





Evaluation of Zindagii Shoista (Living with Dignity), an intervention to prevent violence against women in Tajikistan: impact after 30 months

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Conflict of interest

The authors have no conflict of interest.







his report outlines the medium-term impacts of Zindagii Shoista (Living with Dignity) – a project to prevent violence against women and girls (VAWG) in Tajikistan – by determining levels of violence and measuring socioeconomic and emotional wellbeing indicators 15 months after the project ended – 30 months after its commencement. At the endline of the intervention, VAWG levels had dropped by 50%, and relationship and gender equality indicators had improved. Significant positive changes were seen for all socioeconomic status indicators as well as significant positive changes for all health measures, including depression scale and suicidality.

The findings of the 30-month-post-baseline assessment showed that the positive impacts at endline were broadly sustained over the subsequent 15 months, even though intervention activities had ceased. The data revealed a sustained reduction of VAWG, further decreases in severe food insecurity among women and men and in borrowing money for food, and a decrease in depression among women, as well as more equitable gender relations and attitudes, across the four timepoints: baseline, 8 months, 15 months, 30 months. Although a few indicators had regressed slightly at 30 months since the 15 month end-of-project, particularly those to do with women's earnings and savings, they were nonetheless far better across the board than they had been at baseline, before the intervention. The post-endline findings are particularly significant given that data were collected at a time of the year when socioeconomic and other stress factors would have been high, as discussed below.

Background

The Zindagii Shoista (Living with Dignity) project to prevent violence against women and girls (VAWG) was implemented in four villages in Jomi and Penjikent districts of Tajikistan. The evaluation of the project 15 months after it began showed a 50% decrease in past-year experiences of violence reported by women, as well as significant other positive findings in terms of socioeconomic and mental health indicators (Mastonshoeva et al. 2019a).

Zindagii Shoista was implemented by International Alert and Cesvi, with local partners ATO, Farodis and Zanoni Sharq (Women of the Orient), over a period of 12 months, as part of the global *What Works to Prevent Violence Against Women and Girls?* programme funded by DFID and headed by the South African Medical Research Council (SAMRC).¹

The project focused on extended families as units and combined gender norm-change approaches with income-generating activities (IGAs). These drew in part on adaptations of the Stepping Stones² and Creating Futures interventions,³ with significant modifications to address the needs particular to Tajikistan, especially for the IGA component.

The project was in many ways novel for both Tajikistan and the greater Central Asia region because of its family-centred approach, its combination of economic empowerment and social norm—behaviour change elements, and its focus not only on intimate partner violence (IPV) but also on in-law dynamics, including various forms of physical, emotional and economic violence by in-laws. In Tajikistan, as in many countries in Asia, the family unit is not only a husband—wife dyad; it includes a more complex grouping of in-laws who may exploit and be violent towards younger daughters-in-law.

The research combined qualitative and quantitative approaches, involving both the project beneficiaries and those implementing the intervention. Full details of the project and its evaluation can be found on the **What Works website**.⁴

Tajikistan is a landlocked central Asian country of approximately 8.9 million inhabitants 98% of whom are Muslim; 85% of Muslims are Sunni. While there are no reliable, country-wide figures for the levels of violence faced by women and girls in Tajikistan, there is a common consensus among state agencies, local and international NGOs and researchers that levels of physical, sexual, emotional and economic violence are high.

According to the Demographic and Health Survey of 2017 in Tajikistan (TjDHS 2017), almost three quarters of women age 15 to 49 are married, with 47% married by age 20. About 31% of ever-married women age 15 to 49 have experienced spousal violence during their lifetime, including physical, sexual, or emotional violence. Young and recently married women tend to be the most vulnerable; they face violence not only from their intimate partner but also from other members of their husband's family whose home they usually move to, such as their parents- and siblings-in-law (Haarr, 2007 and 2010, Harris, 2004 and 2006).

