

What will it take to end Violence Against Women and Girls in Malawi?

Evidence from Tithetse Nkhanza

This brief presents emerging evidence from research conducted by the *Tithetse Nkhanza* programme in three districts in Malawi on violence against women and girls (VAWG). The research shows that rates of VAWG are significantly higher than the global average. Over half of women and girls reported experiencing intimate partner violence (IPV) in the past year. The research also found that three quarters of adolescent girls experienced sexual harassment, abuse or exploitation in the past year. The COVID-19 outbreak has increased VAWG across the world, leading to a 'secondary' pandemic of violence.¹ Emerging evidence in Malawi shows that existing high levels of violence are escalating, with notable increases in child marriage and teenage pregnancies.² **The brief covers the key highlights and measures needed for both prevention and service provision interventions by Government and other players to effectively combat VAWG.**

Key messages

- With over half of adult women and adolescent girls reporting that they experienced intimate partner violence in the past year, urgent action is needed to prevent and respond to VAWG.
- Gendered social norms are a key root cause of VAWG in Malawi that drive and are used to justify men's use of violence. They also inhibit women and girls from seeking help.
- Witnessing or experiencing violence in childhood increases men's risk of perpetrating IPV in adulthood - tackling domestic violence against women and their children can break intergenerational cycles of violence.
- Some women and girls are at particularly high risk of VAWG due to multiple disadvantages, including young married women, out-of-school girls, and women and girls with disabilities. Women and girls most at risk must be prioritised for accessible support services.
- Tackling VAWG requires breaking down economic, political and social gender inequality in Malawi from the household to the national level, and is everyone's business.
- Gendered social norms can change over time. There are signs that new, more equitable norms are emerging providing crucial entry points and opportunities for change.



Background

The FCDO-funded Malawi Violence against Women and Girls Prevention and Response Programme, known as *Tithetse Nkhanza*, aims to reduce the prevalence of IPV, domestic violence and harmful traditional practices in three districts in Malawi. It also aims to improve the justice system for women and girl survivors of violence. The programme runs over a period of six-years (2018-2025) split into a first and second phase. It is implemented in Karonga in the northern region, Lilongwe in the central region, and Mangochi in the southern region, with a possible scale up to other districts in the second phase of the programme.

The programme combines evidence-based VAWG prevention interventions with strengthening formal and informal response. Interventions are continuously monitored and evaluated to generate lessons on what works to prevent VAWG and improve response services in Malawi. Packages of interventions will be piloted and evaluated, and successful interventions will be scaled up in phase two of the programme (year 4-6).

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responsibility

About the research

Formative research was conducted in July 2019. The study was qualitative and collected data through key informant interviews with community leaders and service providers, workshops with community members, and workshops with survivors. It explored drivers and norms shaping VAWG and survivors' help-seeking in *Tithetse Nkhanza's* target districts. This aimed to inform the design of prevention and response interventions. The study was conducted by researchers from Centre for Social Research (CSR) and Chancellor College, University of Malawi.

Baseline research took place in early 2020 and included a mix of quantitative and qualitative methods. A survey with 2,335 adult women and men, and a survey with 1,845 adolescent girls and boys were conducted to collect relevant baseline data for each *Tithetse Nkhanza* intervention. The research also included a qualitative study to better understand the underlying norms, attitudes and behaviours that contribute to violence arising or prevent help-seeking within the target communities. The research was carried out by an independent evaluation team from Tetra Tech.

Key findings

Prevalence of VAWG

Intimate partner violence (IPV) is the most prevalent form of VAWG across the target districts – over half of women and adolescent girls experienced some type of IPV in the past year by a spouse, a dating partner or other intimate partner.

Emotional violence is the most reported form of IPV, followed by physical violence. Two thirds of women experienced some form of controlling behaviour from an intimate partner in the past 12 months, including being restricted from seeing friends and family.

Harmful traditional practices (HTPs)³ are widespread across all three districts. The practices vary in nature and prevalence,

reflecting Malawi's diverse ethnic composition with different customary practices that affect mainly women and girls.

- 93% of adult women, 81% of out-of-school girls and 67% of in-school girls experienced any of the HTPs measured by the research.
- 31% of women and 21% of out-of-school girls married before age 18. The reported prevalence of early marriage among in-school girls was negligible.

Adolescent girls are also at high risk of sexual harassment, abuse or exploitation. 75% of adolescent girls experienced at least one type of sexual harassment, abuse or exploitation in the past year.

Which women and girls are at increased risk of violence?

Women and girls from all groups and backgrounds are at risk of experiencing violence. However, the research found that some groups are at increased risk due to multiple disadvantages.

- **Out-of-school girls experience higher levels of all forms of IPV than in-school girls.** The most significant difference is for economic IPV. Out-of-school girls also reported higher levels of non-partner sexual violence than in-school girls (78% vs. 73%) as well as higher rates of all forms of HTPs.
- **Women and girls with disabilities are at higher risk of violence than those without disabilities.** 66% of women with disabilities experienced any type of IPV in the last 12 months. Adolescent girls with disabilities were more likely to experience sexual, physical and emotional IPV in the past 12 months than non-disabled peers, including being twice as likely to experience some type of sexual IPV (48% vs. 24% among girls without disabilities).

