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SELECT GENDER BASED VIOLENCE LITERATURE REVIEWS

VILLAGE SAVINGS AND LOAN ASSOCIATIONS AND INTIMATE PARTNER VIOLENCE

Contract No. GS-10F-0033M / Order No. 7200AA18M00016, Tasking N008

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(APRIL 2020)

Prepared under Contract No. GS-I0F-0033M Order No. 7200AAI8M00016, Tasking N008

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TABLE OF CONTENTS

ACRONYMS	ii
INTRODUCTION	i
PREVENTING IPV: WHAT WORKS?	2
VILLAGE SAVINGS AND LOAN ASSOCIATIONS	4
VSLA AND MICROFINANCE PROGRAMS: THE EVIDENCE OF IMPACTS ON POVERTY	5
THE EVIDENCE ON VSLA CONTRIBUTIONS TO REDUCING IPV	6
THE IMPACT OF MICROFINANCE AND VSLA INTERVENTIONS ON IPV	8
LESSONS LEARNED	10
THE IMPORTANCE OF VAW-PREVENTION COMPONENTS IN INTERVENTIONS	10
SHORT-LIVED PROGRAMS ARE NOT ENOUGH TO REDUCE EXPOSURE TO IPV	14
INVOLVING MEN IN VSLA-RELATED TRAINING COMPONENTS IS CRITICAL	14
CONCLUSIONS AND RECOMMENDATIONS	15
ANNEX A. SOURCES OF INFORMATION	16

LIST OF TABLES

Table 1.	IPV Risk Factors	2
Table 2.	Summary of Evidence for Different Types of Interventions to Prevent VAW	3
Table 3.	Summary of Impact of VSLA-only Interventions on IPV	9
Table 4.	Summary of Evidence on the Results on IPV of Combining VSLA and Gender-Based Training Interventions	13

LIST OF FIGURES

Figure 1.	The Mechanisms behind the Impact of Women’s Participation in VSLAs on IPV	7
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ACRONYMS

GBV	Gender-Based Violence
IPV	Intimate Partner Violence
LGBTQ	Lesbian, Gay, Bisexual, Transgender and Queer
NGO	Non-governmental Organization
NORC	National Opinion Research Center at the University of Chicago
PAHO	Pan American Health Organization
ROSCA	Rotating Savings and Credit Associations
USAID	United States Agency for International Development
VAWG	Violence against Women and Girls
VSLA	Village Savings and Loan Associations
WASH	Water, Sanitation and Hygiene
WHO	World Health Organization

INTRODUCTION

Violence against women and girls (VAWG) is a flagrant violation of human rights and affects at least a billion women worldwide, according to the United Nations (2018). The World Health Organization (WHO) estimates that one in every three women in the world will be beaten, raped, or otherwise abused during her lifetime. Violence against women, occurring in nearly every region of the world, is not only a public health problem, however. It is also a barrier to social justice, peace, and economic development. VAW costs some countries as much as 3.7 percent in GDP due to costs of services such as health care and policing and days of work and salary lost to incidents of intimate partner violence suffered by women (World Bank 2019¹). Thus, if only from an economic perspective, it is vital to understand and address what drives VAW.

The form of violence we most often associate with VAW is intimate partner/domestic violence (IPV). Also a global phenomenon, IPV is the form of violence against women for which there are the most statistics, although in many contexts numbers are still unreliable or gathered inconsistently. International surveys show that at least one of every three women in intimate relationships has experienced violence from her partner (WHO 2013). In low-income countries, this figure can be as high as 60 percent. Even more startling, intimate partner violence frequently ends in femicide: research estimates that 58 per cent of female victims of murder were killed by an intimate partner or member of their own family.²

The impact of intimate partner violence does not only reach individual victims, but also households, communities, and countries. Violence against women and girls does not have a singular cause, but emerges from multiple interacting factors at different levels of the social “ecology”, defined as the study of the relation between the human being and the settings and contexts in which the person is actively involved (Heise 1998). Various economic interventions attempt to address the root causes of VAW through transforming the status of women or tackling gender-equity norms and lack of economic opportunity for women, but we still have limited knowledge on what works best.

Against this backdrop, this literature review summarizes studies analyzing the impact of economic interventions on the prevention of intimate partner violence against women.³ This paper includes a brief description of the risk factors associated with IPV and policies that can contribute to its prevention or elimination, with a focus on microfinance and village savings and loan association (VSLA) interventions. Because VSLA is a popular mechanism for enhancing women’s empowerment and thus reducing IPV, we describe the logic of the VSLA model, discuss what we know about VSLA interventions in terms of their impacts on poverty and women’s empowerment, turn our focus to how VSLA interventions might affect IPV, and consider the evidence of VSLA impacts. Finally, the review attempts to identify, from the scarce evidence available, lessons learned from the evaluations of VSLA interventions to prevent intimate partner violence against women around the world. The evidence base suggests that despite the popularity of VSLAs, their measurable impact on IPV, while promising, is minimal.

¹ <https://www.worldbank.org/en/topic/socialdevelopment/brief/violence-against-women-and-girls>

² <https://www.unwomen.org/en/news/stories/2019/11/statement-un-women-confronting-femicide-reality-of-intimate-partner-violence>

³ This summary represents an overview of reviews and online searches of main academic databases and grey literature from the websites of bilateral and multilateral donors, other international agencies, international NGOs, and research institutes. It does not follow a systematic review design and does not pretend to be exhaustive.

