APPLYING BEHAVIOURAL INSIGHTS TO ENCOURAGE BYSTANDER ACTIONS AGAINST

GENDER-INTIMATE
PARTNER
VIOLENCE

CONTENTS

LIST OF ACRONYMS

BIT	Behavioural Insights Team
GBV	Gender Based Violence
IPV	Intimate Partner Violence
SDGs	Sustainable Development Goals
UN	United Nations
UNDP	United Nations Development Programme

PRELUDE

The initiative to work on Gender Based Violence in South Africa is motivated by the Africa Human Development Report, Acceleration Gender Equality and Women's Empowerment in Africa prepared in 2016 by the Regional Bureau of Africa under the direction of the Chief Economist Mr Ayodele Odusola. The launch of the report in South Africa was attended by representatives from the Government, the Gender Commission, civil society organisations, academic institutions and the private sector as well as a cross-section of women and youth organisations. The discussions covered all the issues highlighted in the report that are affecting the upliftment of women – including cultural, patriarchal and religious practices, the gender wage gap, gender-based violence, absence of women in leadership positions and decision making. The participants unanimously agreed that the most pressing issue affecting women in South Africa today is Gender-Based Violence (GBV).

To contribute towards addressing this problem, the study aims to understand why people, especially those closest to the survivors of GBV and other "bystanders" from the general public, do nothing or not act in a timely and effective manner and stop the violence before something more serious happens. This study therefore seeks to identify mechanisms that may spur citizen action and end "Bystanderism". Everybody has a role to play in ending Gender-Based Violence and there is always something someone can do. Passivity is not an option and apathy is intolerable. I hope that this study will contribute towards raising awareness and prompt action to fight Gender-Based Violence and support the narrative that GBV is unacceptable and we can all play a part in stopping it. At a more strategic level, I trust that this study will also contribute to the achievement of SDG 5 target 5:2: Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation.

NARDOS BEKELE THOMAS
UNDP Resident Representative and UN Resident Coordinator, South Africa

ACKNOWLEDGEMENT

This Behavioural Insight Study on Gender-Based Violence is a joint product of UNDP South Africa and Georgia and UN Women and is the winner of the 2017 UN Innovation Award. We convey our appreciation to the UN Innovation Hub Facility and to Mr. Benjamin Kumpf for his guidance during the preparation of this study. We enjoyed excellent partnership and a cordial and effective working relationship with the UNDP and UN Women Georgia team which helped to enrich this study.

This study was prepared under the guidance of the UNDP Resident Representative and UN Resident Coordinator Ms Nardos Bekele Thomas and the Country Director Mr Walid Badawi and was developed under the stewardship of a multi-partner steering committee consisting of:

Ms Fatou Leigh UNDP Economic Advisor, Dr Nelly Mary Mwaka Gender Specialist UNDP, Ms Loveness Nyakujarah Gender Specialist UN Women, Ms Jennifer Mceneaney UNV Gender Programme Officer, Ms Yoliswa Macoba Programme Associate UNDP and Ms Sindiswa Mathiso UN Wellness Coordinator. Technical support was also provided by Dr Isabel Schmidt and Ms Babalwa Nyangintsimbi from Statistics South Africa and Siyethemba Kunene from CPSI. The team also received notable collaboration from Department of Community, Gauteng and Department of Social Development, Gauteng under the leadership of Ms Yoliswa Makhasi and Ms Thembeni Mhlongo and their respective teams Ms Conny Ramathibela, Ms Nnana Mulaudzi and Ms Pearl Moabelo. This study would not have been possible without their valuable partnership. Appreciation is also extended to the Department of Social Development for their partnership.

The dedication and support of Ms Sibongile Kubeka Programme Associate UNDP and Ms. Lerato Maimela Procurement Associate UNDP and of former colleagues Ms Ayako Kubodera UNWomen and Lindiwe Dlamini UNDP are duly acknowledged. Ms Fatou Leigh and Ms Lindiwe Dlamini worked tirelessly with the Innovation Hub in initiating Behavioural Insight on GBV in South Africa.

The enumerators that were recruited to conduct the interviews demonstrated maturity, sensitivity and understanding. Ms. Anele Sikhahane, Ms. Boitumelo Ramontja and Ms. Zandile Jiyane are all noted for their commitment and professionalism. Appreciation to all participants for their robust discussions and contributions during the preparatory workshops of this study. Last, but not least, our utmost appreciation to the respondents who gave us valuable and deep insights into this study, even when it was difficult and uncomfortable to talk about their experiences.

All commendations to the consultants, Behavioural Insight Team, for their innovative approaches and for leading this study with competence and understanding.

This study received ethical approval from the Human Science Research Council, South Africa prior to its execution.

The entire team that worked on this study is motivated by the belief that combating Gender-Based Violence requires a joint effort and that when we all play our part, we will contribute to eliminating all forms of violence against women and girls in the public and private spheres as envisioned in Sustainable Development Goal 5.

PROJECT OVERVIEW & GOALS

INTRODUCTION

THE GOAL Mobilize bystanders against gender-based violence

THE OPPORTUNITY Applying behavioural insights

THE APPROACH Collaboration and capacity-building

MOBILIZE BYSTANDERS TO SUPPORT IPV SURVIVORS
THE G⊙AL

Intimate partner violence (IPV) is a leading cause of death and disability for women worldwide
- In Georgia, a 2017 study revealed that 14% of ever-partnered women between the ages of 15-64 report having been abused by their partners.
- In South Africa, the national statistics office reports that one in five women have experienced violence from a partner in their lifetimes
- When IPV occurs, the survivor or perpetrator's friends, neighbours, or family members often witness or suspect what is happening. These bystanders can play an important role in IPV prevention and reduction, offering help to a survivor or helping to impose consequences on the perpetrator.
- Frequently, however, bystanders look the other way, and survivors are left unsupported.

To address this issue, the Behavioural Insights Team (BIT) and the UNDP country teams in Georgia and South Africa collaborated to apply a behavioural approach to encouraging bystanders' actions against IPV. The implementing team included partners from U.N. Women, Georgia's Innovation ServiceLab, and other agencies and NGOs. The project had two parallel goals:
- Develop and test an evidence-based, BI-informed intervention pilot to encourage bystanders to engage with IPV prevention and response resources
- Use a hands-on approach to build UNDP country teams' and partners' capacity to apply the BI approach in future work

APPLY BEHAVIOURAL INSIGHTS
THE ⊙PPORTUNITY

- All bystanders to IPV face a choice: Act to help protect a survivor of IPV, or not?
- Whether they've witnessed IPV personally, suspect it within a relationship, or know about instances from family, friends, or neighbours, every bystander must make a decision about whether they will take an action. However, the default option (not taking action) can be quite powerful and the chance of defusing responsibility to others helps excuse inaction.
- In order to change bystander behaviour and make it more likely that they will act, we first need to understand the factors influencing those decisions: What are the barriers to action, and how can we address them?
- Behavioural science—the interdisciplinary study of how and why people make the decisions they do—gives us tools to approach that change strategically, identifying the barriers (no matter how insignificant they may seem) that can tip the balance between action and inaction.
- Applying these behavioural insights can help decisionmakers develop programs and policies that more effectively encourage bystanders to act when they reach those crucial decision-making moments. Ultimately, that can make the difference that results in more survivors receiving the support they need.

COLLABORATION WITHIN THE TESTS FRAMEWORK
THE APPROACH

BIT and the UNDP country teams worked together to apply BIT's TESTS framework, which structured the process of applying behavioural insights to reach our goals:

Target & Explore
In these stages, we used an iterative, multi-method approach to answer two core questions:
- What bystander behaviours are helpful for IPV survivors in Georgia and South Africa?
- What are the barriers to those behaviours?
This exploratory research helps us build hypotheses around which barriers we can address, and how.

TARGET: Define the problem

SOLUTION
In this stage, we drew on the findings from our Explore phase and the broader behavioural science evidence base to develop an intervention encouraging our target action. In the solution phase, we answered the questions:
- What behavioural levers can we use to encourage the desired behaviour?
- How will we reach people with our intervention?

