

Malawi Violence Against Women and Girls Prevention and Response Programme

Adapting the *SASA! Together* approach: Lessons
from Malawi

August 2021

Introduction

This brief piece provides an overview of the adaptation process for the SASA! Together approach by the Malawi Violence Against Women and Girls (VAWG) Prevention and Response Programme, also known as Tithetse Nkhanza (TN). The learning brief presents the adaptation processes that took place and the different considerations that were made, before providing a reflection on what went well and an overview of key lessons and recommendations for future programming. This brief was produced in line with TN's larger commitment to share learning with the wider sector and contribute to the Community of Practice on VAWG in Malawi. The experiences shared herein may be helpful to others who are seeking to adapt the SASA! Together approach with similar contexts in Malawi and Southern Africa.

Who is this paper for?

This paper is for prevention practitioners in Malawi and Southern Africa implementing violence against women and girls' prevention, who are interested in adapting the SASA! Together approach.

Contextual analysis

Violence against women and girls in Malawi

Violence Against Women and Girls (VAWG) remains a serious problem in Malawi, with evidence showing that 41% of Malawian women have experienced either physical or sexual violence by any perpetrator at some point in their lives (Malawi DHS 2015/16). There are different forms of VAWG in Malawi with emotional violence appearing to be the most common, followed by physical and then sexual violence. 30% of women report experiencing emotional intimate partner violence (IPV) during their life, 20% physical IPV and 19% sexual IPV. For girls and boys, physical violence is the most common form of violence experienced, followed by emotional and then sexual violence. 42.4% of girls and 64.5% of boys experience physical violence before they turn 18 (Malawi VAC survey, 2014). Experience of physical and emotional IPV appears to have increased between 2010 and 2015/16 from 28% in 2004 and 2010 to 34% in 2015-16.¹ Furthermore, there are a range of harmful traditional practices in Malawi, particularly affecting young people, including early and forced marriage, with 47% of girls married before they turned 18 (MDHS, 2016). VAWG has a myriad of negative consequences in Malawi, including on women and children's mental and physical health, educational attainment, and cost to the economy. Whilst 34% of women who experience physical or sexual violence sustain some form of injury, almost half (49%) of women who have ever experienced these types of violence have never sought help or told anyone about it (MDH 2015/16).

In Tithetse Nkhanza's target districts – Karonga, Lilongwe and Mangochi – there are different patterns of VAWG prevalence. Of the three, Mangochi has the lowest percentage of women experiencing any type of violence, and the lowest levels of reporting among the target areas. The prevalence of IPV within this district is 24.8%, and 21.4% of women aged 15 and 49 have experienced physical violence since the age of 15 (2016 MDHS). 48% of girls are reportedly married before reaching the age of 18. Karonga has the highest percentage of women experiencing physical violence. IPV is highest in Karonga, at 50.4% of women aged 15-49 years. Likewise, 50.6% of women have experienced physical violence since the age of 15; the highest rate amongst all districts in the country. Child marriage in Karonga is reported as 49% of girls. Lilongwe, on the other hand, reports the highest percentage of women who have experience of violence during pregnancy, experiencing sexual violence or IPV.²

Tithetse Nkhanza programme

The Tithetse Nkhanza (TN) programme was a flagship Violence Against Women and Girls (VAWG) prevention and response programme, aimed at reducing the prevalence of VAWG and improving the justice system for women and girls living with violence in Malawi. The three main expected outcomes of the programme were: formal and informal justice services and local institutions are accessible, responsive and accountable to women and children's needs; people in

¹ Malawi Demographic Health Survey, 2015-2016

² ibid

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target areas are less tolerant of violence and are more supportive of survivors; and individuals use non-violent means to settle disputes and avoid harmful practices, and seek support if they experience violence.