PREVENTING IPV: WHAT WORKS?

Several interdisciplinary studies using different methodologies suggest that VAW in general and IPV in particular, emerge from multiple interacting factors at different levels of the social ‘ecology’ (Heise 1998). Multiple factors range from the particular (personality profile, relationship dynamics, household and community structures) to the general (macro forces that shape prevailing norms, access to resources, and the relative standing of men versus women). Among the risk factors associated with IPV are deprivations such as unemployment and low income, being part of a minority group, being in late adolescence or young adulthood, and being involved with aggressive peers. On the other hand, being married, being of older age, and having social support lowers the risk of IPV (Capaldi et al. 2012).

There are different risk factors for men becoming perpetrators of IPV and for women and girls becoming victims of IPV. Those are outlined in Table 1, below:

Table 1. IPV Risk Factors

	RISK FACTORS FOR MALE PERPETRATION	RISK FACTORS FOR FEMALE VICTIMIZATION
Individual-Level	Low income	Young age
	Low education	Low education
	Being a victim of sexual or physical abuse or witness to it at home as a child	Separated or divorced marital status
	Antisocial personality	Exposure to sexual violence as a child
	Harmful use of alcohol and drugs	Depression
	Acceptance of violence	Harmful use of alcohol or drugs Acceptance of violence
Relationship-Level	Infidelity	
	Low resistance to peer pressure	

Poverty and weak sanctions at the community level, and traditional gender norms and social norms supportive of violence at the societal level, are common to both perpetration and victimization (WHO and London School of Hygiene and Tropical Medicine 2010).

Interventions with the potential to reduce the risks of VAW are complex and varied. A few reviews (Arango et al. 2014) helped us organize the available evidence. In general, these reviews find that many “promising approaches” for violence prevention have been identified. Knowledge of what works to prevent violence, however, is still limited by several factors: a poor understanding of contributing factors; an overemphasis on single-factor solutions; rigor and quality of evaluation approaches and methodologies; lack of external validity of evaluation results; and a lack of experimental and quasi-experimental evaluations in research (Bott et al. 2005).

Fulu and Kerr-Wilson (2015) wrote a literature review for the “What Works to Prevent Violence” program, which seeks to prevent VAW.⁴ The review summarized the impact of VAW prevention

⁴ What Works to Prevent Violence against Women and Girls is an innovative global program working in 13 countries across the world building the evidence base on What Works to prevent violence in low-middle income settings. <https://www.whatworks.co.za/about/about-what-works>

interventions, assessing 244 studies, including 24 systematic reviews and meta-reviews covering studies in over 70 countries. According to the Fulu Kerr-Wilson, successful strategies to reduce VAW, other than microfinance interventions, include relationship-level interventions, men’s and boys’ group education with community outreach, and community mobilization aiming to change social norms. Alcohol reduction programs and social-empowerment interventions with vulnerable groups show some promising results but lack enough evidence (statistical robustness) to consider them as effective at reducing VAW. The authors categorize different kinds of VAW-reduction interventions by their impact and the amount of supporting evidence (see Table I, below). Interventions that seem not to work or have conflicting results include single-component communications campaigns; Water, Sanitation, and Hygiene (WASH) interventions in schools; curriculum-based interventions in schools; and bystander interventions.

Table 2. Summary of Evidence for Different Types of Interventions to Prevent VAW

		SUFFICIENT EVIDENCE	INSUFFICIENT EVIDENCE
IMPACT OF INTERVENTION	EFFECTIVE (IMPACT ON VAW)	<ul style="list-style-type: none"> - Microfinance programs - Interventions to address traditional gender roles - Relationship-level interventions - Group education with community outreach (men/boys) - Community mobilization - changing social norms 	<ul style="list-style-type: none"> - Social-empowerment interventions with vulnerable groups - Alcohol reduction programs (limited evidence from low- and middle-income countries)
	PROMISING (IMPACT ON RISK FACTORS ONLY)	<ul style="list-style-type: none"> - Parenting programs 	<ul style="list-style-type: none"> - Whole-school interventions
	CONFLICTING	<ul style="list-style-type: none"> - Bystander interventions 	<ul style="list-style-type: none"> - Curriculum-based interventions in schools
	INEFFECTIVE		<ul style="list-style-type: none"> - Single component communication campaigns - WASH interventions in schools

Source: Fulu & Kerr-Wilson 2015; author’s elaboration

Another systematic review on what works for prevention of VAW finds promising evidence in low- and middle-income countries on the effect of group training for both women and men, community mobilization interventions, and training interventions for women combined with livelihood activities support (Ellsberg et al. 2015). Some of the studies showed potential benefits from integrating violence-prevention into existing development platforms such as microfinance, social protection, education, and health-sector programming, which could allow scalability.

Several studies also examine the effectiveness of IPV prevention programs. School and community programs aiming to reduce dating violence have proven success in preventing IPV among adolescents (Lundgren & Amin 2015), (WHO and London School of Hygiene and Tropical Medicine 2010). The “Safe Dates” intervention model in the United States has been successful in reducing adolescent

dating violence; it combines a school- and community-based approach (Whitaker et al. 2013). Additionally, community-based interventions targeting only boys, or both boys and girls to teach gender equality, have had successful results (Lundgren & Amin 2015).

