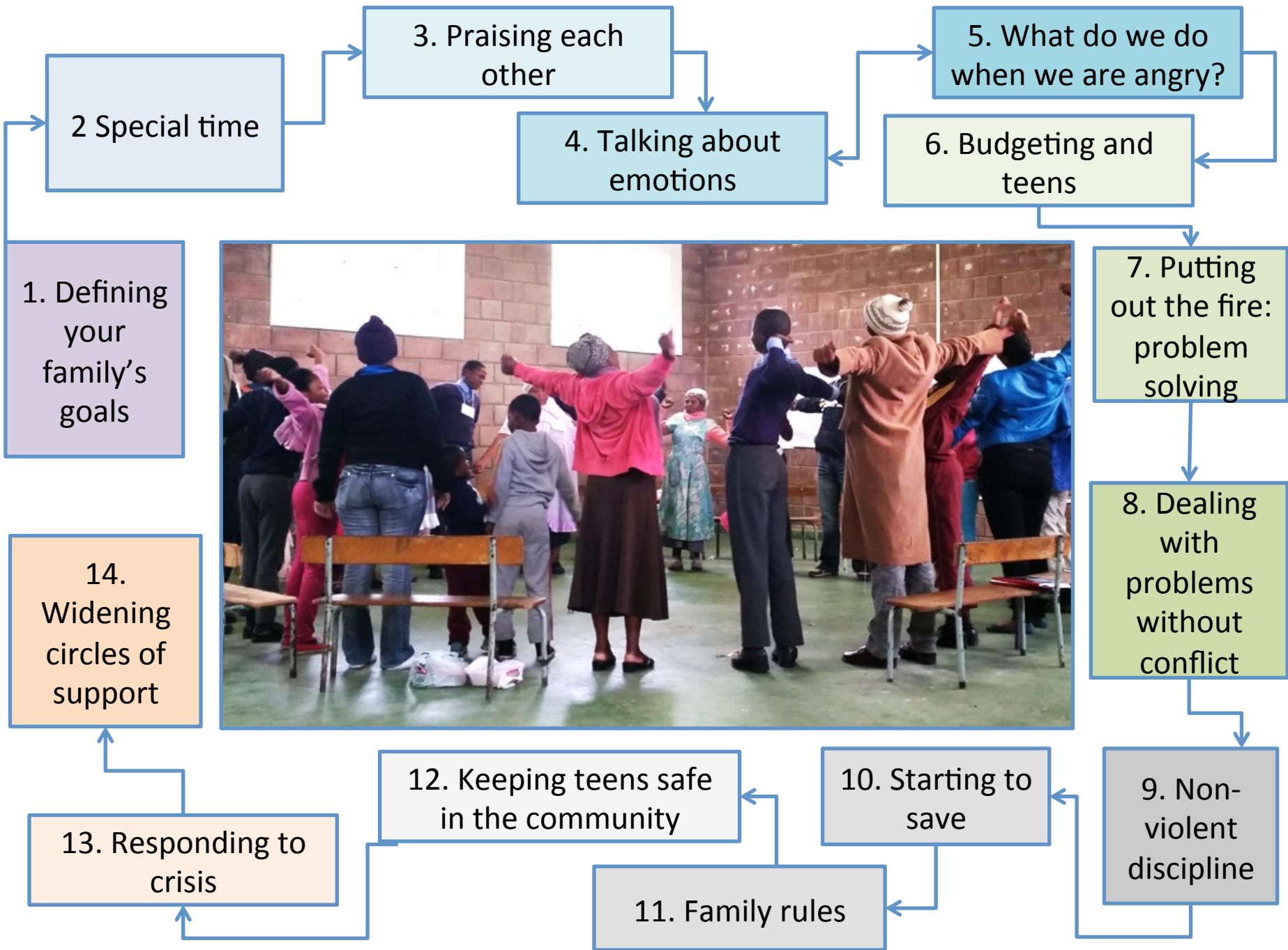
- If successful, scale-up throughout SA and LMIC
- National governments, WHO, UNICEF