The programme initially worked in Mangochi, Karonga and Lilongwe Districts, focusing on four target areas (Traditional Authorities in the first two Districts and wards/settlements in Lilongwe) in each district. The initial timeframe for Phase One of implementation was three years (2019-2022). There were plans for scaling up to further districts in Phase Two, however the programme was unfortunately closed early, in 2021, due to budget cuts.

VAWG remains a broad category. The programme therefore took a specific focus on the following: 1) IPV occurring between spouses as well as between unmarried couples, whether cohabiting or not, and including adolescents in dating relationships; 2) domestic violence, which includes IPV but also violence perpetrated within the household and wider family that affects women and girls; 3) harmful traditional practices affecting women and girls. The rationale for this focus was to ensure that the programme was able to effectively target the common root causes of these types of violence and thus have an impact on levels of violence.

The programme had three prevention components to align with the different types of violence. Champions of Change³ (CoC) was used to address harmful traditional practices and IPV between adolescents, working with in and out of school youth and their parents and guardians (implemented in three target areas per district), the SASA! Together approach was used to focus on IPV at the community level (in nine target areas per district), and the Social and Economic Empowerment family approach, *Moyo Olemekhezeka*, was layered with SASA! Together in three target areas to tackle economic security, IPV and domestic violence.

Based on global best practices on what works to reduce VAWG, the Tithetse Nkhanza programme implemented SASA! Together⁴ as the foundational prevention approach. SASA! Together is an adaptable community mobilisation intervention, originally developed by Raising Voices, that is compatible with the programme's adaptive programming approach, due to its participatory and reflective nature.

Selection of SASA! Together partners

The programme went through a rigorous process to select implementing partners for the SASA! Together approach.

Table 1 presents the criteria that was used to select partners in each of the three target districts.

Table 1: Selection criteria for SASA! Together partners

Criteria	Questions to guide
Presence in the community, proximity to the communities is important	<ul style="list-style-type: none">• Does the organisation have a presence in the community of implementation?• How wide is their scope in the community of implementation?
Welcome & trusting relationship with the communities	<ul style="list-style-type: none">• Is the organisation known and trusted in the community of implementation?
Strong experience in VAWG programming, preferably women's rights/activist organisation	<ul style="list-style-type: none">• Is the organisation implementing (or have they implemented) VAWG programmes or other more sensitive programmes like HIV or working with other vulnerable groups?
Commitment from leadership to support the programme and communities	<ul style="list-style-type: none">• Is there support from the highest level of leadership for SASA! Together implementation?
Provision of dedicated staff to the SASA! Together work, adequate staffing capacity	<ul style="list-style-type: none">• Does the organisation have enough staff or capacity to hire to implement SASA! Together? (Minimum of SASA! Together staff is two at the district level and three field officers in three TAs)
Commitment to facilitate personal/organisational change processes & programme learning spaces	<ul style="list-style-type: none">• Is the organisation open to assessing its own culture and how power is used in relation to VAWG?• Is the organisation exemplary in nurturing a gender transformative work environment?

³ <https://plan-international.org/youth-activism/champions-change>

⁴ <https://raisingvoices.org/sasatogether/>

The programme worked with three implementing partners: Youth Net and Counseling (YONECO) in Mangochi, Malawi Human Rights Resource Center (MHRRC) in Lilongwe, and Foundation for Community Support Services (FOCUS) in Karonga. These organisations met the criteria above and were key to the adaptation and implementation of the SASA! Together approach in their districts. The programme did not conduct a public tender for the selection of the partners. Rather, during the inception phase, the programme conducted a mapping exercise of VAWG actors at national, district and local levels. Different methodologies were used including Rapid Evidence Reviews, focus group discussions and interviews. This information helped the programme to identify potential partners who were invited to an information sharing session and later developed proposals collaboratively with the TN team.

It is important to note that while the adaptation process took place collaboratively with partners, the programme ultimately had to terminate a relationship with one of the partners mid-way through implementation. The programme's closure then occurred before a replacement partner was brought on board. This was a setback in the associated district as activities were paused and momentum on the earlier processes was lost.