Drivers of violence

The research found that social norms that dictate expectations on gender roles and behaviours are primary drivers of VAWG.

This includes a widespread belief in male authority over women in marriage. This comes with the expectation that men set the rules and make decisions, while women are expected to obey. This was found to be the case in both patrilineal and matrilineal societies.

The research found that men's perpetration of physical and sexual IPV are often reactions to women resisting **gender norms and expectations**, such as the expectation to always be willing to have sex with husbands.

“For someone who is forcing his wife to have sex, there is nothing bad that can happen to that person because they are in marriage...”

- Female respondent in survivor workshop

As the head of households, **the expectation that men should provide for their families** is strong. However, women are often involved in income generating activities, especially when men are not able to provide financially. The research found mixed views on this – some respondents said that this could be judged negatively by the community as it challenges male authority – while others, particularly younger men, supported this.

Women survivors of violence identified **disagreements related to household finances** as a common trigger of violence, especially if women questioned how resources and income were spent, as this is seen as challenging men's authority. This highlights that social norms and economic drivers of violence are closely connected.

Respondents described that violence related to economic disputes often peaked during times of **lack of income coming into the household**. In rural communities, this would mainly follow seasonal patterns linked to the harvest times. In Lilongwe, the patterns were more related to upturns and downturns in demand for casual labour.

Disagreements between spouses are often exacerbated by **men's misuse of alcohol**. Respondents highlighted that men's alcohol consumption can be linked to the seasonal changes affecting households' economic situation.

Men who had witnessed their mother being beaten by another man during their childhood were more likely to report own violence perpetration in the past 12 months. Men who reported that they had often **experienced violence by a parent/ caregiver as a child** were almost twice as likely to having committed IPV than men who had never experienced childhood violence.

Justifications and acceptability of VAWG

Social norms surrounding gender roles, marriage and family are used to justify various forms of VAWG. The research found that:

- **Justifications of physical IPV** include if a woman challenges male authority, and if a woman does not fulfil her expected duties as a wife and mother.
- **Justifications of sexual IPV (including marital rape)** include if a woman refuses to have sex with her partner. This is especially the case if the man has paid bride price (Lobola), as this is seen to increase men's 'ownership' over women.

The research found that sexual IPV is widely accepted and not recognised as violence in the first place. However, non-partner sexual violence was condemned by most respondents.

Women and men of all ages recognised "light beating" (beating which did not leave blood or broken bones) as violence but it was still widely accepted by respondents.

Help-seeking behaviour

Most women and girls are not accessing support services after experiencing violence. The research found that only one in five adult women who had experienced any type of violence sought help from an institution or individual.

Fewer than one in five adolescent girls reported seeking help from any type of institution following an incident of violence.

However, about three in four girls reported **approaching a neighbour** for help.

Among women who sought help, two-thirds turned to someone in their social circle.

Fewer women approached formal or informal institutions, such as traditional leaders and the police. Only 1% approached the formal justice system.

Barriers to accessing support

Women largely do not consider themselves in need of support after experiencing violence. 31% of adult survivors of VAWG stated that they had not needed any services as the main reason for not seeking help, and 16% stated that the violence was not a problem. Women also reported that distance and cost prevented them from accessing services. This was particularly the case in rural areas, where survivors may need to travel for hours to reach the police, medical services, or a Community Victim Support Unit.

Adult women survivors were more likely to seek help if they had worked for money in the past three months than if they had not, suggesting that women's economic independence may contribute to more health seeking behaviour.

Adolescent girl survivors of VAWG lack information about existing support services. More than a quarter stated not knowing where to go as the main barrier preventing them from seeking support. Girls also highlighted that they had not wanted or needed services, that seeking help was "useless", and fear of getting into trouble as reasons for not seeking support.

Similar norms that underpin the perpetration of VAWG are at times reinforced by the people or institutions that survivors approach for help. The research found that marriage counsellors and traditional leaders/chiefs often advise women to endure in a relationship even if it is abusive. Community norms around whether women are expected to persist in an abusive relationship or not varied by district.

Conclusions

The findings provide insights into the lived realities of many women and girls in Malawi where VAWG is concerned, shaped by social norms and patriarchal practices that render women and girls disempowered and often socially and economically inferior to men and boys. These social norms both drive and are used to justify men's use of violence. **Tackling the multiple drivers of VAWG is critical**, and means breaking down economic, political and social gender inequality in Malawi from the household to the national level.

Breaking the intergenerational cycle of violence, by reducing children's experience of and exposure to domestic violence, will be critical for preventing VAWG in the long term.

While the research findings highlight significant challenges related to rigid gender roles, acceptance of VAWG, and other social norms that reinforce men's control over women, **there were signs that social norms can change**. Respondents recognised that new, more equitable norms are emerging, some forms of

VAWG are strongly condemned, and most women and men, girls and boys, agree that VAWG survivors should seek support. These signs provide crucial entry points and opportunities for change.