EXPLORE: Understand the context

SOLUTION
Generate ideas

Trial & Scale
In these stages, we implemented our intervention and tested the results using a randomized controlled
trial (widely considered the gold standard for evaluation). This allowed us to assess:
- What was the effect of our intervention?
- What did we learn, and how can we apply it in future work?
In this report, we summarize activities and findings from each stage of our collaboration.

| TARGET: DEFINE THE PROBLEM	EXPLORE: UNDERSTAND THE CONTEXT	SOLUTION: GENERATE IDEAS	TRIAL: EVALUATE OUTCOME	SCALE: ADOPT LEARNINGS

TARGET AND EXPLORE

SECTION ONE

Assessing the context and identifying barriers to bystander action

- Overview

- Methods

- Findings

TARGET & EXPLORE

OVERVIEW
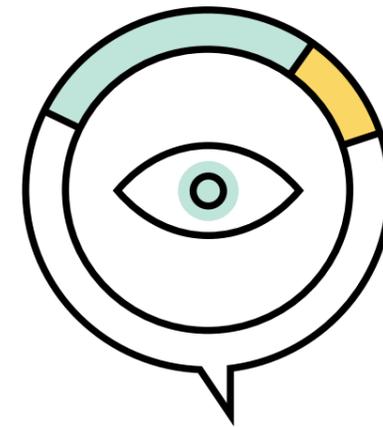
The Explore phase is when we develop behavioural hypotheses based on quantitative and qualitative data. In later phases of the project, those hypotheses help us build an intervention, which will be tested via a randomized controlled trial.

At this stage in the project, our goal was to develop informed hypotheses around two core questions:
- What can bystanders do to help survivors of IPV?
- What are the barriers to those helpful actions?

In developing those hypotheses, we identified similarities across each country setting, as well as country-specific context that could influence our intervention approach.
Our methods included field research and desk research on IPV, bystanders, and behavioural insights

more broadly. For Georgia, we drew particularly heavily from the recent national study on violence against women, developed by U.N. Women and the National Statistics Office of Georgia

In the following slides, we present more detail around our methods, and summarize our findings around those key questions and the country-specific context.

Interviews & Observation

- Two mission trips for on-the-ground research
- Stakeholder interviews and site visits with law enforcement, first responders, policymakers, and service providers
- Structured interviews with over 50 total bystanders, survivors, and service providers.

Service Mapping

- Identified and documented service providers operating locally and nationally
- Conducted due diligence through observation (e.g. calling a hotline) and stakeholder interviews

TARGET & EXPLORE:

WHAT WE DID

Secondary Research

- Reviewed the evidence base (from academic and practitioner research) relevant to IPV and bystanderism
- This included IPV-specific research, behavioural science literature, and relevant findings from other disciplines and issue areas such as public health

See appendix for sources

Data

- Reviewed available data around IPV in Georgia and South Africa (e.g. call-centre data, incidents reported to police, survey responses)

FINDINGS:

WHAT CAN BYSTANDERS DO TO HELP IPV SURVIVORS?

Our exploratory research indicated that survivors in both countries do not receive sufficient emotional support. For example, they:
- Experience pain from lack of emotional support, and their desire for someone to value and encourage them
- Want to be strong and independent, but feel isolated and dismissed
- Feel pressure to be patient and obligation to bear the abuse
- Face shame and social stigma from leaving an abusive relationship, particularly after marriage or children
- Feel pressure to protect the family reputation by keeping quiet about the abuse
- Frequently normalize the abuse as a relationship issue when friends or family say something

We also found that survivors in both countries need greater support to access services.
- Common themes among survivor experiences included:
- The impact of logistical barriers (money, housing) to establishing independence
- The need for counselling and legal support, particularly around housing and custody
- Insufficient information about available services to meet those needs
- Perceptions that services are only for poor or homeless women

Our research indicated that bystanders in both countries…

Hold negative social norms (or perceived social norms)
- Consider abuse to be a private matter between two people
- Believe that others in their community would see it as interfering or breaking up a family if they intervene
- Have the perception that women are obligated to keep their family together

Experience knowledge gaps around how they can help
- Not aware of what services are available or how survivors can access them
- Unsure how to help their friends/family socially, fear angering someone if they try
- Don't consistently recognize non-physical abuse

Feel fatalism and helplessness
- Believe that abuse is so common that there's nothing to do about it, it's a fact of life
- Believe that helping only matters if the person being abused will leave, which is considered unlikely

Fear retaliation
- Fear that the abuser or his/her associates will retaliate
- Fear that the survivor will turn on them

F**I**NDINGS:

COUNTRY-SPECIFIC CONTEXT

In South Africa, a sense of urgency, but potentially limited options
- Physical abuse is widely recognized as an issue; e.g. there have been high-profile public demonstrations around the need to address violence against women
- According to interview respondents, police are not providing support to survivors. Survivors report being ridiculed, dismissed, and having their abuser avoid consequences by paying a minimal bribe. In addition, police are the referral pathway to public services, and if they don't agree to open a case, survivors may not be able to access those services.
- Despite that, respondents frequently suggested that bystanders could call the police (perhaps because other service options were limited) but expressed doubt that it would help.
- Alcohol was cited as a contributing factor to abuse, and as a form of self-medication for survivors

In Georgia, changing social norms, and an emerging landscape of services
- In the wake of recent highly publicized policy changes, bystanders have good knowledge about what constitutes IPV (not just physical violence).
- National surveys indicate a rapid decline in acceptance of IPV, but many abusive behaviours are still considered normal, particularly those related to a man's "right" to control his wife's decisions.
- Comprehensive services (e.g. housing, job training, counselling) are available and coordinated through state-sponsored service providers, but only recently, and uptake is low.
- This may be partly because accessing those services requires survivors to obtain a special legal "victim status," determined by the police or a council under the Prime Minister's office. Survivors who are not ready to share their experience in that setting therefore, face additional barriers to receiving help.
- National surveys indicate that many Georgians are aware of these services, but the interviewees had low awareness of specific non-police services they could access.

SOLUTION DESIGN
SECTION TWO
Developing a behaviourally-informed intervention

- Overview

- Reaching the target audience

- Applying behavioural levers to target barriers

- South Africa & Georgia intervention designs in practice

SOLUTION DESIGN

USING BEHAVIOURAL LEVERS TO INFLUENCE THE TARGET AUDIENCE

- Behavioural interventions can help bystanders overcome the barriers identified in the previous section, using evidence-based behavioural levers to target each issue.
- Those levers can include changes in processes, policies, services, communications, and more. To define a manageable scope within these options, we focused on communication targeting bystanders.

To design a communications-based solution, we needed to answer two questions:
- What behavioural levers can we incorporate into our messaging to effectively target barriers to bystander action?
- How can we deliver those messages to our target audience?

In the following slides, we summarize our findings and decisions around those two questions.

REACHING OUR TARGET AUDIENCE (PRIMARY INTERVENTION)
- In both Georgia and South Africa, we decided to deliver our primary messages via Facebook ads, using engagement with the ads (measured by clicks to "learn more") as our target outcome.

This offered several advantages, allowing us to:
- Build capacity within the UNDP teams for a scalable, replicable, and transferable intervention and trial methodology (a primary goal of this project).
- Quickly and affordably reach a large sample size (over 100,000 viewers), which gave us the statistical power to detect small differences in the way people responded to the ads.
- Typical Facebook ads have click-through rates of less than 1%, so targeting a large viewer audience gives us power to collect a large enough sample of click-throughs to accurately assess an ad's performance.
- Learn more about which message frames most effectively motivate our target audience to engage (a finding which can have relevance well beyond our specific trial).
- Measure our outcome indicator reliably, through Facebook's ad platform metrics.
- Use the ad to link to additional online resources, which provided valuable information to viewers—and another intervention opportunity, as discussed in the following slide.
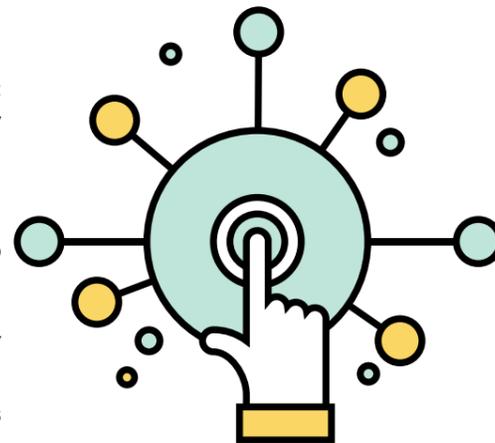
In exchange for these advantages, we accepted some downsides:
- Our ad could only be seen by Facebook users, which likely wouldn't include people with very low incomes and limited internet access– for example, poor residents in rural areas.
- Engagement with our ad is an indicator that a bystander might be willing to take action, but it does not tell us with certainty whether they did in fact change their behaviour in the real world. It is a step towards action, but more research would be needed to understand the full pathway from engagement to impact.