In low- and middle-income countries, on the other hand, evidence shows that economic interventions such as cash transfers reduce IPV. After their quantitative and qualitative literature review on the matter, Buller et al. (2018) propose that the reduction in IPV due to cash transfers is mainly caused by improvements in women's economic security and wellbeing. They also find ambiguous effects of interventions aimed at women's empowerment such as those addressing intra-household conflicts, because both types of interventions are subject to contextual social norms. In patriarchal settings, a shift in household dynamics can trigger violent responses.

Bourey et al. (2015) find that structural interventions have potential to reduce IPV in low- and middle-income countries because they seek to change disparities at the broadest level of social ecology, whether in the economic, social, legal, or physical spheres. Promising economic interventions include microfinance and cash transfers, which have resulted in women's improved economic wellbeing and reduced "controlling behaviors" from male partners. Social interventions include participatory learning, community mobilization, and multimedia public education; they have a demonstrated impact on IPV reduction and enhance the quality of couples' relationships. Interventions that combine an economic and social approach show the already described effects plus other positive outcomes such as improved economic wellbeing, enhanced relationship quality, personal empowerment, or social capital (group involvement activities or community cohesion) (Bourey et al. 2015).

While specific interventions are easy to measure and assess, multi-sectorial, multi-level, and multi-component actions that address long-term IPV reduction are more difficult to evaluate. Among the many strategies suggested by the WHO and PAHO (2012) are the reform of civil and criminal legal frameworks, strengthening women's civil rights, promoting social and economic empowerment of women, and instituting comprehensive service responses for IPV survivors.

Finally, some IPV issues still need further study. Dickens et al. (2019), who mapped evidence gaps in IPV prevention, recommend the importance of more studies evaluating effects in male attitudes and gendered social norms as outcomes, disaggregating results by sex, and including vulnerable populations (particularly LGBTQ). They also note the lack of studies that clarify how income-generation interventions such as cash-transfer or asset-transfer programs affect IPV. Tol et al. (2019) also ask for further studies on how mental-health treatments can help reduce IPV in low- and middle-income countries.

VILLAGE SAVINGS AND LOAN ASSOCIATIONS

Village Savings and Loan Associations (VSLAs) are some of the most popular models that provide financial services to the rural populace. Microfinance institutions typically serve owners of established enterprises, mainly found in urban areas, where lending is profitable. However, the rural poor are challenged by a limited demand for credit and high delivery costs. As a result, it is hard to service this market without subsidy or exploitative interest rates (Ksoll, et al. 2016). A VSLA is a self-managed and self-capitalized microfinance mechanism that offers savings, insurance, and credit services in markets outside the reach of formal institutions. The model has spread to at least 75 countries in Africa, Asia and Latin America, with over 17 million active participants worldwide (van Rooyen, et al., 2012).

VSLAs are a form of microfinance services for the mostly rural poor that are often offered by NGOs and promote informal savings-led groups that emulate the informal associations known as Rotating Savings and Credit Associations (ROSCAs) that are indigenous to many societies. VSLAs work with groups of 15 to 25 people. First, the VSLAs and groups establish rules, such as meeting frequency and the prices and quantities of shares that members can buy. Money saved goes to a loan fund; members can borrow from the fund at a low interest rate. VSLAs usually have a social fund for insurance or expenses for the group as a whole. They also work as a safety net for their members. The activities of the VSLA group run in cycles, usually of one year, after which the accumulated savings and the loan profits are distributed back to members. When the VSLA cycle is over, savings are repaid and the earnings shared. Promoters of VSLAs include non-government organizations with experience in microfinance, including CARE, World Vision, and Women in Action. Studies of VSLAs around the world find that:

- Women comprise 78 percent of the membership;
- Repayment rates are the highest in the microfinance industry; and
- 89 percent of groups continue to operate more than five years after receiving training, on average doubling their capitalization and average loan sizes.

The VSLA model reduces poverty by integrating means for mostly women to take out loans and set aside savings in their everyday lives. As a development mechanism that provides loans to poor households for income generation, it has been promoted principally to reduce poverty, empower participants, and improve health (child mortality, nutrition, immunization coverage, and contraceptive use). In addition to providing economic benefits, VSLAs may be an effective vehicle for women's empowerment, as newly acquired business skills may be accompanied by improvements in self-esteem and self-confidence, the ability to resolve conflicts, household-decision-making power, and expanded social networks. Thus, in the last few decades, development-focused NGOs have encouraged microcredit in general, and VSLAs in particular, as tools to alleviate global poverty, increase female empowerment, and contribute to gender equality. However, questions remain, do VSLAs truly achieve these goals? In addition, even if they do, do VSLAs have a measurable effect on IPV?

VSLA AND MICROFINANCE PROGRAMS: THE EVIDENCE OF IMPACTS ON POVERTY

The expected positive welfare and empowerment impacts of microfinance for women has come under intense scrutiny in recent years. After the international development community's initial fascination with the impacts of microfinance on the lives of the poor faded, some studies based on robust evidence revealed no clear positive impacts. In 2011, for instance, experimental evidence from three randomized impact evaluations suggested that increasing the poor's access to credit does not generate the expected impressive welfare effects, although it appears to help households reprioritize their expenditures and smooth their spending patterns (Bauchet et al. 2011). Moreover, results were modest and considered valid only in some cases and under specific conditions.