¹ For more information, see http://www.whatworks.co.za

² For more information, see https://www.whatworks.co.za/ resources/item/467-zindagii-shoista-living-with-dignity-workshopmanual

³ For more information, see https://www.whatworks.co.za/resources/item/540-zindagii-shoista-living-with-dignity-workshop-manual-part-2

⁴ https://www.whatworks.co.za/resources/reports/item/442-zindagii-shoista-living-with-dignity-june-2018

Although there are no reliable national figures available for suicidality, research points to young women also being the most vulnerable group in this respect (UNICEF, 2013). Most cases of IPV go unreported because in the overall socioeconomic environment in which violence takes place - which includes attitudes and social norms that regulate gender and age relations - the behaviour of perpetrators is often condoned, shame is attached to the survivor and to the act of reporting, and domestic violence (DV) and VAWG are considered to be a private matter, which prevents survivors from seeking legal recourse despite the legal protections that are in place (Erich, 2015, Mastonshoeva et al., 2016, 2019a and 2019b). Furthermore, prevalent attitudes among both men and women tend to condone the use of violence against women in certain situations (Erich, 2015, Falkingham and Baschieri, 2009; Haarr, 2007; Harris, 2004).

These findings were echoed in our formative research (Mastonshoeva et al. 2016) and baseline study, although our reported levels of violence were higher than the TjDHS (2017) study. This was in part due to purposeful sampling of participants, as well as more in-depth questioning around various forms of violence used in our research, including emotional, psychological and economic violence by intimate partners and other members of the extended family.

Methods

The aim of the study was to assess the medium-term impact of the International Alert-led project, Zindagii Shoista (Living with Dignity) with research conducted approximately 15 months after the end of the intervention. The research provided a fourth datapoint for our series of measures, which had previously included baseline, midline (8 months later) and endline (15 months after baseline), in the four project target communities (see Mastonshoeva, et al., 2016, 2019a and 2019b).

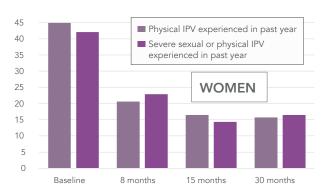
The study population included younger and older women and younger and older men from project families in the four villages participating in the intervention. Two of the villages were in Penjikent district in the north of the country and two in Jomi district in the south. A standardised questionnaire was used for all interviews. The baseline study covered a total of 236 participants (134 women and 102 men), the midline, 242 (153 women and 89 men), and the endline, 246 (156 women and 93 men). For the post-intervention study, we were able to re-interview 225 of the original participants (143 women and 82 men). In addition to this, individual in-depth interviews (IDIs) were conducted with 20 participants of the project (12 women and 8 men), as well as 16 focus group discussions (FGDs), divided by age and gender, and two FGDs with project facilitators in both districts. The questions focused on experiences of physical, sexual, emotional and economic violence against women and girls (VAWG), health (including mental health), family relations, and socioeconomic status.



Main findings at 30 months

VIOLENCE

The substantial reduction in women's reports of experience of violence and men's reports of perpetration between the baseline and 15-month interviews was for the most part sustained at the post-intervention datapoint at 30 months post-baseline (Figure 1).



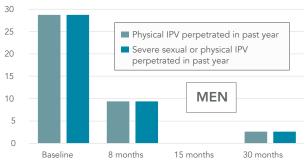


Figure 1: Levels of reported violence (note: severe sexual and physical IPV = more than 2 acts in the past 12 months)

Experience of emotional IPV in the past 12 months was reported by 28.1% of women at 30 months, compared to 32.3% at 15 months and 64.5% at baseline. Experience of physical IPV was reported by 15.7% of women at 30 months, compared to 16.5% at 15 months and 44.9% at baseline. Indicators for men showed a very small increase in reported perpetration of emotional (1.8%) and physical (2.6%) violence at 30 months, compared to 15-month data (4.5% and 0%). There was an increase in women's reported sexual IPV from 3.8 % at baseline to 14.9% (with 1.3 % of men reporting perpetration), which is less than half of the baseline rate and less than the midline rate, but nevertheless a concerning up-tick. There was no quantitative indicator for economic IPV, but this was tracked through qualitative interviews and monitoring visits. As discussed below in the socioeconomic data section and the IGAs, the intervention increased both women's own economic standing as well as that of their families, even if not all IGAs were equally successful or transformative of gender relations.