Adapting the SASA! Together START phase to Malawi

Why and how we adapted

SASA! Together uses power as the entry point rather than gender or violence, interrogating both its positive and negative uses. In other contexts, it has had a proven impact on lowering the social acceptability of IPV, as well as lowering past year experience of physical and sexual IPV and increasing community responses to women reporting IPV.⁵ It demonstrates impact at whole-community level rather than just with intervention participants. SASA! Together was adapted to fit the context of the programme's target areas based on primary research conducted in the target areas as part of the third phase of pre-baseline research. The adaptation process for the SASA! Together approach to Malawi took approximately a year. There were different processes involved to make the adaptation possible, including working with Raising Voices as technical advisors and the originators of the approach, establishing adaptation committees in the three target districts, and positioning the SASA! Together approach within the overall TN programme's prevention portfolio. The sections below discuss these adaptation processes in detail.

Type of adaptation

Translation was a key part of the adaptation done for the TN programme. This included translations into two local languages, Chichewa used commonly in Lilongwe and Mangochi and Tumbuka used commonly in the northern region of Malawi including Karonga. Initially, translations were also planned for Kiriyaonde (spoken in some parts of Karonga) and Yao (spoken in some parts of Mangochi). However, the implementing partners and adaptation committees later agreed that, while these languages were commonly spoken, they were not often used in written form. Some members also raised that they are harder to read and would slow down the community engagement activities as facilitators were not comfortable with using them in written form. In contrast Chichewa is widely used nationwide, both in spoken and written form, and Tumbuka is used widely in written and spoken form in the northern part of Malawi.

Cultural adaptations were also initially considered, but after careful assessment, this was not done. This was because the community engagement materials were general enough and socially inclusive enough to fit the three target areas' contexts. For example, the power poster has different representations of community members, including people with disabilities, and also captured community members from different religions, including Christianity and Islam, that are most common across Malawi.

⁵ Abramsky, T., Devries, K., Kiss, L. *et al.* Findings from the SASA! Study: a cluster randomized controlled trial to assess the impact of a community mobilization intervention to prevent violence against women and reduce HIV risk in Kampala, Uganda. *BMC Med* 12, 122 (2014). <https://doi.org/10.1186/s12916-014-0122-5>

Technical Assistance from Raising Voices

The Tithetse Nkhanza programme worked with Raising Voices, the originators of the SASA! Together approach, who provided technical assistance during both the adaptation process and during implementation. During the inception period, technical advisors from Raising Voices gave the TN team a virtual orientation on the SASA! Together approach, including the different adaptations that were possible. Additionally, a technical adviser travelled to Malawi from Uganda to interact more with the TN team and get a deeper contextual understanding of one of the target areas. This was followed by a one-week Training of Trainers (ToT) on the SASA! Together approach, focusing on the START phase. This was delivered to members of the TN team (VAWG Prevention Lead, three District Coordinators, Community Engagement Lead, Learning and Adaptation Lead, and Research Officer), representatives from implementing partners (programme officers and Monitoring and Evaluation (M&E) officers), and government district level gender officers.

Technical assistance from Raising Voices also supported the team to make decisions on what kind of adaptations was most plausible, what was needed to adapt appropriately, including the development of the Terms of Reference (TORs) for the adaptation committees, and sharing of tools to support the adaptation, including the adaptation guidance documents. All these processes enabled the team to be well acquainted with the SASA! Together approach in preparation for its adaptation and implementation. Throughout the adaptation process, Raising Voices provided guidance to ensure that the process adhered to the original key facets of the design.