Further, the results of these experimental and more rigorous evaluations find little if any evidence of impact on female empowerment (Banerjee et al. 2015); (Karlan & Zinman 2009); (Crépon et al. 2015). Similarly, according to a 2011 systematic review (Duvendack et al. 2011), only a few experimental evaluations find that increased credit has an impact on wellbeing, and most of the well-known studies that claim to have found positive impacts on women's status suffer from methodological weaknesses. Studies have shown that, at best, microfinance has had a modestly positive impact or no effect. Thus, microcredit is no longer considered the "magic bullet" in the fight for women's empowerment and poverty reduction.

On the other hand, it is important to note that recent and more innovative studies have found that savings-led microfinance programs (VSLAs) have positive impacts on income and poverty reduction in rural African communities (Ksoll et al. 2016; Annan et al. 2013). These more recent results point out that analysts must differentiate between general microfinance and VSLA type programs to reach conclusions regarding the impacts on poverty reduction. The studies also found increased empowerment for women (Karlan et al. 2017), participation in more income-generating activities, better housing and eating conditions, and greater expenditure on children's education (Brannen & Seehan-Connor 2016). However, these positive results cannot be generalized.

Faced with a large number of sometimes contradictory studies, a set of researchers conducted a Campbell Systematic Review on how economic self-help groups in low- and middle-income countries affected women's empowerment (Brody et al. 2016). The study combines quantitative and qualitative evidence to examine the perspectives of female participants in these groups. The self-help group models reviewed are typically based on collective savings to facilitate intra-group lending and often gradually larger loans, for example, from banks. The groups commonly received support from NGOs for various forms of training. Brody et al. found that the self-help groups had positive effects on various dimensions of women's empowerment, including economic and political, but there is not enough evidence of effects on psychological empowerment (agency, autonomy, and sense of self-confidence or self-esteem). Further, the review did not find evidence that self-help groups had any impact on domestic violence. In any case, the Brody et al. review emphasized that any positive results were strongly associated with program design and contextual factors.

THE EVIDENCE ON VSLA CONTRIBUTIONS TO REDUCING IPV

International development programming seeks to reduce IPV through combining poverty-focused microfinance programs, such as VSLAs, with participatory training on gender equality to empower women economically and socially.

There is strong and growing evidence (Kabere & Natali 2013) that women's economic empowerment is central to the achievement of inclusive growth, particularly in low- and middle-income countries. On the other hand, women's lack of economic autonomy places them in dependent situations, making it more difficult for them to exit abusive and violent relationships. Based on this logic, and the previously mentioned argument that providing credit to poor women through microfinance empowers them, one would expect that programs combining microfinancing with gender-equality training would reduce IPV. One could expect that improved access to economic opportunities (e.g., access to resources and greater decision-making power) give women more bargaining power and the ability to leave abusive relationships (see Figure 1).⁵ However, does evidence support this conclusion?

In the case of VSLAs, creating groups or a "safe space" where participants can meet and have positive interactions, albeit in the context of financing, is an important component of many approaches that attempt to change behaviors, attitudes, and norms related to violence (Paluck & Ball 2010).

Yet both intended and unintended effects of poverty-focused microfinance have been debated among researchers and practitioners. Some suggest that there is an intrinsic value to giving poor women an opportunity to earn additional income, and microfinance is considered a tool to economically

⁵ More detailed arguments on how microfinance participation can reduce IPV are presented in the following paragraphs and figure.

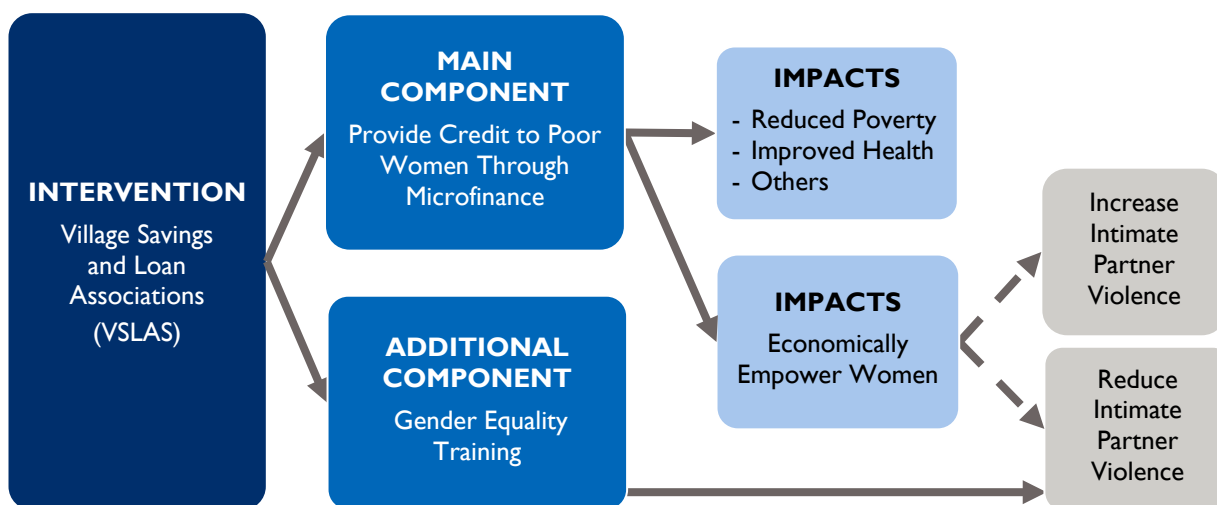
empower poor women. Furthermore, a study suggests that women’s increased economic empowerment due to microfinance is associated with reduced domestic violence, as it lowers stress from poverty and thereby externalization of stress (Kabeer 2001). However, other research suggests that microfinance participation and the associated empowerment may have unintended consequences, possibly even increasing IPV (Dalal et.al. 2013 and Koenig et.al. 2003).