Men's reports of perpetration at endline (15 months) were not consistent with women's reports of their experience of violence, with men reporting no perpetration (0%) of physical and sexual IPV. This is possibly due in part to men being more aware by the end of the project that IPV is not acceptable. Nonetheless, there was a significant reduction in violence reported by women at the end of the intervention, supported by qualitative findings, suggesting that there was an overall reduction of IPV perpetrated by men and experienced by women, even if men may have exaggerated the degree to which this reduction occurred.

Men's self-reporting of perpetration of different forms of violence at 30 months speaks to a positive impact of the intervention. Whereas men at the endline reported no perpetration, while women were still reporting violence, the self-reporting at the 30-month stage implies that awareness among both men and women had increased, with a greater sense among men of accountability for their actions, understanding the importance of self-reflection in relationships, and awareness of the feelings of family members. This is especially the case with physical and sexual violence, which are considered taboo topics compared to emotional and economic violence.

The qualitative data at 30 months supports the survey findings, with respondents underlining significant improvement of life experiences and reduction of violence overall.

As one of the interview participants among the younger women group stated: "My husband does not hit me anymore; he consults with me when making decisions. Before (the intervention) my husband would not allow me to leave the house, now I can do many things outside the house independently. My neighbours in the village invite me to attend marakas⁵ and weddings."

An older woman participant remarked: "We gathered some money from our small family business, and we sent my husband to Hajj.⁶ My husband has completely changed now. I do not know if this is because of the intervention or because he went to Mecca. He does not insult me at all now. He used to insult me due to my physical disability, calling me names. He is very kind to me now, we eat and drink tea together, it was not this way before."

The data from FGDs also points towards a reduction of violence among project targeted families with participants of the FGDs giving examples of reduction in emotional and physical violence within their families.

⁵ Maraka – traditional ceremonies such as weddings and funerals

⁶ Pilgrimage to Mecca

SOCIOECONOMIC INDICATORS: Earnings and savings



Figure 2: Change in earnings and savings reported by women and men

The findings of the post-intervention research (at 30 months) underline sustained positive changes in the financial status of target families (Figure 2) and demonstrate significant differences when compared with baseline data. At baseline, only 17.9% of women and 44.1% of men had earned money in the month prior to the interview and 6.7% of women and 14.7% of men had saved money in that month. Fifteen months later, earnings and savings had increased significantly among both men and women and women reported an almost four-fold increase in earnings and an eight-fold increase in savings. In the month prior to the interview 78.9% of women were earning and 55.1% of women were saving; 71% of men were earning and 44.1% of men had savings.

In comparison, at 30 months, 56.6% of women and 72% of men had earned money in the past month, and 40.6% of women and 51.2% of men had savings. There had therefore been some reduction in women's earnings and savings from 15 months to 30 months but the proportion earning was still more than three times higher than the proportion at baseline. Men's increase in earnings and savings was sustained between 15 and 30 months.

The qualitative data points to various factors that had a detrimental effect on some of the gains in women's savings and earnings after the end of the intervention. These include the overall deteriorating economic situation in the country, changes in national level legislation, seasonal factors that affected the profitability of certain types of IGAs and coincided with the time period of data collection, as well as other localised socioeconomic factors. In particular, the 30-month data collection took place at a time when savings from the previous year's labour migration were at a low and the need for loans to prepare for the planting season was at its highest.