REACHING OUR TARGET AUDIENCE (SECONDARY INTERVENTION)
Reaching our target audience (secondary intervention)
- We directed viewers who clicked on our Facebook ads to a landing page with additional resources around how to help.
- We designed these pages to be interactive, offering more opportunities to incorporate behavioural levers.
- We created the landing page in Google forms, which had advantages and disadvantages:
  - We could collect user-submitted information and measure engagement with the page reliably and cheaply.
  - However, we could not customize the visuals for the page; we were therefore limited to incorporating behavioural levers related to content, rather than those related to design.
- We anticipated low engagement rates for this secondary intervention, based on typical click-through benchmarks, but we hoped it would (1) be a valuable resource for those who did take advantage of it; (2) provide additional qualitative context which would be useful for further work; and (3) provide additional capacity-building experience for the UNDP and partner teams.

BUILDING OUR BEHAVIOURAL LEVERS: **SOCIAL NORMS**

As noted earlier, negative social norms around abuse as a private matter were frequently acting as a barrier to bystander action. Even if bystanders themselves didn't believe that, they believed others would, and they feared social judgment for going against that belief.

In Georgia, we tackled that barrier by providing information demonstrating that the true social norm was different– most Georgians don't believe that abuse is a private matter. These data came from the recent national survey on violence against women, which found that 33% of Georgian women and 50% of Georgian men (not a majority, in total) believe that such violence is a private matter. We hypothesized that correcting the misperception would reduce the impact of that barrier, and perhaps even replace it with a positive social norm around taking action.

In South Africa, we didn't have statistics around the social norm, so we relied on a clear declarative statement that abuse is not a private matter, coupled with language framing action as a duty and responsibility. We hypothesized that the unambiguous message and moral frame could lead viewers to reassess their own perceived social norms within a new moral frame. This could help establish new perceptions of social norms around what would be considered moral behaviour, and/or help establish new moral frames which could motivated action even if perceived norms remain unchanged.

BUILDING OUR BEHAVIOURAL LEVERS: **REFRAMING SUPPORT**

- In both countries, the bystanders interviewed often indicated that they felt intervening wouldn't do anything anyway. That perception of helplessness was a barrier to action.
- Perceived helplessness was often connected to an overly narrow mental model of "helping," e.g. solving the survivor's logistical or social barriers to exiting the relationship. If that didn't seem feasible, bystanders assumed there was nothing they could do.
- The impact of this barrier was heightened in South Africa, where formal services

(which can help overcome those barriers) were less available. In Georgia, bystanders were more likely to feel that connecting survivors to formal services was a viable option.

- To reduce helplessness, we developed messages reframing emotional support as a high-impact option; this was in line with what survivors prioritized. Our goal was to prompt bystanders to broaden their mental model of helping, incorporating emotional support. We hypothesized that this approach would reduce encourage action by making a highly feasible option more appealing and easier to recall.

BUILDING OUR BEHAVIOURAL LEVERS: KNOWLEDGE GAPS

In Georgia, we saw that even though there were services available for IPV survivors, it was unclear to many bystanders what those services were and whom they were designed to serve. Lack of knowledge around available services was therefore acting as barrier to bystander action.

In both countries, bystanders described hesitation around speaking to a survivor about the abuse, not knowing what to say or how the survivor would react. Uncertainty about how to approach an awkward and difficult conversation was therefore acting as a barrier to action.

We incorporated these findings into our call to action, telling viewers to click to learn more. In Georgia, we offered two versions of that message to tackle both knowledge gaps; one offered tips on how to support someone, while the other offered information about specific services. In South Africa, where the service landscape was less consistent, we used a single, more general "how to help" message.

We also incorporated these findings into the materials on our landing page, offering concrete tips and resources.

BUILDING OUR BEHAVIOURAL LEVERS: PLANNING, TIMELINESS, AND COMMITMENT

Our ads were designed to help viewers form an intention to offer help. But in behaviour change, intentions are only half the battle; they do not necessarily translate to action. We used several additional behavioural levers to increase the likelihood that bystanders would follow through on their intention to help:

Forming a concrete plan is a well-studied tactic to increase the odds of follow-through. We therefore developed specific questions for viewers to fill out on the landing page, prompting them to consider specifics of how and when they would offer help.

Timing is another important factor in translating plans to action. Deadlines, for example, are an effective way to motivate behaviours; we therefore incorporated deadline-related language into our ads (e.g. telling viewers to act now or regret it later) and added a question to our landing page asking viewers to pick a date by which they would help. We also used the landing page to enable timely reminders; viewers had the option to submit their email address in order to receive a reminder message at a later date.

The same questions around planning and timely reminders serve to create a sense of commitment for bystanders. Answering the questions, particularly if submitting an email, is making a (fully voluntary) external commitment, which has been shown repeatedly in behaviour research to improve follow-through.

PUTTING IT INTO PRACTICE:

SOUTH AFRICA ADS

In South Africa we used two different combinations of behavioural levers to target helplessness and social norms barriers.

We did not develop versions focused on services, as they are not consistently available at a national level. That gives a service-based message potential to backfire by frustrating viewers.

TARGETING HELPLESSNESS

TARGETING NEGATIVE SOCIAL NORMS

SOUTH AFRICA'S LANDING PAGES

INTRO FOR VIEWERS OF THE "HELPLESSNESS" AD:

INTRO FOR VIEWERS OF THE "SOCIAL NORMS" AD:

QUESTIONS FOR ACTION PLAN (ALL VIEWERS)

BODY TEXT (ALL VIEWERS)

PUTTING IT INTO PRACTICE:

GEORGIA'S INTERVENTION MESSAGES

We developed our Georgia intervention messages to include four different combinations of behavioural levers targeting our priority barriers. The English translation is presented below:

VERSION 1: When someone is being mistreated by their partner, a friend makes a difference. You can be that friend. Learn what you can say or do to support them.

VERSION 2: When someone is being mistreated by their partner, a friend makes a difference. You can be that friend. Learn how you can connect them to services, job centres, and shelters.

EXPLORING THE IMPACT OF DIFFERENT KNOWLEDGE GAPS
### EXPLORING BARRIER TO ACTION

VERSION 3: Only a minority of Georgians think you should stay quiet if you know of that IPV is a someone being mistreated by their partner.private. Learn what you can say or do to support them.

VERSION 4: Only a minority of Georgians think you should stay quiet if you know of someone being mistreated by their partner. Learn how you can connect them to services, job centres, and shelters.

GEORGIA ADS
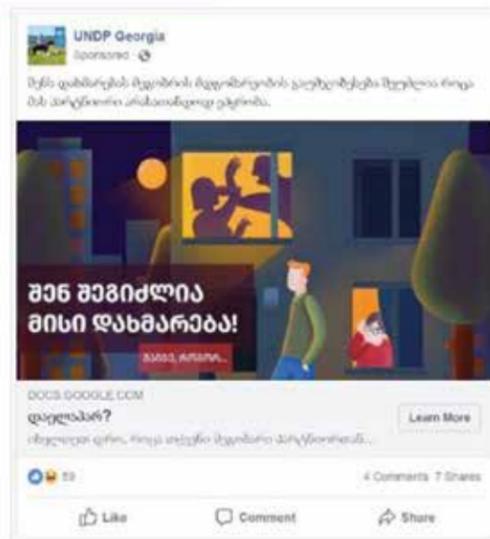
SUPPORT* + HELPLESSNESS
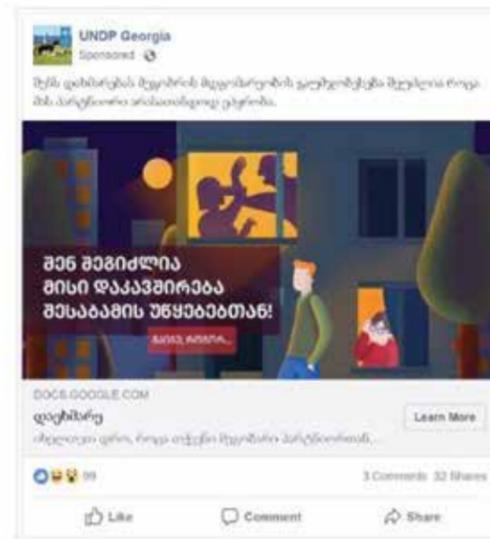
SERVICES + HELPLESSNESS