Studies conducted around the world have shown evidence of associations between IPV and poverty at both a household and community level; although the directionality and mechanisms for these associations are not totally clear (Goodman et al. 2009). These findings, together with conceptual arguments, have led some development practitioners to argue that increasing women’s economic empowerment should be a key strategy to reduce IPV. However, the evidence of the impact of women’s economic empowerment on violence is mixed, with some research suggesting that increased access to credit or income could decrease IPV while other research suggests the opposite. The conflicting conclusions imply that women’s economic empowerment has the potential to have a positive or negative impact on women’s risk of experiencing IPV. On the one hand, women who contribute financially may have a higher status in their household, and thus be less vulnerable to IPV. On the other hand, it may be argued that economically empowered women may challenge the established status quo and power balance with her partner, and so be associated with an increased risk of violence. Therefore, it is very important to understand the relationship between economic empowerment and women’s risk of violence in different settings (Vyas & Watts 2009).

Related to this debate, researchers found that in order to increase the potential of poverty-focused microcredit interventions to reduce the risk of IPV, training should be included. Given that evidence reviews suggest that addressing underlying gender and relationship norms can be a critical element of effective VAW prevention (Heise 2011); (Ricardo et al. 2011), this training should be designed to increase women’s knowledge about resources for dealing with abusive relationships and to contribute to changing women’s, men’s, and community attitudes towards IPV and VAW in general.

In sum, existing research on the impact of these poverty-focused microfinance programs and VSLAs on IPV shows, at best, weak if not contradictory evidence. If development professionals expect to increase the chances of reducing IPV through VSLAs, certain intervention conditions should be met, including gender-equality training (see Figure 1). Below, we will try to identify some of these conditions.

Figure 1. The Mechanisms behind the Impact of Women’s Participation in VSLAs on IPV



THE IMPACT OF MICROFINANCE AND VSLA INTERVENTIONS ON IPV

A rapid review of the impact of interventions that aim to prevent violence against women and girls (Fulu et al. 2014) found that within economic interventions, there is some evidence to recommend a combination of microfinance and gender-equality approaches. On the other hand, proof that microfinance or VSLA interventions by themselves have an impact on VAW or IPV is very limited; such interventions have mixed results (Peterman et al. 2018).

Evidence that building women's productive assets reduces their experience of domestic violence often shows promise but is limited. Few studies have VAW as a measured outcome, and some of them have weak research designs. There is stronger evidence that interventions that sought to simultaneously tackle both economic and social factors had consistently stronger positive outcomes than interventions that focused on economic factors alone.

The few studies providing evidence of the impacts of microfinance activities alone on women's risk of IPV focus on Bangladesh and show mixed results (see Table 3). One study in rural Bangladesh showed that group-based credit program participation was associated with significantly lower IPV, although the qualitative part of the study did not find a clear reason for this reduction (Schuler et al. 1996). Another study of urban Bangladeshi women found an association between participation in savings or microcredit groups and a reduction in IPV, but faced some methodological problems because it did not control for selection bias (Naved & Persson 2005). Koenig et al. (2003) also found a positive impact for rural Bangladeshi women with less than two years' participation in savings or microcredit groups, but with the similar selection bias. On the other hand, Ahmed (2005) discovered that new female members of a savings group faced a *greater* occurrence of IPV than non-members, but violence decreased over time as a skill-training program was introduced in the intervention. Dalal et al. (2013) also found that educated women who shared household decision-making had more exposure to IPV if they were part of a microfinance program. In summary, the aforementioned studies found that women's participation in savings groups may have different results between urban and rural contexts (Naved & Persson 2005), across communities (Koenig et al. 2003), and across case studies (Schuler et al. 1998), among other distinguishing factors of the interventions and participants.

