

QUANTITATIVE EVALUATION OF *PLANIM SAVE KAMAP STRONGPELA* INTERVENTION TO PREVENT GENDER BASED VIOLENCE AND BUILD PEACE IN BOUGAINVILLE, PAPUA NEW GUINEA

*Findings from the quantitative evaluation showed that the *Planim Save Kamap Strongpela* (Plant Knowledge, Grow Strong) intervention shows promise in significantly reducing physical intimate partner violence perpetration by men and emotional, physical, and sexual intimate partner violence victimization experiences among women. Further, significantly more men and women increased their awareness of locally available support services for GBV survivors.*

BACKGROUND

Violence against women is a worldwide public health and human rights problem. The Family Health and Safety Study¹ conducted in the Autonomous Region of Bougainville, Papua New Guinea (PNG), as part of the UN Multi-country Study on Men and Violence in Asia and the Pacific found that 85 per cent of men had perpetrated physical, sexual or frequent emotional or economic violence against a partner in their lifetimes. 40 per cent of men also reported having raped a woman who was not their partner. The findings of this and other studies indicate extremely high levels

of violence that men perpetrate against women in Bougainville, suggesting an urgent need for effective interventions informed by patterns and risk factors for violence perpetration as well as local culture and history.

The Nazareth Centre for Rehabilitation (NCFR) in consultation with stakeholders developed the *Planim Save Kamap Strongpela* intervention. This is an innovative four-module intervention that addresses gender-based violence; gender and human rights; trauma and healing; and peace-building through the format of community conversations. The implementation of this intervention in two districts of South Bougainville was supported by UN Women PNG; the monitoring and evaluation was supported by Partners for Prevention, UN Women PNG and the PNG Institute of Medical Research.

The evaluation study sought to investigate the experiences of participants through a multi-method study with intervention participants. The quantitative aspect of the study is reported here; the qualitative aspect of the evaluation study conducted by the PNG Institute of Medical Research is described in a separate report.²



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Objectives

The study investigated the following outcomes among intervention participants:

- Men's and women's gender equity attitudes
- Men's perpetration of violence against women in the past 12 months
- Women's experiences of violence against women victimization in the past 12 months
- Men's and women's awareness of violence against women services
- Men's and women's symptoms of depression

METHODS

The study used a pre-test post-test design that only allowed for comparison within groups between the baseline (pre-intervention) and the endline (immediately following the intervention, 12 months after the baseline). The intervention was implemented over a period of 12 months. It was non-experimental and recruitment was dictated by the implementing partner's operational plans so generalizing conclusions to the population is limited.

NCFR recruited community members from villages in the implementation area for the intervention and these participants were eligible to participate in the study. All the study participants were age 18 years and older. Participation in the study was voluntary with all respondents providing written informed consent prior to participation. Respondents' identities were not linked to any of



their responses ensuring confidentiality. The self-administered questionnaire – available in Tok Pisin³ and English – was completed in a group setting (data collection sessions) with each respondent completing their own questionnaire on a specially designed audio-enhanced application on a tablet device (an iPod Touch).

ANOVA analyses were conducted to assess change between baseline and endline measures. Data from male and female respondents were analysed separately.

Ethical clearance for this study was granted by the Papua New Guinea Institute for Medical Research Institutional Review Board and the Medical Research Advisory Committee of the National Department of Health of the Government of Papua New Guinea. The *Planim Save Kamap Strongpela* project was approved by the Autonomous Bougainville Government.



RESULTS

The intervention participants included 716 men and 814 women; 705 men and 750 women were enrolled into the study at baseline. The non-probability sample of matched baseline and endline cases analysed for this study included 344 men and 407 women.

Gender equitable attitudes: There were no significant changes in gender attitudes between baseline and endline among women or men.

Intimate partner violence and non-partner rape perpetration in the past 12 months: Overall, the proportion of men reporting physical intimate partner violence perpetration decreased significantly between baseline (58%) and endline (48%, $p=0.01$). There were no significant changes in their reporting of emotional, economic or sexual intimate partner violence or non-partner rape perpetration between baseline and endline.

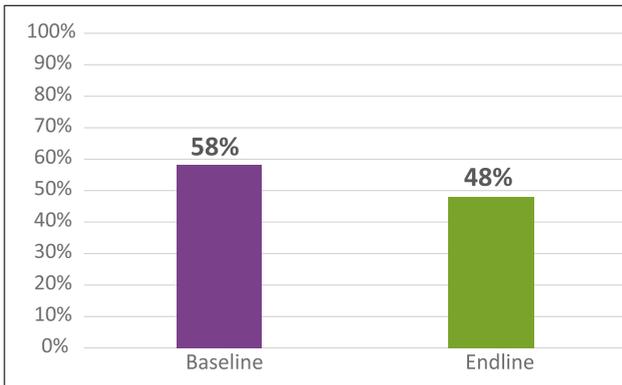


Figure 1. Physical intimate partner violence perpetration



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Intimate partner violence and non-partner rape victimization in the past 12 months: Overall, women reported significantly lower intimate partner violence victimization at the endline compared to the baseline for all types of violence: emotional (86% vs 80%, $p=0.02$), economic (78% vs 68%, $p<0.01$), physical (75% vs 58%, $p<0.01$), and sexual (65% vs 52%, ($p<0.01$). There was no significant change in women’s reporting of non-partner rape victimization between baseline and endline.