Examples of such dynamics were given by both men and women of various ages. For example, young women participants from a focus group in one of the villages noted that shortages in the water supply in the village had led to disputes among community members, including those who set up greenhouses as their IGA, which affected their harvest.

According to an older man in the same village, "Some families received cows [as part of their IGA], but we do not have enough pasture land as the majority is privatised. Where can we get enough hay for cattle breeding?"

An older woman faced a temporary shortfall in her savings and earnings at the time of data collection: "I used to sell milk and other dairy products, but my cow is pregnant now. Now I do not have any savings, the cow should be delivering next month, and we will start our small business again."

An unexpected impact of national level legislation was a regulation passed on reducing the size of weddings, which had a negative affect on those families who had set up an IGA renting out furniture for weddings.

Nevertheless, women used the skills and knowledge they had gained through the intervention to contribute to family budgets. An older woman participant explained: "I have made 550 Tajik Somonis this past week from sewing dresses and 85 Tajik Somonis from selling milk. The income of our family increased significantly after engagement in the intervention, our life improved."

⁷ The Regulation of Traditions and Customs in the Republic of Tajikistan" was introduced in 2007 and expanded upon in 2017. It now allows the state to impose strict limits on the number of guests and dishes allowed at weddings, funerals, christenings and birthdays, as well as set the duration of such celebrations. More info available at https://iwpr.net/global-voices/tajikistans-latest-crackdown-tradition

Economic and sociopolitical factors were not the only reasons for the decline in earnings and savings of women between 15 and 30 months. Based on an analysis of the interviews, while women generally remained engaged in the IGAs after the end of the intervention, men became more active and took more responsibility for sustaining the family, which included operating the IGAs. This is in line with cultural expectations of men to fill the bread-winning roles, which was largely supported by women as well. However, it is important to note that none of the interviewed female respondents mentioned being forced out of IGAs by men or being compelled to limit their roles, and they continued to be involved. The division of roles and responsibilities beyond the project phase seems to have been in part a process of negotiations over roles within the family and with the agreement of the women, based on the family circumstances, which resulted in sustained positive economic outcomes for the families, a smaller burden for the women and less stress for the men struggling with unemployment. Women also remained in charge of decision-making in IGAs perceived traditionally as feminine activities, like tailoring or baking. This does raise the spectre of a re-establishing of patriarchal gender roles and norms, which remain strong in the communities, despite the shifts initiated by the project.

The current economic hardship in the country and deteriorating situation of Tajik male labour migrants abroad has had major impacts as well, on the one hand creating further pressures on men to try and fulfil breadwinner roles, as well as frustrations when failing to do so but on the other hand making women's economic activities more acceptable. The intervention helped in this respect, as it reduced resistance against women being economically active from their male partners and mothers-in-law. For younger women to remain economically active, however, dynamics and roles in the extended family also need to change. A redistribution of domestic chores is essential, which in turn requires renegotiation of roles with mother, sister and other in-laws. Here, the intervention's focus on wider family rather than just the wife-husband dyad was crucial in enabling young women to renegotiate roles and responsibilities.

Traditional gender roles are very strongly rooted in the targeted communities and the research shows serious challenges with transforming and sustaining gender roles and responsibilities through a short intervention. Thus, further research is required to test different approaches to achieve the goal. However, the intervention did contribute to building women's economic skills and self-esteem, especially young women in the extended families, enabling them to contribute to the family budget, and have greater bargaining power and respect in their spousal relationships, among their family members and community in general. For example,

one participant stated that: "Before, my neighbours would gossip about me. Now, if I take a taxi and go to the rayon (district) centre, no one would gossip, because they know that I am working. Several men came to our house to propose to me to be a second wife. I refused, I don't want to be a second wife, I need a family, but only if I will be the only wife."