Table 3. Summary of Impact of VSLA-only Interventions on IPV

STUDY	INTERVENTION	TARGET POPULATION	COMPONENTS	STUDY DESIGN	RESULTS
Ahmed 2005	BRAC and ICDDRDB joint research	422 currently-married women, aged 15-49 years, from BRAC member households; 1,622 women from poor non-BRAC households	Participating in savings and credit groups	Bivariate analysis and logistic regression of cross-sectional data	Newly joined female members face greater occurrence of IPV than non-members. IPV reduces as skill-training is introduced.
Schuler et al. 1996	Evaluation of Grameen Bank and BRAC participants in Bangladesh	Survey of poor women nationwide	Being client of the bank or microfinance	Random multi-stage cluster design	Micro-credit membership associated with significantly lower IPV
Naved and Persson 2005	Evaluation of female microcredit participants	Women of Bangladesh nationwide	Participating in savings and credit groups	Multilevel analysis; Multistage sampling scheme survey	Positive association of savings or microcredit group participation with IPV suffering on urban Bangladeshi women; does not control for selection bias.
Koenig et al. 2003	Family Health Research Project in rural Bangladesh	Women in Sirajgonj and Jessore Districts in Bangladesh	Participation in savings and credit group	Multilevel analysis	Positive association of savings or microcredit group participation with IPV suffering on one region and no association in the other region of study.
Dalal, Dahlström and Timpka, 2013	Micro-finance program	Ever-married women of reproductive age in Bangladesh	Participation in savings and credit group	Cross Sectional analysis	Microfinance plans are associated with an increased exposure to IPV among educated and empowered women.

Source: Studies cited above; author's elaboration.

Thus, the evidence on the impact of microfinance interventions, and VSLAs in particular, on women's risk of violence and IPV is still very limited. However, the scarce literature shows that VSLAs that promote women's economic autonomy but lack other components may generate contradictory results: some programs significantly reduced violence, but others showed ambiguous results or even increased violence. Findings from the Bangladesh studies and others should therefore be read with caution.⁶

LESSONS LEARNED

THE IMPORTANCE OF VAW-PREVENTION COMPONENTS IN INTERVENTIONS

This section brings the literature full circle, and discusses lessons learned from research regarding the relationship between VSLAs and IPV.

First, in terms of the overall evidence base, more evidence is available on the impacts of VSLAs (and other microfinance interventions) coupled with gender-sensitive approaches than on the impacts of microfinance interventions alone (i.e., with no other components). Many VSLA-type interventions combine a focus on increasing women's economic resources with a focus on empowering women and/or transforming gender relationships. Typically, women that participate in either microfinance or VSLA programs also receive training on gender and gender stereotypes, communication skills, HIV, women's rights, and/or VAW prevention. Some interventions include working with men, and a very small number include a mobilization component to work on gender issues at the community level, although the impact of this element has not been rigorously evaluated. The interventions vary from six months to two years, often based on loan and savings cycles.

Second, given that there is some evidence that increasing women's economic empowerment threatens household patriarchies and therefore exacerbates violence, it is important to include protective elements into this type of intervention. In the Ivory Coast case study, for example, gender-dialogue groups supplemented VSLAs to address norms, attitudes, and relationship dynamics, with some positive impacts on reducing violence against women (Gupta et al. 2013).⁷ While the same case study found an insignificant reduction of physical and/or sexual IPV, there were significant reductions in reports of economic abuse and acceptance of wife beating. In addition, women who attended at least 75 percent of the sessions with their husbands were less likely to report physical IPV.⁸

⁶ Indeed, differences across research findings may result from various factors and produce differing explanations. First, there are intrinsic methodological challenges of such research, like those associated with selection bias. The relationship between association membership and IPV may be due to characteristics of women that chose to participate in microfinance programs. As Bajracharya and Amin (2013) find, the negative relationship does not hold when an appropriate comparison group generated using propensity score matching (PSM) is used in the analysis. Second, results may be shaped by the contexts of program implementation. Here, increased violence may be a consequence of women gaining economic status in far less progressive settings (see Koenig et al. 2003). Finally, results may simply depend on how long women are members of a VSLA group, as the Bangladesh study suggests (Ahmed 2005).

⁷ Intervention participants were members of a VSLA, and the treatment groups were separated into two groups (using randomization) and one of them was part of a Gender Dialogue Group that convened for eight biweekly sessions over four months. The Gender Dialogue Group targeted heterosexual couples and consisted of various activities, including skits and group learning exercises, with an underlying message of the importance of non-violence at home, promoting communication between men and women, and the recognition of women's contribution to the household's well-being. See Gupta et al. 2013.

⁸ The study states that the short follow-up time (around four months) might have been a problem and suggests the importance of including more follow-up in future studies.

Three programs show VSLA-like institutions have significant and positive impacts on reducing various forms of IPV: the Intervention with Microfinance for AIDS and Gender Equity (IMAGE) study in South Africa, the Rwanda *Indashyikirwa* (“champions of change”) intervention, and a Burkina Faso program aimed at the most impoverished rural women (Ismayilova, et al., 2017). The case of the IMAGE program is particularly helpful for understanding the relationship between microfinance programs with a gender-training violence-prevention component and reductions in women’s exposure to IPV. The experimental study of Pronyk et.al. 2006 found a 55 percent reduction of physical and sexual violence towards the intervention’s South African beneficiaries after a two-year period.⁹ The IMAGE intervention combined economic empowerment strategies for women and gender sensitization for both women and men.¹⁰ Using quantitative and qualitative analysis Kim et al. (2007) analyze the underlying mechanisms through which the IMAGE intervention achieved reductions of IPV. They found that the intervention enabled heterosexually partnered women to challenge the acceptability of violence, expect and receive better treatment from partners, leave abusive relationships, and raise public awareness about IPV, which resulted in reduced violence. Partnered women, compared with those in the control group, reported higher levels of autonomy in decision-making, improved household communication, and better relationships with their partners.