Regional variations in the prevalence of some forms of VAWG and in norms surrounding women's and girls' help-seeking highlight **the importance of contextual understanding** of violence and social norms. Policies and programmes to reduce VAWG and address barriers that prevent survivors from accessing support and justice must be based on detailed analysis and tailored to the context.

The findings reveal extremely **high levels of violence against adolescent girls**, at the same time, it shows that few girls who experience violence access formal response services. Furthermore, **women and girls with disabilities, and out-of-school girls experience multiple inequalities** and are therefore at increased risk of VAWG.

Recommendations for addressing VAWG in Malawi



The research confirms that VAWG remains endemic in Malawi, with widespread and long-term consequences for women and girls as well as for society as a whole. With over half of adult women and adolescent girls reporting that they experienced IPV in the past year – **the time to act to end VAWG is now!**

All sectors of society - individuals, communities, informal VAWG service providers, civil society, private companies, government, multilateral institutions and donors - have critical roles to play.

(i) Government, civil society organisations (CSOs) and donors should prioritise work on strengthening and improving formal VAWG response services so that they are accessible, accountable and responsive and able to respond appropriately to those most at risk of VAWG, including support for women with disabilities and for adolescent girls. This requires addressing multiple barriers to access such as long distances to services, cost of transport, coordination and lack of information about services.

(ii) Government, CSOs and donors should take into account the pivotal role of informal support systems in VAWG response and prioritise this in VAWG programming, including through:

- Strengthening capacities of informal VAWG service providers e.g. CVSUs and Traditional leadership.
- Improving linkages between informal support in the communities and access to formal response and services, e.g. through establishing and strengthening multi-sectoral referral mechanisms.
- Tackling discriminatory social norms and attitudes on the part of communities, service providers and institutions who provide informal support, through long-term gender transformative training and community mobilisation targeting behaviour change.

(iii) Implementers of VAWG programmes e.g. international NGOs and private companies should work with women's rights organisations (WROs) and the justice sector to understand and address

barriers to women's and girls' access to justice, including involving WROs in assessments, and developing, implementing, monitoring and evaluating VAWG programmes.

(iv) Government and CSOs should create synergies between policy efforts to prevent violence against children (VAC) and VAWG, in recognition of the interconnections between them, and particularly the intergenerational risk factors.

(v) Government, donors and CSOs should put deliberate focus on women and girls with disabilities, out-of-school girls and other marginalised women and girls in programming efforts to prevent VAWG and advance gender equality, and provide opportunities for their broader inclusion and empowerment in society. This includes supporting out-of-school girls holistically, including through both formal and informal education opportunities, as being out-of-school is significantly associated with greater risk of experiencing VAWG.

(vi) Government should lead in mainstreaming VAWG prevention and response in the national response plan to COVID-19 and maintain VAWG as a priority in the recovery phase, ensuring sufficient support and national guidelines are in place for VAWG service providers and first responders who may come in contact with VAWG survivors, as well as harnessing the capacities of the VAWG institutions and mechanisms in the pandemic response.

(vii) Government should improve enforcement of laws and policies that contribute to achieving gender equality and responding to VAWG particularly in marginalised communities; and eliminate laws, policies, and practices, including early and child marriages and other HTPs.

(viii) Government, donors and CSOs should intensify investment in women's economic empowerment programmes with the explicit goal of contributing to VAWG prevention, including access to productive resources, such as credit, infrastructure, skills, and technology.

What comes next?

The *Tithetse Nkhanza* programme interventions are being rigorously evaluated to test the effectiveness of prevention and response interventions at the community level. The programme is committed to sharing the evaluation results widely to contribute to the evidence base on VAWG prevention and response within Malawi and globally, as well as documenting and sharing implementation lessons throughout the lifetime of the programme. Please get in touch in relation to any of the research findings and recommendations in this brief, and follow our progress on Twitter.

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The Time is
now

About this brief

This brief was produced by the *Tithetse Nkhanza* programme, funded by UK Aid. To further discuss the findings and messages in the brief please contact:

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Endnotes

1. UN Women (2020) *COVID-19 and Ending Violence Against Women and Girls*
2. Ministry of Gender, Community Development and Social Welfare (2020), *Presentation of Report on Rapid Assessment on Ending Child Marriage and Teen Pregnancies*
3. Malawi's Gender Equality Act of 2013 defines 'harmful practice' as "a social, cultural, or religious practice which, on account of sex, gender or marital status, does or is likely to a) undermine the dignity, health or liberty of any person; or b) result in physical, emotional, or psychological harm to any person". There are multiple harmful practices in Malawi that are carried out as traditional rites and that disproportionately affect women and girls. The harmful traditional practices measured by the baseline and formative research comprised sexual practice as a traditional rite of passage, sexual instruction as a traditional rite, wife inheritance and child marriage.