Despite some decline in earnings and savings among women at 30 months in comparison to the endline results at 15 months, the economic indicators for women are extremely positive when compared with the baseline. The improved economic conditions resulted in a more optimistic outlook among respondents. According to one of the older male respondents: "The major benefit is that I could start making money for my family's needs. As I told you before, my brother and sister supplied food for my family. With the support of the project I could take over that responsibility. They are also happy that I could do it. There is a still a long way to go for complete economic stability of our family, but I am happy that at I can at least cover some basic needs".

SOCIOECONOMIC INDICATORS: Food security

A sustained positive result for food security was evident at 30 months (Figure 3). At baseline, there was considerable food insecurity among the project target population - 44% of women and 33.8% of men reported severe food insecurity, and 61.9% of women and 57.8% of men reported borrowing money for food in the month before the interview. By the end of the intervention, at 15 months, no men reported food insecurity and it was reduced by half among women (to 19.4%). The post-intervention (30-month) data revealed a further substantial reduction with only 2.8% of women and 0% of men reporting severe food insecurity. Borrowing money for food dropped to 34.3% among women and was more or less sustained at 13.4% among men. This is further evidence that the IGAs had substantially contributed to families being able to meet their basic needs, including securing food.

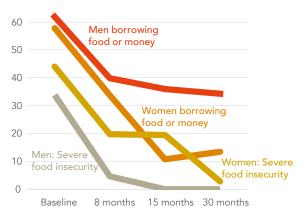


Figure 3: Reported food insecurity and borrowing for food by women and men

MENTAL HEALTH

At baseline, mental health was poor; the mean depression score (measured on the CES-D) for women was 28.5 and for men, 17.9 (see Figure 4).8 In the month before the interview, 20.2% of women and 8.8% of men had thought of suicide. At the end of the intervention, at 15 months, women and men demonstrated a significant change for the better in all health measures. The depression score had roughly halved (to 15.1 for women and 6.9 for men). Suicidality was reported by 0.6% of women and was not reported by men at all. Post-intervention (30 months), the research showed a further decrease of the depression score among women to 13.6, and the sustained low level for men (8.4). Suicidality among women was still very low (2.1%), and about ten times lower than during initial baseline reporting. Despite the harsh conditions at baseline, 17% of women and men were hopeful for their future. At 30 months, the scale went up, with 18.6% of women and 18.4% of men feeling hopeful.



Figure 4: Mental health indicators as reported by women and men

Among men, suicidality remained at 0% during this period. Overall, we found sustained improvements 30 months post-baseline, which indicated a strong, longer term positive impact on the mental health of target families and their communities. As one of the young women shared: "Prior to engagement in the intervention, I always felt bad. I always felt some form of guilt. I thought I was the reason for the violence in our family. Before the intervention no one was even considering me as a person worth talking to. The neighbours were labelling our family as a problematic family. Now I feel very happy, our family restored the respect of the community".

GENDER ATTITUDES AND FAMILY RELATIONSHIPS

Improvements in attitudes and practice of more equitable gender relations established during the intervention were sustained over the post-intervention phase. At 15 months we found an overall improvement of gender attitudes among men and women at the individual level as well as in terms of respondents' perceptions of community attitudes. This was sustained during the post-implementation period. Significant shifts of gender attitudes are difficult to achieve over a short project implementation period because they are strongly embedded, culturally and socially. When compared with highly positive changes in other categories, the shifts in gender attitudes and norms were modest. Further, the qualitative findings showed significant positive changes in everyday practices and behaviour (see also: endline findings, Mastonshoeva et al., 2019a).



Figure 5: Gender attitudes

At 30 months, women reported increased involvement in decision-making, which was consistent with men's reporting on this. Both women and men reported a sustained reduction in men's controlling behaviour (Figure 6) and less quarrelling. In terms of alcohol use, women reported some increase in alcohol use by their husband (3.9%) when compared with the end of the intervention, while men reported less drinking than previously. The indicators of alcohol use at 30 months showed significantly lower use than at baseline.