District Adaptation committees

With support from Raising Voices, TORs were developed to guide adaptation committees. Initially, a national adaptation committee was selected to commence the adaptation process. However, recognising the different contexts across the three districts, this approach was revised. Instead, each district had an adaptation committee which included a cultural consultant (a village chief or chief's counsel), the district gender officer, Area Development Committee (ADC) members, implementing organisation SASA! Together Officers, and Tithetse Nkhanza District Coordinators, with TN's VAWG Prevention Lead providing oversight. The coordination of these committees was made easier by the presence of a TN District Coordinator in each of the three districts who oversaw the adaptation process.

Following the finalisation of the SASA! Together rapid assessments⁶ and identification of Community Activists, district level SASA! Together adaptation committee meetings were convened across the three implementing districts. The role of the adaptation committees was to review standardised SASA! Together information and community engagement materials and to recommend adaptations to the graphics and text so that they were most suited to the local context. In the first adaptation meetings members who had not participated in the ToT were oriented on SASA! Together and the TN Programme, and were provided with the adaptation committees' TORs. The committees used the SASA! Adaptation worksheet that was developed by Raising Voices to show what, why and how adaptations could be made.

Below is a summary of the work the adaptation committees undertook:

- **SASA! Dictionary of Key Terms:** The adaptation committees took time to go through the SASA! Dictionary of terms and agreed on the local language translations that were appropriate in the different contexts. The translations from Lilongwe and Mangochi were brought together for comparison in the use of certain Chichewa words. Fortunately, there were no significant discrepancies.
- **Translations:** The district committees agreed to only translate materials that would be used to engage the communities in the START phase. The Learning and Adaptation materials were also adapted. A translating company was hired to translate the materials from the local activism and community leadership strategies into Chichewa and Tumbuka. The third strategy on institutional strengthening did not need language or cultural adaptation because it targets employees of formal institutions like the Police, Social Welfare Officers, the courts, health providers and others, and English is their working language.

⁶ Rapid assessments were conducted to provide a baseline for the intervention to support tracking of important indicators for the intervention around community knowledge, attitudes and practices around response and prevention of VAWG.

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- **Review translated materials:** After materials were translated, the committees reviewed the translations based on local use of the language where needed. The committees' feedback was consolidated, and the translator incorporated it in the materials.
- **Pilot of materials in the communities:** The translator worked with the adaptation committees to test the translated materials with community members in the target areas. Focus group discussions with different groups were facilitated, and open-ended questions were posed to community members to get their feedback on the materials. This feedback was consolidated, and the necessary changes made.

Disability Inclusion

The SASA! Together adaptation process was completed before the programme developed its Gender Equality and Social Inclusion (GESI) strategy.⁷ Thus, the initial adaptation process was not informed by the deep dives with the Global and National Disability Inclusion Technical Advisors (DITAs) that were brought on board later in the programme. Nevertheless, the materials were considered have incorporated disability inclusion at a basic level from the outset. Emphasis was made on representing People with Disabilities (PWDs) and providing disability information within communication materials. Community Activists were sign-posted to reflect upon intersectional VAWG risk factors by considering and responding to the needs of different groups they were engaging.

Combining other prevention interventions with SASA! Together

Initially, the plan was to complement SASA! Together with Champions of Change (CoC) in the target districts. However, following the Technical Director's engagement in high level discussions around the global evidence base, consultations with Raising Voices and among team members, this plan was revised. It was noted that separating CoC and SASA! Together would allow the programme to robustly test both and have clearer attribution of results to each. This would add to the global field's understanding of effective approaches, particularly since CoC had not been robustly evaluated in Africa, and since there have been revisions in the global methodology for SASA! Together.

However, in one target area per district in which SASA! Together was implemented, a smaller Social and Economic Empowerment⁸ component, *Moyo Olemekezeka* (MO), was layered onto the approach. The combined implementation of the two interventions allowed the programme to test the effectiveness of layering a community mobilisation approach with a targeted social and economic empowerment intervention to reach at risk couples, in order to achieve a greater reduction in the level of violence at the community level than would have been possible through one intervention alone.