A rigorous evaluation of the Rwanda program, using randomized controlled trial (RCT) methods, found that women in a relationship reported a more than 50 percent reduction in either sexual or physical IPV, and men were 47 percent less likely to perpetrate physical IPV.¹¹ Though an impact evaluation (using rigorous methods) of the Burkina Faso intervention, with VSLA, financial training and family coaching, showed no decline in physical IPV, psychological violence reduced and marital relations improved after a 12-month follow up (see summary in Table 4).

Questions regarding the sustainability of outcomes linger, however, as suggests an impact evaluation of a Peru activity similar to the IMAGE intervention (Aguero and Frisancho 2018).¹² Specifically, the Sumaq Warmi program provided educational training on human rights and violence against women to female village banking clients in rural Peru, followed by mobilization at the community level¹³. An evaluation found no significant changes after the intervention in women’s justification of partners’ violent behavior, their acknowledgment of their right to refuse to have sexual intercourse with their partner, and their submission to their partner. However, the intervention led to greater awareness

⁹ It is important to consider that attrition rates were high after the two-year period.

¹⁰ The IMAGE intervention combined livelihood and empowerment strategies to address gender issues and violence in women living in rural villages of South Africa. The study of Pronyk et.al 2006 was designed as a cluster randomized controlled trial (RCT). The intervention had two components: 1) a microfinance intervention that provided credit and savings services to the poor; and 2) a gender-focused training program called Sisters-for-Life designed to catalyze broader empowerment and reduce gender-related conflicts. The gender-based program consisted of a first phase of 10 one-hour sessions, held every two weeks, guided by a 12 to 15-month training curriculum. The sessions covered topics on gender roles, relationships, communication, IPV, and HIV infection, and sought to develop communication skills, critical thinking, and leadership. The second phase encouraged community mobilization to engage male youth and adult men.

¹¹ This intervention, targeting heterosexual couples, included 21 training sessions conducted over five months addressing concepts of power, gender, and rights, how to manage alcohol abuse, jealousy, economic inequalities, and household roles, among other drivers of IPV. After the couples’ curriculum was finished, a second component involving about half the participants trained participants as community activists for an additional 20 months. In addition, around 40 local opinion leaders were trained at the beginning of the program using a two-week curriculum on how to mobilize positive actions. The intervention also provided safe-space houses for IPV victims.

¹² The Pronyk et.al. evaluation was questioned by Aguero and Frisancho because it did not allow for disentanglement of the relative effect of the training from participation in microcredit programs and because of other methodological biases due to operational constraints such as that participants self-selected to join the intervention and there were high attrition rates.

¹³ After the training sessions at the VSLA were concluded, one woman from each village savings group was selected to participate in a leadership training aimed at providing her with the resources to facilitate mobilization at the community level.

of violence-related resources available to women and a greater probability of perceiving their partners as controlling.

Thus, when considering group-based training interventions to empower women, the goal should be not only to prevent violence against women and girls, but also to address underlying expectations about male and female roles and behavior, and support the development of new communication and conflict-resolution skills, and training in life skills (Ellsberg et al. 2015).

Table 4. Summary of Evidence on the Results on IPV of Combining VSLA and Gender-Based Training Interventions

STUDY	INTERVENTION	TARGET POPULATION	COMPONENTS	DURATION	STUDY DESIGN	RESULTS
Gupta et al. 2013	International Rescue Committee intervention in Ivory Coast	Rural women in post-conflict Ivory Coast	<ol style="list-style-type: none"> 1. Economic empowerment group (VSLA) 2. Gender Dialogue Group 	8 sessions - 4 months	Clustered RCT 4 months follow-up	No significant results
Dunkle et al. 2019	<i>Indashyikirwa</i> intervention in rural Ruanda	Rural women in Rwanda	<ol style="list-style-type: none"> 1. VSLA as base of intervention 2. Couples work 3. Community activism training 4. Safe-spaces creation 	<ul style="list-style-type: none"> • Couples work: 20 sessions- 5 months • Group activism: 20 months 	Group RCT 24 months follow-up	<ul style="list-style-type: none"> - 55 percent reduction on reported physical or sexual IPV - 47 percent reduction on reported physical or sexual IPV perpetration
Kim et al. 2007; Pronyk et al. 2006	IMAGE intervention in South Africa	Rural women in South Africa	<ol style="list-style-type: none"> 1. VSLA as base of intervention 2. Only women groups work 3. Community activism 	18 months average participation	Clustered RCT 24 months follow-up	<ul style="list-style-type: none"> - 55 percent reduction on reported physical or sexual IPV (High attrition rates in Pronyk et al. 2006) - Higher levels of autonomy in decision making, improved household communication, and better relationships with their partners. (Kim et al. 2007)
Ismaliyova et al. 2017	Burkina Faso Intervention	Ultra-poor rural women in Burkina Faso	<ol style="list-style-type: none"> 1. Economic intervention (creation of VSLAs and training) 2. Family coaching 	~21 months	3-arm clustered RCT 12 and 24 months follow-up	Impact (reduction) of emotional violence. Higher effects with family coaching. No significant reduction in physical violence.
Agüero & Frisancho 2018	Sumaq Warmi intervention	Rural women in Peruvian Andes	Microcredit group as base	~24 months	Clustered RCT	No significant results

Source: Author’s elaboration.