Figure 6: Gender attitudes and family relationships reported by women and men

⁸ A score of higher than 21 is classified as depressed and 16 and above as probably depressed

The qualitative research provided further examples of changes in gender relations. There were several instances where young women accompanied their husbands to Russia for labour migration and in some cases when husbands had been deported back to Tajikistan from Russia, women went to work abroad instead. In one of the target communities, several women started driving cars and other women intended to learn to drive. Respondents also gave several examples of couples sharing more household and childcare responsibilities. These are small but important changes in contexts where women's mobility has been very limited and controlled, remittances sent from labour migration by young men were spent according to the decisions of the household head (usually male or older female among in-laws), and young women were obliged to stay and serve their inlaws while the husbands were in labour migration.

Women's engagement in IGAs, which required work both inside and outside the house, and in some cases travel to the market to sell products, contributed positively to women's increased mobility. Younger women, whose mobility was most restricted, were now allowed to buy food and other items from the village market or even travel further in search of certain household items. During focus group discussions, some younger women in one of the villages reported that their husbands had bought mobile phones or that they had bought phones for themselves from their income. This allowed them to stay connected with family members when they were out selling their products and communicate more frequently with their migrant spouses and parents. This also marked a significant change in attitudes compared to before the intervention, when younger women's access to mobile phones was severely restricted (Mastonshoeva et al. 2016).

The degree of financial independence provided by the intervention, especially for younger women, and awareness of gender equality, allowed women to challenge gender norms and re-negotiate their position in the extended family. It provided a much-needed platform for family members of different sex, age, status and power positions to discuss and reflect on issues that were otherwise silenced and avoided.

An unanticipated positive impact of the intervention was an increase in community cohesion in several of the villages, which was remarked upon in several of the qualitative interviews. It is not possible to ascertain to what degree this was due to the intervention, but throughout its course participants had remarked about how it was bringing community members together. In particular, the families engaged in the intervention became mobilised in more community-oriented activities.

However, in spite of increased community cohesion, traditional family- and clan-based cleavages continued to play a role in the villages. As one of the project

participants reflected, although the project brought members of different clans and extended families together, custom still limits what can and cannot be discussed openly: "Some families really made improvement in terms of communication skills. But please note that in our village the success of the such project is challenging. See, I am local, Akbar (name changed) from Rovadin, Nasim (name changed) is from Anadar¹0 (refers to other participants), and even if we live in the same village, we separate each other. I would never share about my family problems in front of Mazories or Andariese.¹¹ The success of the such project would be more effective in small villages. See, there are more than 5000 families in our village and the selection of 20 families is challenging."

In terms of a possible scale-up of the intervention for a larger population, such dynamics could become more pronounced and would need to be considered in planning.

Discussion

The research shows a sustained impact during the 15 month post-implementation phase with stable positive results across all variables among women and men when compared to baseline, including violence reduction, improvement of socioeconomic status and mental health of the target families and contextual changes in gender relations. Although there was some reduction in indicators of women's earnings and savings between 15 and 30 months, the positive results of the intervention seen at the endline were broadly sustained over the subsequent 15 months, even in the absence of further intervention activities.

All the findings showed great improvements from the baseline position. The data revealed sustained reductions in women's experience of emotional and physical violence, severe food insecurity among women and men, borrowing money for food, depression among women, and more equitable gender relations and attitudes established across the four time-points. While sexual violence had steadily and markedly decreased from baseline to endline, there was an up-tick at the 30-month point, although it was lower than at midline. Women and men reported increased involvement in decision making and a reduction in men's controlling behaviour. In terms of further changes of indicators in relation to men's experience when compared with endline, the data showed increases in men's earnings and savings, and a reduction of alcohol use. The research demonstrated a slight decrease of savings and earnings among women.