*Due to an unexpected interaction between Google Forms and Facebook, each "Support" message had a '?' in the headline (as seen above) instead of the last. Georgian characters. However, there is no indication that the question mark deterred clicks, as those ads were high performers.
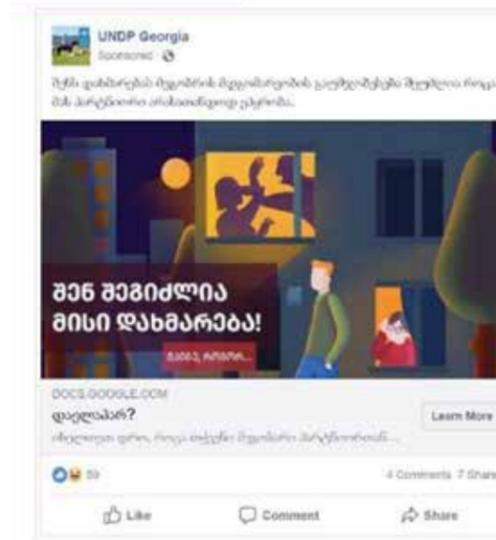
SUPPORT + PRIVATE MATTER
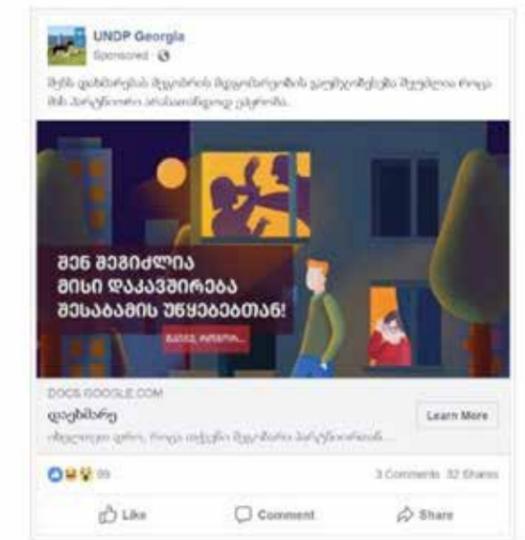
SERVICES + PRIVATE MATTER

GEORGIA LANDING PAGE (SERVICE-FOCUSED)

CONCRETE TIPS FOR CONNECTING SURVIVORS TO SERVICES

QUESTIONS FOR "ACTION PLAN"

CONCRETE TIPS FOR OFFERING EMOTIONAL SUPPORT

QUESTIONS FOR "ACTION PLAN"

SECTION THREE

Testing for outcomes and learning from the results

- Overview

- South Africa trial design & results

- Georgia trial design & results

- What did we learn, and how can we apply it in

  future work?

TRIAL & SCALE

GOALS FOR THIS PHASE

In this phase, we apply rigorous evaluation methods to answer two questions:
- What can we say about the impact of our intervention, overall and within each version? This includes understanding how the intervention influences the target outcome, as well as, when possible, linking that target outcome to broader impact goals.
- What do those findings mean for next steps and future work?
- Rigorous testing gives us confidence that our interventions are doing what we think they're doing.
- Alternatively, it shows us when we are headed down the wrong path, potentially wasting resources or even causing harm through an ineffective strategy.
- In the following slides, we summarize our findings and decisions around those two questions.

Note: A detailed explanation of analysis methods is shown in the Appendix.

METHODS OVERVIEW
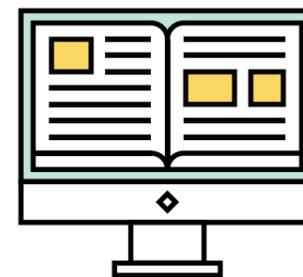
Our overall goal was to better understand how changes in messaging could influence whether bystanders engaged with IPV resources. This richer understanding could then inform additional research and future messaging designs.
- Specifically, our trial tested whether our different messaging frames influenced whether Facebook users clicked on our ads for more information. Our trial included quantitative and qualitative elements:
- Using Facebook, we conducted two randomized controlled trials (one in Georgia, and one in South Africa) to test engagement, determining which of our messages most effectively motivated viewers to click through.
- Using Google forms, we also collected qualitative data on how people interacted with the behaviourally-informed landing pages. This gave us additional context around the services and actions perceived to be most useful or feasible.
- The findings from this trial are directly applicable for messaging campaigns targeting bystanders, particularly in online settings.
- Lessons learned through this process can also inform the broader landscape of interventions; e.g. the content of the 112 app in Georgia, or the processes for accessing services in South Africa.

TRIAL & S**C**ALE

FINDINGS OVERVIEW

Across both countries, we reached 253,036 viewers, generating 4,130 clicks and 128 action plans, for a total cost of $428 USD.

Engagement with ads in both countries was unusually high. In Georgia, 1.6% of viewers clicked the ads. In South Africa, the number was 1.7%. This is 60-70% higher than the average Facebook click-through rates.

Even the lowest-performing ad had a click-through rate approximately 30% higher than Facebook averages. This high level of engagement suggests that there is demand for GBV-related content, and that Facebook is an effective--and cost-effective—way to deliver it.

Of users who clicked through to the landing pages, approximately 3% went on to submit action plans. We don't have precise benchmarks for this, but as submitting an action plan is a much more difficult action than the first click, this rate—twice the original click-through rate– is also likely a signal of high engagement.

In Georgia, one of the ads—the ad combining positive social norms with a message indicating that emotional support can help—significantly outperformed the others.

This aligns with the barriers we identified in the exploratory research (social pressures and sense of helplessness), and suggests that messages targeting those barriers may be effective.

In South Africa, both ad versions performed equally well. This suggests that the barriers we identified and targeted are both relevant, and that either frame could be effective. In the next slides, we present trial designs and findings in more detail.

TRIAL D**E**SIGN

SOUTH AFRICA

In South Africa, we tested our two different ad messages against each other.
- Participants were randomly assigned to see one of the two ad versions through Facebook's Ad Splitter.
- If a participant clicked on this ad to "Learn More" they were directed to one of 2 versions of a landing page where they could submit an action plan.

AD	LANDING PAGE

SUBMIT ACTION

Landing pages include:
- Information about how to help survivors
- "Action plan" questions to help people plan to help in the future.
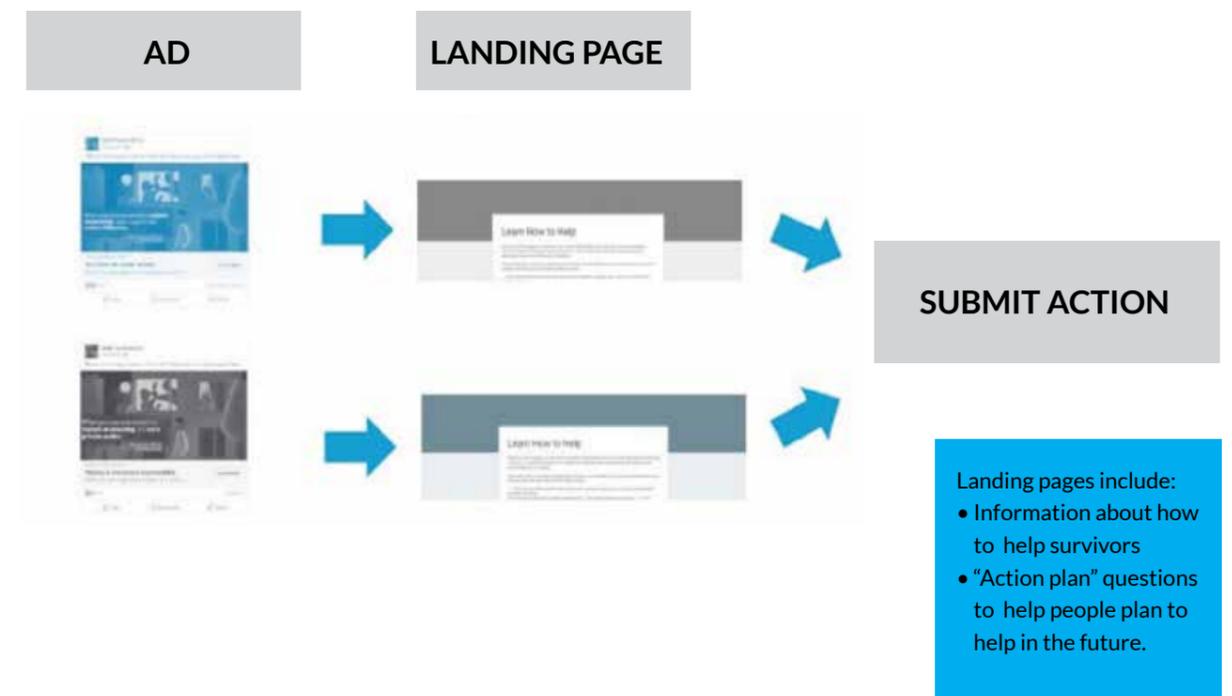
SOUTH AFRICA OVERVIEW

TOTAL UNIQUE VIEWERS	TOTAL CLICKS TO LANDING PAGE	ACTION PLANS SUBMITTED
103, 591	1,806	22

SOUTH AFRICA RESULTS

Overall engagement rates were high for both ads (approximately 70% above the Facebook average). We did not find a significant difference in how effective each ad was at encouraging people to click through to "Learn More."

This result may mean that people are equally motivated by messages that tell them they can help and messages that tell them they should, additional research may help to tease whether or not people think of these barriers differently.