As the previous table shows, interventions combining VSLA with workshops on women's empowerment and gender-equality training show promising results in reducing IPV, but further research on what makes those interventions effective, and/or under what conditions, is warranted. The fact that VSLA-only interventions in Bangladesh have mixed results hints that the positive impacts of the reviewed interventions may be attributed to the women's-empowerment components, but nonetheless those interventions seem to depend on unique program-specific characteristics and contexts.

SHORT-LIVED PROGRAMS ARE NOT ENOUGH TO REDUCE EXPOSURE TO IPV

A third conclusion of the literature reviewed is that shaping partner behavior to reduce IPV is a long-term commitment. Three of the five interventions with promising results lasted 18 months or longer. The IMAGE study, particularly the evidence generated by its experimental evaluation showing a large reduction of IPV risk, has been central to the debate by providing evidence of the importance of including a training component on social norms with VSLA interventions. The average participation in the IMAGE intervention was 18 months. Likewise, the Rwanda *Indashyikirwa* intervention in rural Rwanda lasted around two years. It showed a promising reduction on both women's probability of suffering IPV and men's probability of perpetrating it. Finally, the Burkina Faso intervention, which gave seed capital to very poor women through the creation of VSLA-like groups and included family coaches, lasted around 21 months and showed promising results on reduction of psychological violence, although showed no reduction of physical violence.

On the other hand, the VSLA intervention with a gender-training component in post-conflict Ivory Coast with no significant IPV results had only eight sessions of a gender dialogue group in four months plus a four-month follow-up.

Results regarding intervention length, however, are still far from conclusive. The Sumaq Warmi intervention in the Peruvian Andes resulted in no significant change in violent behavior and social attitudes towards violence, although it lasted 24 months. The Sumaq Warmi intervention was adapted from the South African IMAGE program; the lack of results suggests that interventions that succeed in some countries are not necessarily effective in others.

INVOLVING MEN IN VSLA-RELATED TRAINING COMPONENTS IS CRITICAL

A fourth lesson from the literature is that engaging men in interventions is essential. The intervention in post-conflict Ivory Coast is of particular importance because it was aimed at both female VSLA participants and their male partners. Half the groups in this intervention also attended a "Gender Dialogue Group" to help participants, both male and female, discuss norms and attitudes regarding financial decisions, the value of women in the household, gender equality, and violence. Among women and men who attended the Gender Dialogue Groups regularly, physical IPV was reduced (Gupta et al. 2013). Involving men in interventions that aim to empower women and reduce violence can be critical. Other impact evaluations have found promising results in interventions that engaged men regarding their attitudes to violence, but more research is needed to understand which programs work best and for whom (Ricardo et al. 2011). The *Indashyikirwa* intervention in rural Rwanda included training with couples as a starting point to engage and train people in community activism, and included a Family Coaching component. The program's significant reduction of IPV provides further evidence of the importance of involving men (Ismayilova et al. 2017).

CONCLUSIONS AND RECOMMENDATIONS

From the evidence review, we can extract several recommendations to design VSLA interventions to address IPV.

- Women’s economic empowerment interventions that aim to address IPV, such as poverty-focused microfinance and VSLAs, should add features to deal also with changing the underlying social and cultural norms, such as decision-making dynamics, household power relations, and social sanctions and/or stigma related to specific behaviors.
- Programs should engage men and boys in training components not only as potential perpetrators of violence but also as critical decision-makers and potential agents of change.
- Consider the duration and intensity of components aimed at reducing IPV. It takes time to change deep-rooted norms and behaviors.
- Intervene on multiple fronts of training and education. Relationship-level programs should be accompanied by community-level interventions to change cultural norms on a broader scope.

Other valuable messages, more related to implementation issues, taken from the *Violence against Women and Girls: Finance and Enterprise Development Brief* (World Bank 2015), include:

- Provide gender-sensitive training to program staff to provide women with advice and information on financial and entrepreneurship services, as well as referral information for women in situations of violence. The training should cover a basic overview of VAW prevention and response, ethical and safety issues, and available referral services in the area.
- If possible, ensure at least part of the staff working at the intervention are women. This measure can protect clients from potential violence and discrimination. Moreover, female loan officers have been shown to more quickly earn beneficiaries’ trust.
- Explain the program to community leaders and key members of the community (both men and women) in order to get their support, while being sensitive to cultural norms in order to avoid negative repercussions of women’s employment and training.

Finally, perhaps the most important lesson: “One size does not fit all.” The political, cultural, institutional and socio-economic context must be considered when designing an intervention and its specific components and services offered.

In conclusion, the relationship between microfinance (specifically, VSLA) interventions, women’s empowerment, and risk of IPV is complex, and varies according to context. Although some studies have suggested that microfinance and VSLAs can reduce the risk of IPV, others have found that economically empowering women can potentially exacerbate this risk; women’s challenge of established gender norms may provoke conflict within the household. In light of these contradictory findings, and the fact that there only a few rigorous evaluations that address the issue of interest, the question of whether women’s participation in VSLA contributes to reductions in intimate partner violence remains unresolved and requires further research.

ANNEX A. SOURCES OF INFORMATION

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