⁹ Name of a neighbourhood consisting of the same extended family members (aylod)

¹⁰ Name of a neighbourhood consisting of the same extended family members (avlod)

¹¹ Name of a neighbourhood consisting of the same extended family members (avlod)

The qualitative findings showed that some of the decline in the profitability of IGAs was due to seasonal factors coinciding with the time period of data collection. Other factors also played a role, such as new regulations that restrict the size and number of traditional ceremonies and negatively affected the profitability of IGAs that were directly linked to organising these events. There were also local constraints on available resources, such as pasture land and water, which impacted on the IGAs, as well as seasonal fluctuations that were more pronounced at the data collection point.

Furthermore, the qualitative data showed increased involvement of men in the work of IGAs, which reinforced their traditional roles as breadwinners and may also explain the reduction in women's earnings. Nevertheless, the role of women in distribution of family budget remained strong and women used the skills and knowledge gained through the intervention to contribute to the family budget.

The intervention contributed immensely to building women's economic skills and improving their selfesteem - especially young women in extended families - which enabled them to have more bargaining power. This was true for younger women of various status, for married, divorced and unmarried women and for women living alone or with their in-laws in the absence of a migrant husband. The qualitative data demonstrates changes in relationships between younger daughters-inlaw and their husbands' extended family members who became more respectful and caring to the daughter-inlaw. Daughters-in-law became more confident about expressing their opinions and securing their positions, even in the absence of their migrant husbands. Young divorced women, who were facing social stigma and were highly dependent on their families, became more self-reliant and assumed greater roles in the family. The societal attitude changed towards young women who felt less social pressure, gained mobility and felt more confident when addressing inequality issues during FGDs.

Despite some declines in earnings and savings among women in comparison to the endline results, the economic indicators for women were extremely positive when compared with the baseline. Although changes in gender attitudes were not as significant as other project results, there were important changes in terms of gendered practices at the level of individual families.

FACTORS OF SUCCESS AND LESSONS LEARNED FOR SCALABILITY

Despite the short period of actual implementation of the intervention, a substantial change was achieved in terms of violence reduction, enhancement of economic situation of target families, significant reduction of food insecurity, and improvement of mental and general health among men and women of all ages engaged in the project. Despite the challenging process of gender norms change, the 12 months of actual implementation and engagement of target families in behavioural change and economic empowerment components of the project led to changes in gender relationships, practices and attitudes. The research data demonstrated sustained positive effects of the intervention 18 months after the project ended.

Our research has confirmed that economic empowerment paired with behavioural change components that address harmful gender norms can have a significant, positive and sustained impact on reducing and preventing different forms of VAWG. The three main factors for success appear to be: the combined economic and social empowerment approach, careful contextual adaption of the intervention, and, in this highly patriarchal context, in which young women marry into extended families, targeting whole families rather than focusing solely on women.

Another factor for success was the committed involvement, continual monitoring and field presence of project staff who supervised partner NGOs and facilitators engaged in the work, and responded to monitoring findings to detect and respond to challenges. The commitment and constant engagement of project teams in the intervention required a high degree of personnel and staff time, which needs to be considered for scalability. Project staff felt that for scaling up, more time would need to be factored in for training partner organisations, selecting families, monitoring the process and modalities of selection, with a more thorough consideration of ethnic, clan and/or other selfidentifiers in target populations. The impact of the IGAs on available resources in the village also needs more consideration in the intervention design, particularly if a project is to be implemented on a larger scale.

The presence of a reliable research component throughout the life cycle of the intervention was also key to its success. The opportunity to conduct formative research before the intervention contributed substantially to adapting the intervention methodology, which is highly desirable for scalability purposes.

Throughout the project cycle, the research component helped the project team to closely monitor changes, especially changes in attitudes and experiences with regard to sensitive aspects of families' lives which would otherwise be extremely difficult to detect and report through traditional monitoring and evaluation tools.

Lastly, mixed-method research enabled a robust evidence base on violence prevention by combining norm-change and economic-empowerment approaches focussed on extended families.