Unlike in Georgia, the message addressing the belief that abuse is a private matter ("Should Help") was not a clear frontrunner. There may be more effective ways of addressing this barrier (for example, with statistics showing majority support for intervention, as in the case of Georgia).

Given these questions, social norms messaging may be particularly effective and an interesting avenue for further research.

Likelihood of clicking on each ad

n=103,591
*** p<0.001, ** p<0.01, * p<0.05, + p<0.1
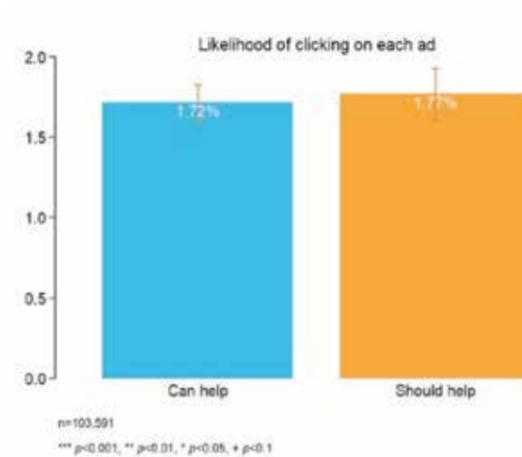
SOUTH AFRICA RESULTS BY GENDER

Both ads seemed to perform similarly, amongst men and women. Women seem less likely to engage with either ad, but we cannot say what's driving this effect. This is an interesting comparison to the ads in Georgia, where women appeared to be more likely to engage than men.

Likelihood of clicking on each ad by gender

n=103,260
*** p<0.001, ** p<0.01, * p<0.05, + p<0.1
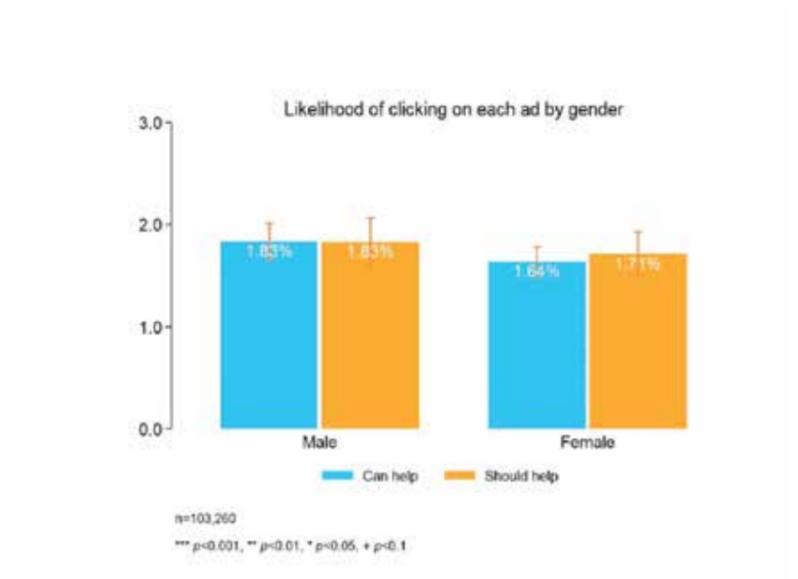
SOUTH AFRICA AUDIENCE CHARACTERISTICS

Gender	Total number of viewers	Proportion who clicked	Age	Total number of viewers	Proportion of viewers who clicked
Male	50,110	1.83%	18-24	43,219	1.49%
Female	53,150	1.67%	25-34	24,086	1.96%
Unknown	331	.60%	35-44	10,669	1.88%
			45-54	7,056	2.01%
			55-64	6,529	1.95%
			65+	12,032	1.84%

We can observe that women seem less likely to click than men

We can observe that, generally, older people seem more likely to click than younger

SOUTH AFRICA RESULTS BY AGE

No large differences in ad performance exists in any age group. Older women seem somewhat more likely to click than younger women, but this effect does not exist among men.

Likelihood of clicking on each ad by age

n=91,559
*** p<0.001, ** p<0.01, * p<0.05, + p<0.1
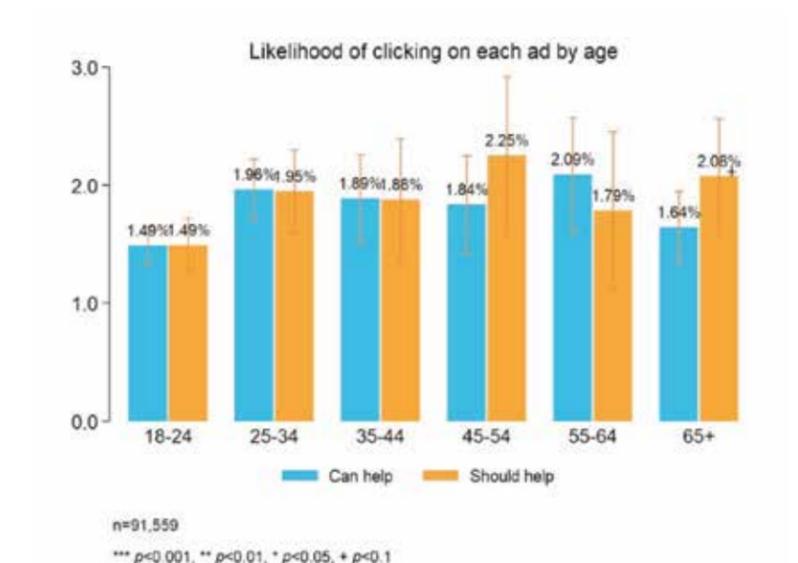
SOUTH AFRICA AD RESULTS: INTERACTION & ENGAGEMENT

Message	Total number of viewers	Number of viewers who clicked	Number of shares	Number of people who completed action plan	Proportion of people who completed an action plan, out of everyone who clicked on the ad
Can Help	51,631	886	21	12	1.35%
Should Help	51,960	920	18	10	1.09%

SOUTH AFRICA LANDING PAGE RESULTS: WHAT VIEWERS DID

Message	Number who completed an action plan	Number who said they knew someone to help	Number who said they would help within 2 weeks	Number who said they would help within 1 month	Number who said they would help within 2 months
Can Help	12	4	4	0	0
Should Help	10	2	1	0	1

SOUTH AFRICA LANDING PAGE RESULTS: WHAT VIEWERS COMMIT TO DO

Message	Number who completed an action plan	Number who said they would tell a survivor there was no shame in experiencing abuse	Number who said they would help a survivor find a place to stay	Number who said they would help a survivor find ways they can earn money
Can Help	12	9	7	3
Should Help	10	5	4	6

SOUTH AFRICA FINDINGS: WHAT DO THEY MEAN?

- Both ads demonstrated high levels of engagement, including sharing. On average, Facebook ads have a click through rate of less than 1%, each ad we tested was more than 70% larger than this average.
- Though we were not able to distinguish which ad was more effective, we think they were both successful. Further research that tests different messaging around one of the specific barriers addressed by these ads would likely provide useful information in how to hone these messages even more.
- Once participants reached a landing page, their likelihood of completing an action plan was very similar no matter the ad or landing page they saw.
- Additional research can be performed on what messages perform best for each gender. Women were less likely to engage with these ads; it would be interesting to learn if women are less likely to engage in general or if they are motivated by different messaging all together.

TRIAL DESIGN

GEORGIA

In Georgia, we tested our four different ad messages against each other.
- Participants were randomly assigned to see one of our four ad versions through Facebook's Ad Splitter.
- If a participant clicked on this ad to "Learn More" they were directed to one of 2 versions of the landing page where they could submit an action plan.

Landing pages include:
- Information about how to help survivors
- "Action plan" questions to help people plan to help in the future.