Unfortunately, the initial plans to scale up the approach after the three-year pilot phase did not materialise due to an early programme closure in mid-2021, following budget cuts.

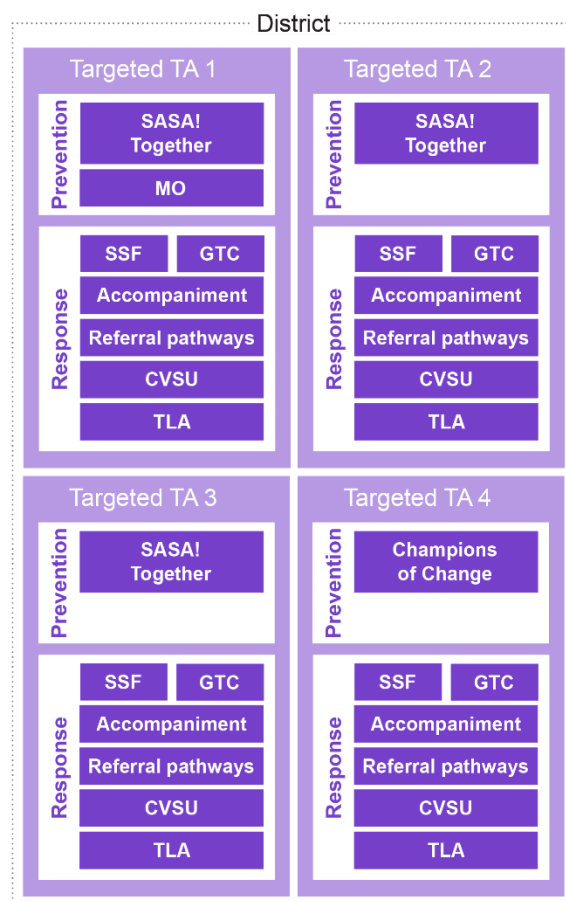


Figure 1: Geographic spread of TN interventions

⁷ Tithetse Nkhanza Programme (2020) [Gender Equality and Social Inclusion Strategy](#) Updated. London, UK: Malawi VAWG Prevention and Response Programme.

⁸ TN programme adapted the *Zindagi Shoista* (Living with Dignity) model, a family based social and economic empowerment model, to *Moyo Olemekezeka*. For more information on this see TN's learning brief on [Adapting a Combined Social and Economic Empowerment Model for GBV Prevention in Malawi: Lessons from Tithetse Nkhanza](#)

Monitoring and Evaluation: Actor-Based Change model

Tithetse Nkhanza developed a programme-wide Theory of Change using the Actor-Based Change framework.⁹ The model integrates concepts drawn from complexity science and behavioural change literature to develop robust programme theories for complex interventions. The team began with an assessment of the key actors operating within the system of behaviours that maintain and promote VAWG, diagnosing the drivers of their behaviours using the COM-B framework.¹⁰ The targeted actors and their behaviours are shown in **Box 1**. This behavioural diagnosis was then mapped against the SASA! Together intervention, to determine which drivers were likely to be addressed by the delivery of this approach in target communities. Key behavioural drivers to be addressed by SASA! Together, as theorised by the team included:

Box 1: Target actors and their behaviours

Men potential perpetrators of IPV | perpetrate IPV

Women survivors of IPV | do not speak out or seek help

Family and community members | do not challenge VAWG

VAWG Response Service Providers (Formal and Informal) | do not offer survivor-centred services

- Family and community members believe VAWG is acceptable
- Wider community members blame women for provoking violence
- Authority figures do not challenge VAWG
- Male community leaders and peers model gender inequitable behaviours and use violence
- Perpetrators can commit violence with impunity
- Personal beliefs held by men supporting gender inequality and VAWG

A Theory of Action (or causal pathway) was developed, elaborating on the process through which the delivery of SASA! Together was envisaged to address these behavioural drivers. The Theory of Change further elaborated on processes of change for other behavioural drivers that were not envisaged to be addressed by SASA! Together.