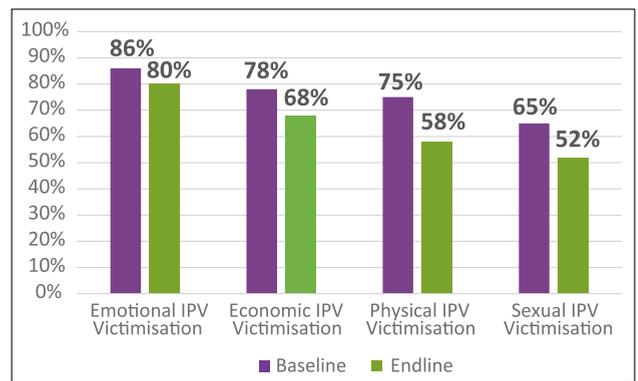


Figure 2. Intimate partner violence victimization

Awareness of services for violence against women: The proportions of both men and women who were aware of available services for survivors of violence against women significantly increased between baseline (69% of men; 65% of women) and endline (77% of men, $p=0.02$; 81% of women, $p<0.01$).

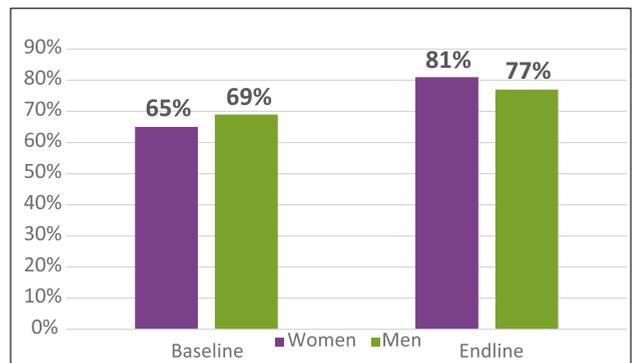


Figure 3. Proportion of women and men reporting awareness of violence against women services

Depression: Among men and women, there was no significant change in the proportion reporting significant symptoms of depression between baseline and endline.

LIMITATIONS

Owing to the limited timeframe for project implementation, and funding and capacity restraints, a non-experimental evaluation design was chosen for this pilot study. The lack of a control group limits the ability to attribute findings solely to the intervention. The lack of randomization limits the generalizability of the findings. Challenges with recruitment into the intervention and into the study at baseline resulted in levels of participation that were lower than expected. This was exacerbated by high levels of attrition of participants in the study, primarily due to the relocation of participants, non-participation in the intervention, and unexplained loss to follow-up. Nevertheless, this study is valuable to document the experiences of intervention participants. It indicates that the intervention shows promise and warrants further investigation and evaluation.



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CONCLUSIONS

It is very encouraging to see the significant positive changes between baseline and endline measures on physical intimate partner violence perpetration; emotional, economic, physical and sexual intimate partner violence victimization; and men's and women's awareness of support services for violence against women. In addition, the qualitative endline study showed very positive behavioural and attitudinal changes among respondents. Several findings are useful to inform strengthening the intervention and its implementation. An experimental study with longer-term follow-up is recommended to strengthen the local and international evidence base and determine the effectiveness of this intervention. The findings of this study suggest that the *Planim Save Kamap Strongpela* intervention shows great promise in making relationships, homes, and communities in the South Bougainville safer and less violent.

Stanley, Planim Save Kamap Strongpela facilitator

"I am an ex-combatant. In the past, I quarrelled with my wife every week. After I returned from Planim Save Kamap Strongpela facilitator training, I shared with my wife what I learned and we agreed to change our behaviour. Our first priority is now to educate our children. My son now respects my wife and I. My wife listens to me and is not worried when I go out with my friends since I no longer drink. I show her my money and we save together. I am trying hard to contribute to my community in preparation for the Bougainville referendum on independence in 2019."

- ¹ Jewkes, R., Fulu, E. & Sikweyiya, Y. 2015. Family Health and Safety Study: Autonomous Region of Bougainville, Papua New Guinea. Summary report by Partners for Prevention: Bangkok, Thailand. Available from <http://www.partners4prevention.org/about-prevention/research/men-and-violence-study/papua-new-guinea>
- ² Kelly-Hanku, A., Mek, A., & Nake Trumb, R.N. 2017. Planim Save Kamap Strongpela: A Qualitative Evaluation of an Intervention to build peace and reduce gender-based violence in South Bougainville, Papua New Guinea. UN Women, Papua New Guinea.
- ³ Tok Pisin is the national language of Papua New Guinea and is the most commonly spoken language. It was developed from a mixture of languages. There are multiple dialects of Tok Pisin and not everyone speaks and understands every dialect well.