Evidence Based Programs

|  |                              |  |  |
|--|------------------------------|--|--|
| <p>Philani Plus (+) Intervention Program</p> | <p>Antenatal to 2 months</p> | <p>Trained mentor mothers visit and deliver antenatal sessions to at-risk mothers in their home once every two weeks for two months. After delivery, mentor mothers visit at risk mothers monthly as needed with the potential to continue until the child is 5 years old.</p> | <p><a href="http://www.philani.org/za">www.philani.org/za</a><br/>+27 (0) 21 387 5124<br/><a href="mailto:info@philani.org.za">info@philani.org.za</a></p> |
| <p>Families Matter! Program</p>              | <p>9-12 Years</p>            | <p>A CDC designed positive parenting program for parents in Africa. 6 weekly 3 hours sessions designed to improve parent-child communication regarding sexuality, including the risk for child sex abuse and gender-based violence.</p>  | <p>Contact: Kim S. Miller, PhD at <a href="mailto:kmiller@cdc.gov">kmiller@cdc.gov</a></p>   |
| <p>REAL Fathers</p>                          |                              | <p>A mentoring program and community awareness campaign for young fathers (16-25 years old) in Northern Uganda to reduce partner violence and harsh punishment of children.</p>  | <p><a href="http://www.irh.org/projects/real-fathers-initiative/">www.irh.org/projects/real-fathers-initiative/</a></p>                                    |

|                            |                            |           |   |   |
|----------------------------|----------------------------|-----------|---|---|
| Evidence-Informed Programs | Care for Child Development | 0-4 Years | Child development intervention that helps health care workers and counselors guide parents/caregivers through cognitive stimulation and social support of young children to enhance their development and strengthen family relationships.  | <a href="http://www.unicef.org/earlychildhood/index_68195.html">http://www.unicef.org/earlychildhood/index_68195.html</a>   |
|                            | The Essential Package      | 0-8 Years | This is not a single, standalone program, but rather an evidence-informed package of essential actions for service providers, policy makers, and program managers to enable caregivers/families to address the needs of vulnerable young children to ensure optimal growth and development. | <a href="http://ovcsupport.net/resource/the-essential-package-holistically-addressing-the-needs-of-young-vulnerable-children-and-their-caregivers-affected-by-hiv-and-aids/">http://ovcsupport.net/resource/the-essential-package-holistically-addressing-the-needs-of-young-vulnerable-children-and-their-caregivers-affected-by-hiv-and-aids/</a> |





# 2014 pre-post test (240 participants)

| <b>Sinovuyo Teens</b>                   | <b>Caregiver report</b>  | <b>Child/teen report</b> |
|---|--------------------------|--------------------------|
| <b>Physical abuse</b>                   | <b>P&lt;.001 t=4.22</b>  | <b>P&lt;.001 t=4.97</b>  |
| <b>Emotional abuse</b>                  | <b>P&lt;.001 t=4.84</b>  | <b>P&lt;.001 t=3.79</b>  |
| <b>Neglect</b>                          | <b>P&lt;.001 t=3.79</b>  | <b>P&lt;.005 t=2.86</b>  |
| <b>Sexual abuse</b>                     | <b>Ns (tiny numbers)</b> | <b>Ns (tiny numbers)</b> |
| <b>Delinquent behavior (adolescent)</b> | <b>P&lt;.001 t=4.89</b>  | <b>P&lt;.001 t=4.32</b>  |

**Effect size: International Child Abuse Screening Tool: .75% reduction (both teen and caregiver report)**

**Significant improvements in secondary outcomes:** caregiver and teen depression; parenting stress; caregiver negative coping strategies (drinking); poor supervision; inconsistent discipline; involved parenting; positive parenting; social support to caregivers; caregiver social support to teens; witnessing violence.