The Independent Evaluation (see below) would have determined the extent to which this Theory of Change held true for the SASA! Together intervention, and other strategies delivered by the TN programme. The programme's early closure due to budget cuts unfortunately inhibited the extent to which evidence could be generated in this regard. Other VAWG prevention and response programmes are encouraged to review the TN Theory of Change as part of their own design processes.

Monitoring and Evaluation: Digital data monitoring

Tithetse Nkhanza sought to develop a monitoring strategy for the SASA! Together intervention that both adhered to best practice, and fit within the wider Monitoring, Evaluation, Research and Learning framework developed for the programme. The programme aimed to gather data for the following reasons:

Intervention fidelity and quality assurance | TN sought to have verifiable data on the quality of delivery, both to support oversight by the programme team and address delivery issues arising, and to generate evidence to support attribution analyses during evaluative exercises

Change monitoring | TN also sought to understand changes being brought about by the delivery of SASA! Together during programme delivery, to facilitate the development of programme adaptations as necessary

⁹ Koleros, A., The Actor-Based Change Framework: A Pragmatic Approach to Developing Programme Theory for Interventions in Complex Systems, American Journal of Evaluation, 2018

¹⁰ Mitchie, S, Atkins, L, West, R (2014) *The Behaviour Change Wheel: A Guide to Designing Interventions*, Great Britain, Silverback Publishing

Change evaluation | TN engaged an independent evaluation team whose objective was to assess change and determine the attribution of this change to the programme delivery.

TN utilised digital data collection processes, wherever possible, for its internal monitoring processes. The team used a digital data collection platform developed by Tetra Tech International Development, [COSMOS](#), to gather data, and [MS Power BI](#) to automate data analysis and present findings to the team and implementing partners in real time.

Raising Voices has developed an extensive Learning and Adaptation approach,¹¹ with a range of tools that met the TN team's need for monitoring intervention fidelity and change. The TN team digitised these tools, incorporating them into the programme-wide digital monitoring system, and added the Washington Group Questions Short Set as part of the programme's aim to measure the attendance of people with disabilities in community-level activities.¹² Regrettably, the SASA! Together intervention was not delivered for a sufficient period of time to generate learning relating to the monitoring processes.

The independent evaluation strategy, developed by the independent team, focused on social norms, personal values and beliefs and behaviours relating to VAWG. Efforts were made to ensure that the anticipated changes outlined in the programme's Theory of Change, would be assessed in the SASA! Together target areas.

Lessons and recommendations

Technical expertise from originators is important

As indicated above, the TN programme received additional technical support from Raising Voices, who are the originators of the SASA! approach. This provided a rich foundation for the adaptation process, especially as the TN team had no prior experience with this revised approach in the context of Malawi. Regular interactions with the technical advisors from Raising Voices also significantly benefited the adaptation process by keeping the team focused and ensuring fidelity to the approach.

Recommendation | It is crucial to have the technical expertise of organisations/individuals who originate the intervention where possible. This means building relationships with them, ensuring budget is available for their time, and ensuring that there is enough time and resources for the training and mentoring throughout the adaptation process.

Allowing sufficient time for adaptation

The SASA! Together adaptation was initially due to fully take place during the programme's inception phase. However, it quickly became evident that this would not be possible given the amount of time that was needed for the adaptation. Additionally, there were other milestones that were required by the donor, which meant that the process would have had to move at a pace that would compromise quality had they been truncated in Inception. The TN team discussed this with the donor and re-evaluated some of the milestones to ensure that the adaptation process was done appropriately.

Recommendation | It is important to have open conversations with donors to be aware of what is possible and at what pace within a particular period to ensure that quality of adaptation is not compromised. Some adaptations can take longer than others based on context, type of adaptation and foundational work done before the adaptation.