AD	LANDING PAGE

SUBMIT ACTION PLAN

Option to submit email address for follow up
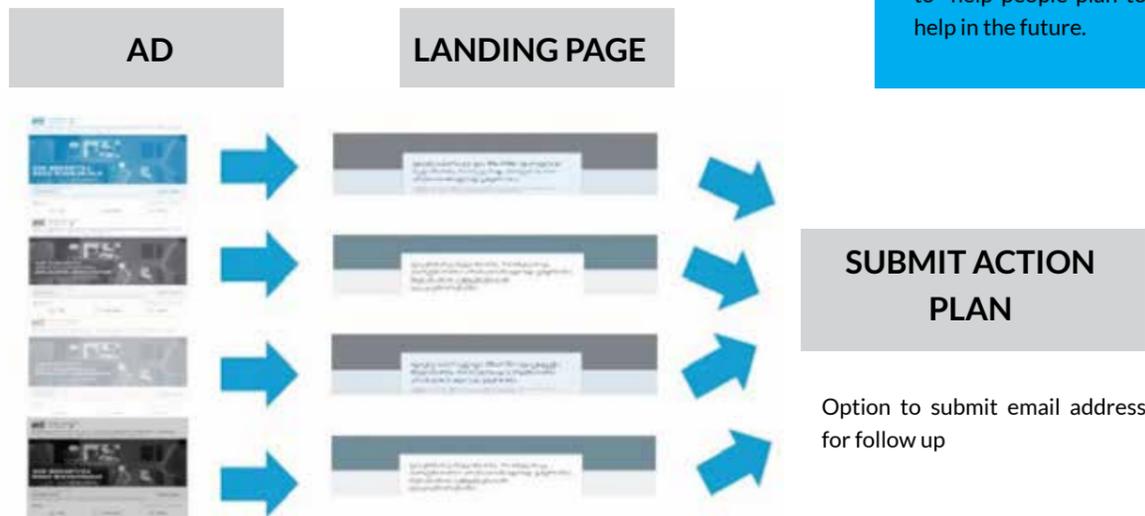
TRIAL RESULTS: GEORGIA OVERVIEW

TOTAL UNIQUE VIEWERS	TOTAL CLICKS TO LANDING PAGE
149,445	**2,324**

EMAILS SUBMITTED	ACTION PLANS SUBMITTED
20	**116**

GEORGIA AUDIENCE CHARACTERISTICS

Gender	Total number of viewers	Proportion who clicked	Age	Total number of viewers	Proportion of viewers who clicked
Male	35,774	1.09%	18-24	31,115	.85%
Female	113,412	1.70%	25-34	36,381	1.38%
Unknown	259	.39%	35-44	27,497	1.40%
			45-54	23,032	1.68%
			55-64	20,687	2.36%
			65+	10,733	2.74%

We can observe that women seem more likely to click than men.

We can observe that older people seem more likely to click than younger.

SOUTH AFRICA FINDINGS: WHAT DO THEY MEAN?

The ad that performed best combined:
- Tips on providing social support
- Social norms to tell people that abuse is not a private matter.
- Overall, ads focused on providing social support performed better than ads focused on services.
- Descriptively, the "Service + Private Matter" ad performed the worst.

However, this difference was not statistically significant when compared to "Service + Helplessness" and performed only marginally worse than "Support + Helplessness."
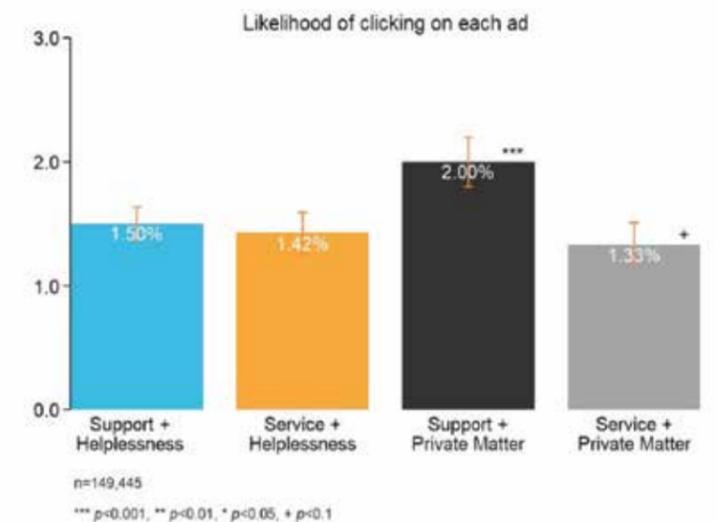
GEORGIA RESULTS BY GENDER

We examined how each ad performed with men and women and found a similar pattern of ad performance.

However, among men alone we did not find that any ad was significantly better or worse than another. This suggests the success of the "Support + Private Matter" ad was largely driven by its effect on women.

Likelihood of clicking on each ad by gender
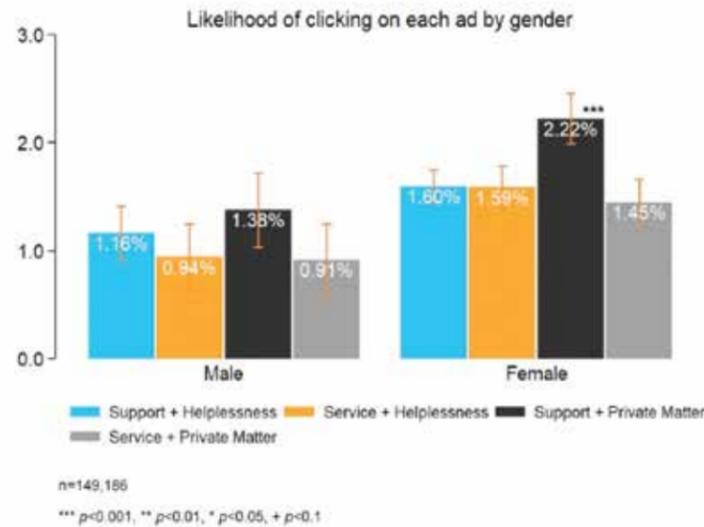
GEORGIA RESULTS BY AGE

The pattern of ad effect also persists across age ranges, though it is less distinct in younger age groups (18-44). The strength of "Support + Private Matter" is largely seen among ages 45-65+.

Likelihood of clicking on each ad by age
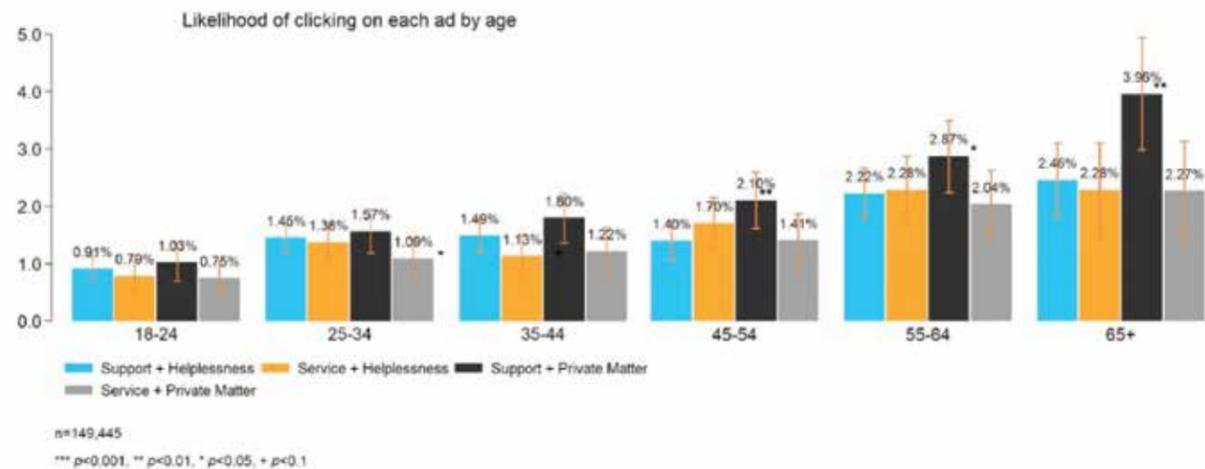
GEORGIA AD RESULTS: INTERACTION & ENGAGEMENT

|	Total number of viewers	Number of viewers who clicked	Number of Shares	Number of people who completed action plan	Proportion of people who completed an action plan, out of everyone who clicked on the ad
Support + Helplessness	33,384	501	7	17	3.39%
Service + Helplessness	49,047	698	32	38	5.44%
Support + Private Matter	34,971	699	15	31	4.43%
Service + Private Matter	32,043	426	16	30	7.04%

GEORGIA LANDING PAGE RESULTS: WHAT VIEWERS DID

Message	Number who completed an action plan	Number who said they knew someone to help	Number who said they would help within 2 weeks	Number who said they would help within 1 month	Number who said they would help within 2 months
Support + Helplessness	17	6	1	0	4
Service + Helplessness	38	9	4	3	0
Support + Private Matter	31	10	6	2	0
Service + Private Matter	30	6	5	1	0

GEORGIA LANDING PAGE RESULTS: WHAT VIEWERS COMMIT TO DO

Message	Number who completed an action plan	Number who said they would tell a survivor there was no shame in experiencing abuse	Number who said they would help a survivor find shelter	Number who said they said would help a survivor find find ways they can earn money
Support + Helplessness	17	2	0	3
Support + Private Matter	31	2	1	7

GEORGIA LANDING PAGE RESULTS: WHAT VIEWERS COMMIT TO DO

Message	Number who completed an action plan	Number who said they would connect a survivor to state services	Number who said they would connect a survivor to an NGO	Number who said would they would tell a survivor to call 112
Support + Helplessness	38	17	22	21
Support + Private Matter	30	16	22	20

Due to an implementation error, participants who saw a "Support" landing page (top table) were only allowed to choose 1 choice, in all other instances they could choose up to three.