**No effects:** teen drug/alcohol use; teen social support from friends

**Unexpected effects:** dissemination, government involvement

# THRIVES

**T**rainning in parenting for caretakers  
**H**ousehold economic strengthening



# Household Economic Strengthening Interventions

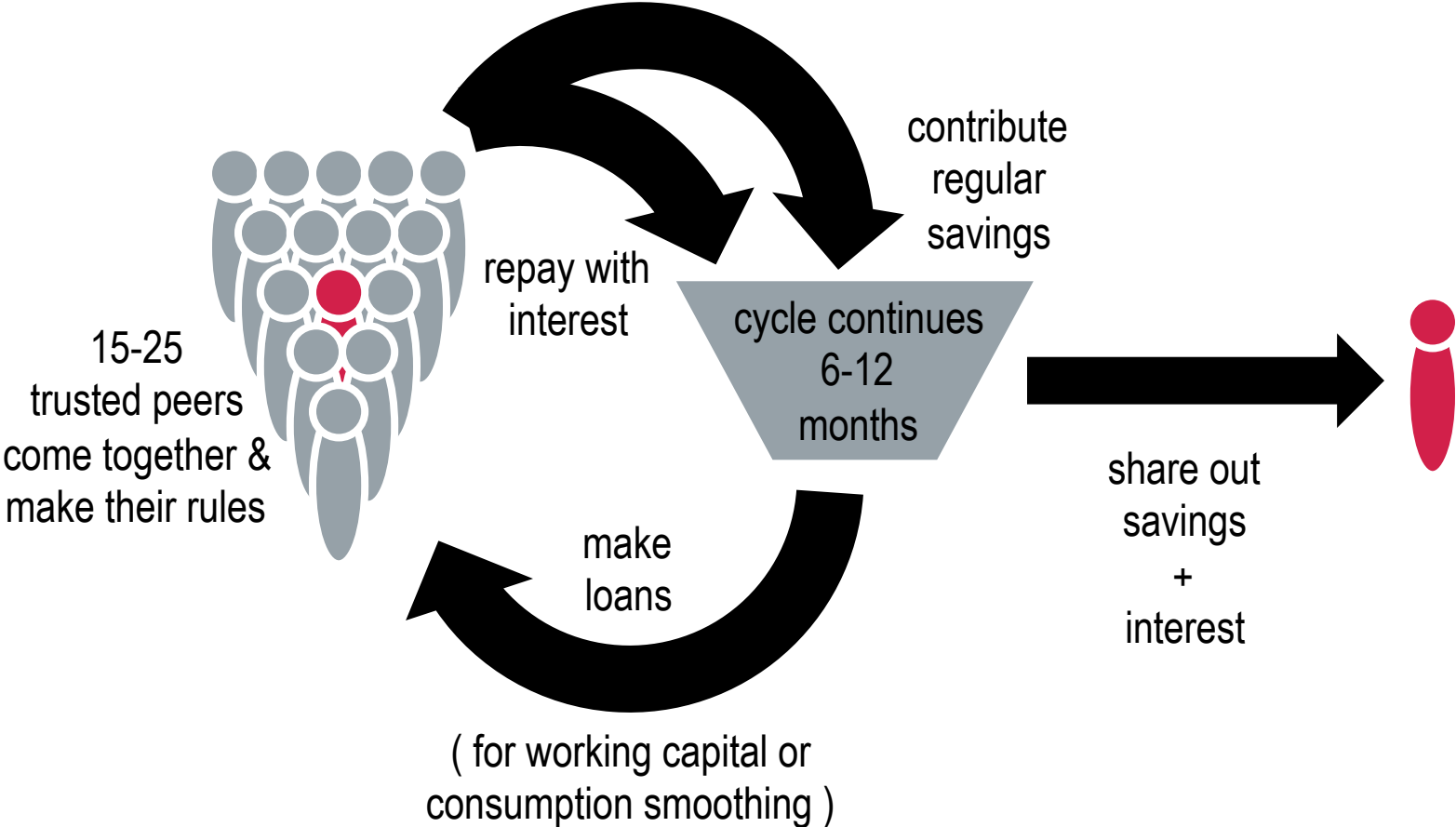


- Combination Socio-Economic Approaches
  - Social protection: E.g. Cash transfers/  
government grant programs, food support,  
educational support
  - Savings Groups & Financial Literacy

# Evidence for Savings Groups

- **Ethnographic evidence that poor people use financial tools** Rutherford 1999 • Collins, Morduch, Rutherford & Ruthven 2009
  - Generating useful lump sums of cash
  - Weathering bad times
  - Funding day-to-day expenses
- **Experimental evidence that access to savings can increase investments in a range of domains**
  - **Agriculture & small business** Duflo, Kremer & Robinson 2010 • Dupas & Robinson 2011a
  - **Health** Dupas & Robinson 2011b
  - **Food security** Gash & Odell 2013
- **Non-experimental evidence suggests HIV-specific impacts** Barber 2011 • Beck 2012 • IMARISHA 2013

# How Savings Groups Work



# Savings Group Resources



## 1. “Savings Groups: What Are They?”

Hugh Allen & David Panetta, SEEP Network, 2010.