This study did not have a control arm; it is thus difficult to be sure which changes to attribute to the intervention, unless explicitly stated by participants in the qualitative interviews. By increasing the number of data-collection points, the study design was an interrupted time series rather than a pre-post design, which gives us more confidence that visible trends are real, rather than due to an artefact of the research process. The detailed qualitative research documenting changes at each time point also greatly adds to our confidence in this regard.

Conclusion

Overall, stable improvements were found in all indicators of socioeconomic status, earnings and savings, violence reduction and mental health improvement at the assessment 30 months post-baseline. The significant improvements seen at the end of the intervention in terms of VAWG reduction as well as in economic and mental health indicators were largely sustained during the post-intervention period, even though intervention activities in the target communities were discontinued. This is particularly positive considering the final datapoint was in early spring, when economic stress is at a high point in families because earnings from the previous year's labour migration period have usually been used up and loans are needed for agriculture in the upcoming planting season. All the indicators showed great improvements in relation to the situation prior to the intervention.

As an added value, the intervention served as a strong community mobilising force in target villages, which contributed to improvements in community relations and village infrastructure. This research is highly significant, showing that combined economic and social empowerment gender-transformative interventions can, when done well, contribute to significant and sustained reductions in violence against women and girls.

References

Erich, Alexander (2015). From 'programme transplants' to 'local approaches': The prevention of domestic violence against women in Tajikistan, unpublished PhD thesis, Universität Hamburg.

Falkingham, Jane and Angela Baschieri (2009). "Gender and poverty: How misleading is the unitary model of household resources? An illustration from Tajikistan," Global Social Policy, 9(1), pp.43-62.

Haarr, Robin (2007). "Wife abuse in Tajikistan," Feminist Criminology, 2(3), pp.254-70.

Haarr, Robin (2010). "Suicidality among battered women in Tajikistan," Violence Against Women, 16(7), pp.764-88.

Harris, Collette (2004). Control and subversion: Gender relations in Tajikistan, London: Pluto Press.

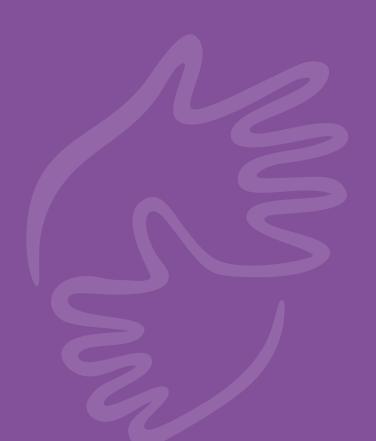
Harris, Collette (2006). Muslim youth - Tensions and transitions in Tajikistan, Boulder: Westview Press.

Mastonshoeva, Subhiya, Shahribonu Shonasimova, Parvina Gulyamova, Rachel Jewkes, Nwabisa Shai, Esnat Chirwa and Henri Myrttinen (2019a). Zindagii Shoista/ Living With Dignity - Mixed-methods evaluation of intervention to prevent violence against women in Tajikistan. Dushanbe/London/Pretoria: International Alert and SAMRC.

Mastonshoeva Subhiya, Shahribonu Shonasimova, Parvina Gulyamova, Rachel Jewkes, Nwabisa Shai, Esnat Chirwa and Henri Myrttinen 2019b. Zindagii Shoista/Living With Dignity - Base- and Mid-line Data report. Dushanbe/London/Pretoria: International Alert and SAMRC (unpublished).

TjDHS (2017). Demographic and Health Survey of 2017 in Tajikistan. Statistical Agency under the President of the Republic of Tajikistan, Ministry of Health- MOH/ Tajikistan, and ICF, "Tajikistan Demographic and Health Survey 2017," November 1, 2018, https://www. dhsprogram.com/publications/publication-FR341-DHS-Final-Reports.cfm.

UNICEF (2013). Study of prevalence and dynamics of suicide among children and young people (12-24 years of age) in Sughd Region, Tajikistan, Dushanbe: United Nations Children's Fund.





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