Have clarity on timelines but accommodate flexibility

The adaptation process for the TN programme was longer than anticipated. This was primarily because the time had initially been estimated based on reporting requirements and not what was realistic. Additionally, Raising Voices was in the process of finalising the revision of SASA! into SASA! Together at the time that TN was commencing. Fortunately, TN was able to use the materials in their draft form to inform the adaptation process. Due to open communication with

¹¹ <https://raisingvoices.org/sasatogether/learning-assessment-guide/>

¹² For more on this, see Tithetse Nkhanza's [Technical Briefing Note: Measuring the Attendance of People with Disabilities in Community Engagement Activities for a VAWG Programme](#) (2020)

Raising Voices, TN was able to have flexibility in timelines to ensure that the adaptation was done well. Additionally, there was a lot of flexibility exercised by the Malawi team considering the competing priorities of other components of the programme. However, there still were some time and priority challenges due to resourcing constraints. The TN team would have benefited from additional staff in this respect.

Recommendation | It is important to ensure open communication with technical advisors on the adaptation process, making sure that everyone involved is on the same page. Adaptation processes are usually not linear processes. It is therefore important to be flexible as required. Additionally, it is important to invest in human resources to cover all components of adaptation and implementation according to the scope of the programme, competing priorities and capacity. Furthermore, clarity on roles and responsibilities should be established from the start, especially when working with a whole organisation, to ensure that everyone is clear on who the focal person(s) are for support. The relationship between TN and Raising Voices started off with unclear communication channels, leading to different guidance from different people within Raising Voices. Developing a detailed work plan with clear intervals of when to communicate helped to make the processes easier.

Selecting an adaptation team is as important as the adaptation

The TN team and implementing partners did not face many challenges in the adaptation of the approach because they had undergone a SASA! Together ToT and already met the criteria to implement the approach. To retain the momentum from the training, the adaptation process began immediately after. The implementing partners led the process of forming the adaptation teams in their districts with support from the TN District Coordinators, who were also part of the ToT. Adaptation committees were carefully selected, ensuring that all relevant stakeholders were included, as noted above. Apart from helping to ensure the most appropriate translations, the careful selection of members also helped to build local ownership of the process, as the committees included local leaders and religious leaders who have a big influence in the target areas. It was also crucial to consider the three contexts in establishing the committees. Apart from their contextual differences, factors such as costs of having one committee operating across the three target districts were considered.

Recommendation | Having a criterion of the type of organisation to implement the SASA! Together approach is important to ensure maximum impact over time. This approach, for example, can be challenging if implemented by an organisation that is rigid to change and unwilling to challenge its own power dynamics. Additionally, it is crucial to ensure that teams leading the adaptation process have been trained on the approach. Lastly, it is paramount that all relevant stakeholders are engaged in the process.

Disability inclusion should be intentional from the start

The greatest challenge faced by the TN programme in incorporating disability inclusion was the delay in setting this ambition. As noted above, the GESI strategy was not an inception deliverable and, as such, was developed in parallel with the commencement of programme implementation. This meant that disability inclusion processes were not established from the outset. The team reflected that had the GESI strategy been developed earlier, the programme would likely have included more Organisations of People with Disabilities (OPDs) in its partnership portfolio, more budget would have been allocated to disability inclusion, and more processes for assessing disability inclusion within activities would have been included in the adaptation.¹³

Recommendation | Donors should include GESI deliverables in all programme inception phases and ensure that inception phases are of adequate length to allow for the process of developing this. For VAWG programming globally, it is highly recommended that disability inclusion be a prominent aspect of GESI strategies. Practitioners implementing programmes that do not include GESI as an inception phase deliverable, or indeed do not have inception phases for their programmes, should raise this discussion with their funding partner, to negotiate timelines such that disability inclusion processes are developed very early in programme delivery.

¹³ For further reflections on this, see TN's learning brief on [Lessons on Integrating Disability Inclusion into a VAWG Prevention and Response Programme](#) (2021)