<http://www.seepnetwork.org/conference/savings-groups--what-are-they--resources-175.php>

## 2. Guides & Manuals for Savings Groups (including for youth/children)

<http://savings-revolution.org/guides-and-manuals/>

# THRIVES



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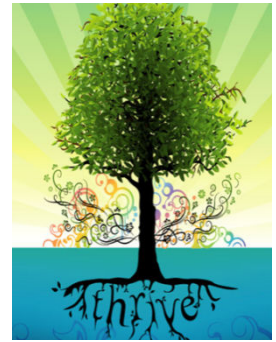
**H**ousehold economic strengthening

**R**educe violence through legislative protections

**Laws:**



# Legislative Protection



- **Legal age of Marriage at 18**
  - UN Women reports that when laws are in place to specify minimum age of marriage, fewer women are married early
  - **Later marriage should decrease risks of physical, sexual, emotional violence at the hands of husbands**
- **Laws pertaining to alcohol**
  - Such laws **regulate hours of sale, price, and number of outlets**
  - **Reduced sales hours and lower outlet densities are associated with reduced violence**
- **Law prohibiting sexual abuse and banning corporal punishment**
  - Most countries have laws prohibiting sexual abuse, though they are often not enforced. For example, though 99% of countries have laws prohibiting statutory rape, only 2/3 enforce them.
  - Nearly all forms of corporal punishment are used less commonly in countries with legal bans.

# THRIVES



**T**Training in parenting for caretakers

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**I**mprove services for victims of violence

# Adolescent/Youth - Friendly Services

## Post Violence Care

- **Trauma-Informed Cognitive Behavioral Therapy**
  - Trained professional or lay workers can help survivors build coping skills and change how they think about their experiences with violence. These short-term interventions consist of multiple sessions
  - **Reduces up to 37% for individual and 56% for group CBT, trauma symptoms among the intervention versus the comparison groups**
- **Case Management (i.e., survivor advocacy)**
  - Trained advocates help survivors obtain community resources (housing, employment, legal assistance, transportation, education, vocational training, child care, health care, material goods, financial assistance)
  - **Decreases recurrence of physical & emotional violence; increases psychological well-being & ability to obtain community resources**
- **Active case identification (i.e., screening) with Linkage to Services**
  - IPV screening paired with services (counseling, home visits, information cards, referrals to community services, and mentoring support)
  - **Reduces partner violence & violence against children**

# THRIVES



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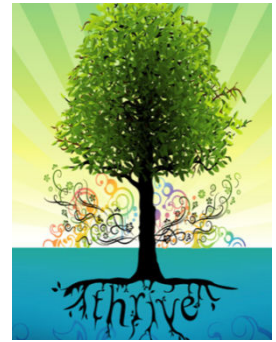
**H**ousehold economic strengthening

**R**educe violence through legislative protections

**I**mprove services for victims of violence

**V**alue norms that protect children

# Community Mobilization & Norms Change



- **SASA!!**
  - Trained community leaders to mobilize a critical mass of community members to change social norms and behaviors
  - **Decreased social acceptance of violence**
- **Yari Dosti**
  - Working with men & boys in the community
  - **Reduced IPV perpetration by 20-30%**
- **Coaching Boys into Men**
  - Working with men & boys in community
  - **Reduced sexual and physical IPV perpetration by 38%**