GEORGIA FINDINGS: WHAT DO THEY MEAN?

The "Support + Private Matter" ad was the clear front runner. Offering people ways of providing social support and emphasizing that abuse is not a private matter through the use of social norms seems to be a particularly effective way to encourage engagement.

While ads focusing on social support seemed to do better overall, it is likely that the nature of additional messages that this focus is paired with matters greatly. It may be that a message that focuses on social norms, like the "Private Matter" messages, is a particularly salient way to encourage social support.

Facebook may be a better method to reach older people than we had previously thought and older people may be particularly motivated to intervene as active bystanders. The "Support + Private Matter" was especially effective among people over 45.

While the ads varied in how effective they were at getting people to click to the landing page, once people arrived there they submitted action plans at similar rates. The "Service + Private Matter" performed better than "Support + Helplessness," but we can't be sure that this difference can be attributed to the differences in ad that participants saw.

CONCLUSIONS & NEXT STEPS

- There were high rates of engagement with the materials we created– in both countries, engagement was nearly double that of the average Facebook ad. This indicates that there is interest in bystander guidance resources.
- However, the differences in engagement between the ads in the Georgia trial also demonstrated the importance of small tweaks in messaging.
- The lessons learned around these small tweaks– e.g. the importance of correcting perceived social norms—can be used to inform the development of potentially bystander-facing programs and materials, e.g. the 112 app in Georgia.
- Given that, it will be important to continue exploring additional barriers and message frames, as well as to continue exploring and refining our understanding of other barriers. This will suggest the need for more qualitative research and more quantitative testing.
- After their hands-on role in this project, the UNDP country teams are well positioned to take that work forward.

APPENDIX 1

ANALYSIS METHODS

METHOD

EVALUATION METHOD:
- We ran a randomized controlled trial (RCT) to evaluate the effect of the messages in both countries.
- We did this by using Facebook's Ad Split function, which automatically:
- Creates random and non-overlapping audiences
- Shows one ad to each audience
- Reports the number of unique viewers of each ad ("Reach")
- Report the number of unique link clicks from each ad

WHY EVALUATE?
- Evaluation allows us to build an evidence base and continually improve messaging and services.
- Ineffective messages are bad– unintentionally harmful messages are worse. Evaluation helps us avoid both.

IN DETAIL: RANDOMIZED CONTROLLED TRIALS (RCTS)

The following slides demonstrate the steps involved in running an RCT and highlight how we completed each step in these trials.


Start with a group of people (or organizations) you want to try something new with – e.g. people who are on Facebook in Georgia or South Africa

We specified our audience in Facebook's Ad Splitter as people who live in Georgia or South Africa

IN DETAIL: RANDOMIZED CONTROLLED TRIALS (RCTS)

Randomly assign each individual in your audience to one of at least two categories:

TREATMENT 1
your audience to one of at least two categories: …a behaviourally informed message or process, e.g. one version of the Facebook ad.

Facebook automatically completes this step, creating random non overlapping audiences

TREATMENT 2*
…a different behaviourally informed message.

*Note: other times you will compare one or more "Treatments" to a "Control" message.
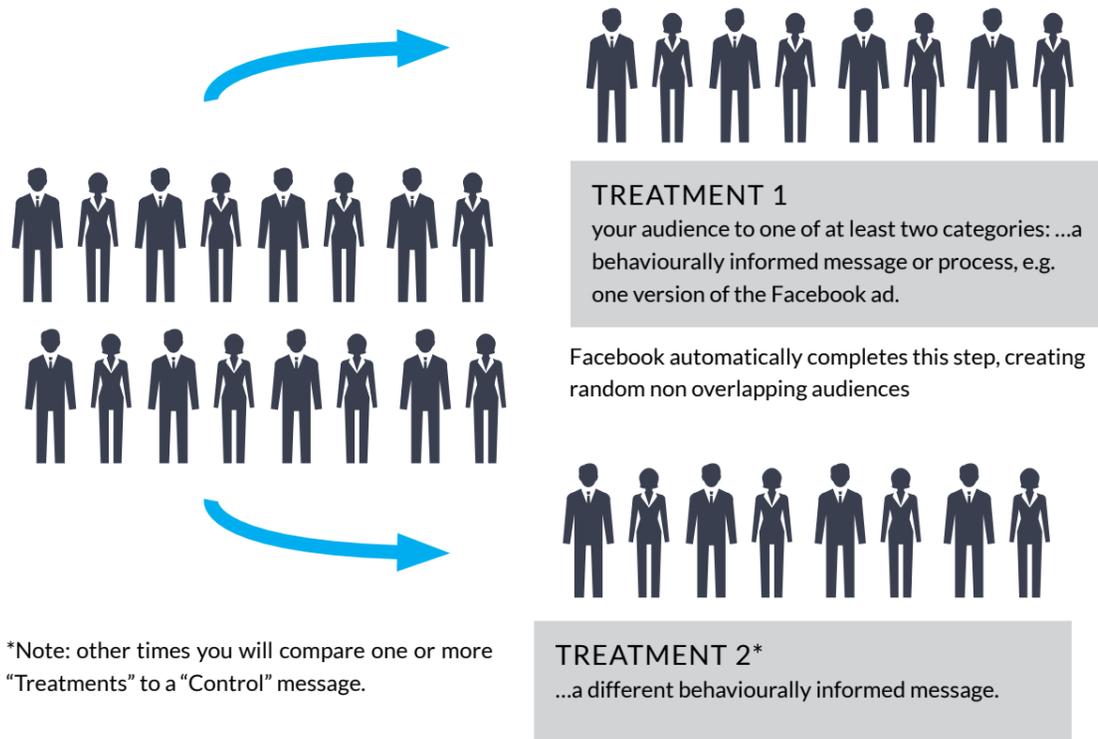
Measure the outcome of interest for each group e.g. number of clicks on each ad. Now you can ask two questions:
• What happened? E.g. did more people engage with one version of the ad?
• If there's a difference, could it be due to chance?

TREATMENT 1

Facebook reports back how many people saw and clicked on each ad. We can use this to answer these questions
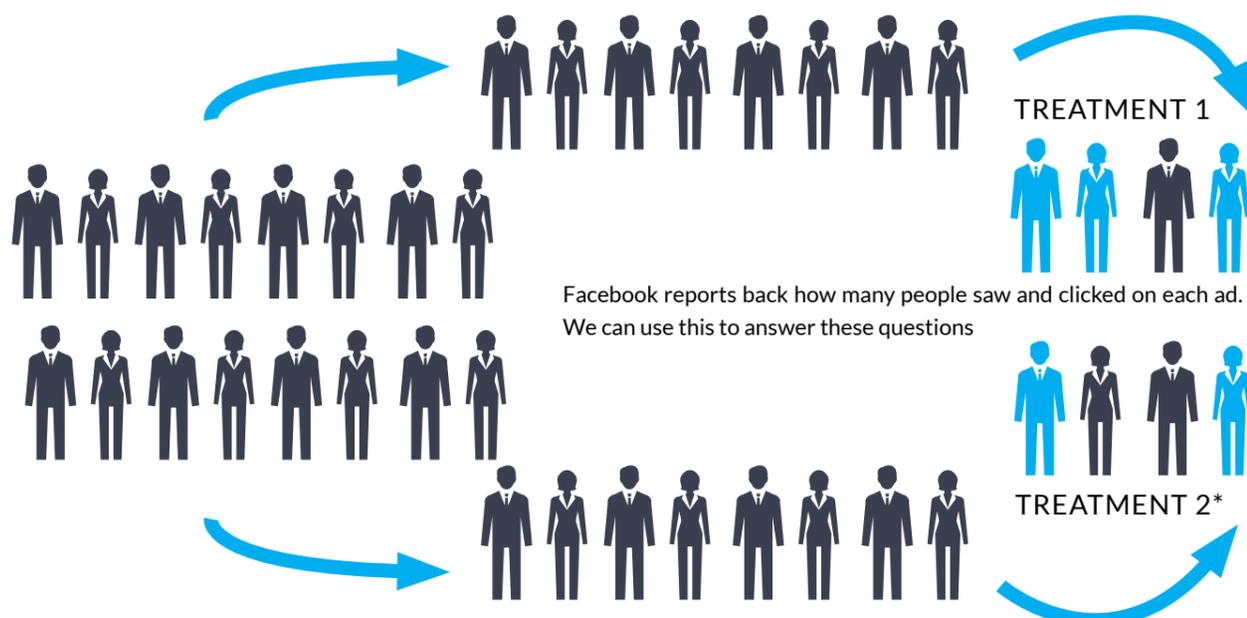
TREATMENT 2*

Since we know our groups are similar, thanks to random assignment, we can be pretty confident that any differences are due to the treatment, and not some underlying, pre-existing difference between our groups.

IN DETAIL: RANDOMIZED CONTROLLED TRIALS (RCTS)

After running our ads on Facebook, we received aggregated data on who saw and clicked on each ad (similar to fig. 1).

We imported this data into Stata and created a data set with a row for every individual who saw the ad and an indicator of whether or not they clicked on it (similar to fig. 2).

	A	B	C	D	E
1	Ad Name	Gender	Age	Reach	Unique Link Clicks
2	A	Female	18-24	1045	140
3	A	Male	18-24	1203	78
4	A	Female	25-34	945	132
5	…	…	…	…	…
6	B	Female	18-24	1065	126
7	…	…	…	…	…

	A	B	C	D
1	Ad Name	Gender	Age	Click
2	A	Female	18-24	1
3	…	…	…	…
140	A	Female	18-24	1
141	A	Female	18-24	0
142	…	…	…	…
1045	A	Female	18-24	0
1046	A	Male	18-24	1
1047	…	…	…	…

FIG. 1 AGGREGATE DATA

FIG. 2 INDIVIDUAL LEVEL DATA

INTERPRETING RESULTS: REGRESSION

Once the data was disaggregated to the individual level, we used Stata run linear regression models to determine the effect of being shown a certain ad on how likely someone was to click on it.

Regression is a statistical technique that allows you to analyse the relationship between variables and predict how an explanatory variable (like individual characteristics or an intervention) may affect an outcome.

Regression output provides an estimate of the average effect of seeing a certain ad message on the likelihood of clicking.

Regressions also report back whether an effect is "statistically significant." When an effect is statistically significant we can be reasonably confident that the true difference is not zero.

When we see a "p value" that's less than .05, we say the results are statistically significant. We ran several regressions to analyse each trial. In some we "controlled" for age and gender. This means we accounted for the variation in how likely someone would be to click on each ad because of these characteristics when we determined the effect of seeing a particular treatment.
• In our trial, the groups that saw each ad varied by proportion of age and gender; running these regressions gave us confidence that the patterns we observed were due to differences between the ads rather than difference between the groups.

Once the data was disaggregated to the individual level, we used Stata run linear regression models to determine the effect of being shown a certain ad on how likely someone was to click on it.

Regression is a statistical technique that allows you to analyse the relationship between variables and predict how an explanatory variable (like individual characteristics or an intervention) may affect an outcome.

Regression output provides an estimate of the average effect of seeing a certain ad message on the likelihood of clicking.

Regressions also report back whether an effect is "statistically significant." When an effect is statistically significant we can be reasonably confident that the true difference is not zero.

When we see a "p value" that's less than .05, we say the results are statistically significant.

We ran several regressions to analyse each trial. In some we "controlled" for age and gender.

This means we accounted for the variation in how likely someone would be to click on each ad because of these characteristics when we determined the effect of seeing a particular treatment.
• In our trial, the groups that saw each ad varied by proportion of age and gender; running these regressions gave us confidence that the patterns we observed were due to differences between the ads rather than difference between the groups.

INTERPRETING RESULTS: WHAT DOES THIS ALLOW US TO SAY?

Our analysis allowed us to determine how likely a person in our audience (someone living in Georgia or South Africa with a Facebook account) would be to click on each Facebook Ad we created.

It also allowed us to determine if the differences in the effects of each ad we tested were statistically significant—it allowed us to determine, with a high degree of confidence, that the differences we observe are caused by the ads, and not other factors.

We found a clear front runner among the ads we tested in Georgia and can be confident that the "Support + Private Matter" ad's success over the other ads we tested was not due to random chance.

In South Africa, we developed estimates of the effect of each of our ads on our audience, however, we were not able to determine if one of these ads would meaningfully perform better than the other.

APPENDIX 2

WORKS CONSULTED

WORKS CONSULTED

Abramsky, Tanya, Karen Devries, Ligia Kiss, Janet Nakuti, Nambusi Kyegombe, Elizabeth Starmann, Bonnie Cundill, et al. 2014. "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 Medicine 12 (July): 122.

Banyard, Victoria L., Elizabethe G. Plante, and Mary M. Moynihan. 2004. "Bystander Education: Bringing a Broader Community Perspective to Sexual Violence Prevention." Journal of Community Psychology 32 (1): 61–79.

Banyard, Victoria L., Mary M. Moynihan, and Elizabethe G. Plante. 2007. "Sexual Violence Prevention through Bystander Education: An Experimental Evaluation." Journal of Community Psychology 35 (4): 463–81.

Blair, Graeme, Rebecca Littman, and Elizabeth Levy Paluck. 2017. "Motivating the Adoption of New Community-Minded Behaviors: An Empirical Test in Nigeria," September. https://doi.org/10.2139/ssrn.3033133.

Ferguson, Claire E., and John M. Malouff. 2016. "Assessing Police Classifications of Sexual Assault Reports: A Meta-Analysis of False Reporting Rates." Archives of Sexual Behavior 45 (5): 1185–93.

Fischer, Peter, Joachim I. Krueger, Tobias Greitemeyer, Claudia Vogrincic, Andreas Kastenmüller, Dieter Frey, Moritz Heene, Magdalena Wicher, and Martina Kainbacher. 2011. "The Bystander-Effect: A Meta-Analytic Review on Bystander Intervention in Dangerous and Non-Dangerous Emergencies." Psychological Bulletin 137 (4): 517–37.

Fulu, E., and A. Kerr-Wilson. 2015. "What Works to Prevent Violence against Women and Girls Evidence Reviews: Paper 2: Interventions to Prevent Violence against Women and Girls." What Works to Prevent Violence.https://www.whatworks.co.za/documents/publications/35-global-evidence-reviews-paper-2-interventions-to-prevent-violence-against-women-and-girls-sep-2015/file.

Green, Donald P., Anna Wilke, and Jasper Cooper. n.d. "Silence Begets Violence: A Mass Media Experiment to Prevent Violence against Women in Rural Uganda."http://jasper-cooper.com/papers/Green_et_al.pdf.

Heise, L. 2011. "What Works to Prevent Partner Violence: An Evidence Overview." STRIVE Research Consortium, London

Hoyle, Carolyn, and Andrew Sanders. 2000. "From Victim Choice to Victim Empowerment?" The British Journal of Criminology 40: 14–36.

Kahn, Dennis. (2018). Bystander intervention and norm shifting: A social psychological research overview.

Kaufman, Michelle R., Alyssa Mooney, Benjamin Kamala, Najmeh Modarres, Robert Karam, and Deo Ng'wanansabi. 2013. "Effects of the Fataki Campaign: Addressing Cross-Generational Sex in Tanzania by Mobilizing Communities to Intervene." AIDS and Behavior 17 (6): 2053–62.

McMahon, Sarah, and Victoria L. Banyard. 2012. "When Can I Help? A Conceptual Framework for the Prevention of Sexual Violence Through Bystander Intervention." Trauma, Violence & Abuse 13 (1): 3–14.

Rotberg, Robert I., and Jenny C. Aker. 2013. "Mobile Phones: Uplifting Weak and Failed States." The Washington Quarterly 36 (1). Routledge: 111–25.

Sable, M. R. & Danis, F. & Mauzy, D. L. & Gallagher S. K. 2006. "Barriers to Reporting Sexual Assault for Women and Men: Perspectives of College Students." Journal of American College Health 55 (3).

School of Hygiene and Tropical Medicine.https://researchonline.lshtm.ac.uk/21062/1/Heise_Partner_Violence_evidence_overview.pdf.

Service O, Hallsworth M, Halpern D et al. 2014. EAST: Four simple ways to apply all insights [Internet]. 2014. Available from: http://www.alinsights.co.uk/wp-content/uploads/2015/07/BIT-Publication-EAST_FA_WEB.pdf

Sylaska, Kateryna M., and Katie M. Edwards. 2014. "Disclosure of Intimate Partner Violence to Informal Social Support Network Members: A Review of the Literature." Trauma, Violence & Abuse 15 (1): 3–21.

U.N. Women & the Georgia National Statistics Office. 2018. National Study On Violence Against Women 2017, Summary Report. Usdin, S., E. Scheepers, Susan Goldstein, and Garth Japhet. 2005. "Achieving Social Change on Gender-Based Violence: A Report on the Impact Evaluation of Soul City's Fourth Series." Social Science & Medicine 61 (11): 2434–45.