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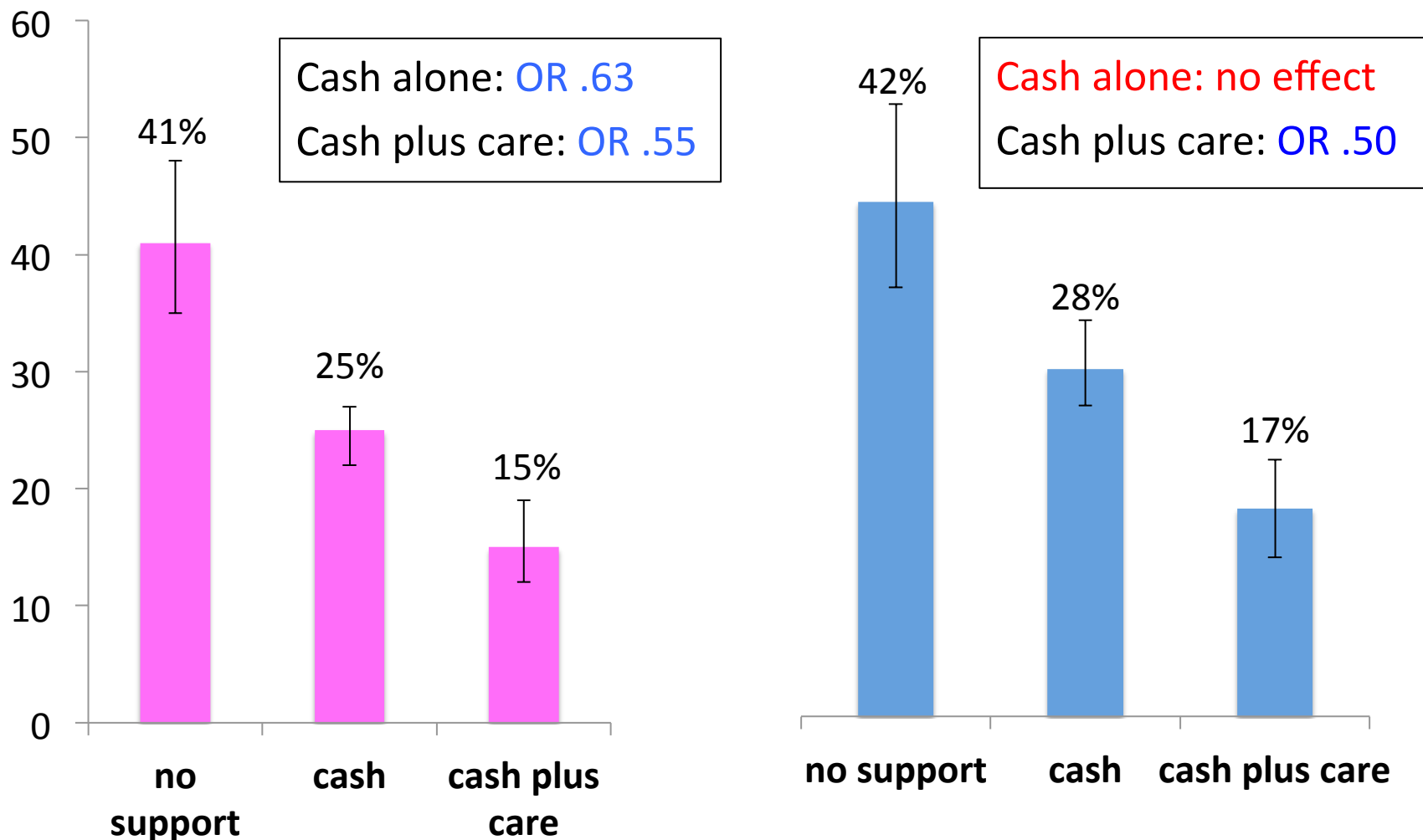
# School Based Interventions



- **IMpower, Positive Action**

- Develop skills to increase girls' empowerment (Impower) through personal awareness, assertive communication, self-efficacy, boundaries, negotiation skills, de-escalation, and physical self-defense; Positive Action is similar, but for girls and boys.
- **Decreases in pregnancy, STIs, number of sexual partners; frequency of sex and unprotected sex; increased condom use; delayed sexual debut; decreases in violence victimization or perpetration of 36%.**

# CASH + CARE: HALVED HIV-RISK BEHAVIOR INCIDENCE



Cluver, Orkin, Boyes, Sherr (2014). *AIDS*. Controlling for: family HIV/AIDS, informal/formal housing, age of child, poverty levels, number of moves of home, baseline HIV risk behaviour



# Changing the Paradigm

**Moving from a Vision of  
Surviving**

**to**

**a Vision of  
Surviving and Thriving**

