

Introduction

This document provides background information for the paper "Prevention of violence against women and girls: A cost-effectiveness study across six low- and middle-income countries". It is designed to help data users understand the context in which the data was collected, and the purpose for which it was collected. This information is designed to improve the way these data will be used.

Context:

The cost data in this dataset were collected during the What Works economic evaluation study, between 2017 and 2019. They were used to compute the costs and cost-effectiveness of six interventions for the prevention of violence against women and girls in Ghana, Kenya, Pakistan, Rwanda, South Africa and Zambia. Results from the cost analysis are reported in Torres-Rueda et al. 2020 (see link to cost synthesis paper below). Results on interventions' cost-effectiveness are in Ferrari et al. 2022, to which this dataset is attached. More information can be found in these two papers and in the interventions' impact papers listed below:

Ghana: [Deda Ogum Alangea, Adolphina A. Addo-Lartey, Esnat D. Chirwa, Yandisa Sikweyiya, Dorcas Coker-Appiah, Rachel Jewkes & Richard M. K. Adanu \(2020\) Evaluation of the rural response system intervention to prevent violence against women: findings from a community-randomised controlled trial in the Central Region of Ghana, Global Health Action, 13:1, DOI: 10.1080/16549716.2019.1711336](#)

Kenya: forthcoming

Pakistan: [Rozina Karmaliani, Judith McFarlane, Hussain Maqbool Ahmed Khuwaja, Yasmeen Somani, Shireen Shehzad Bhamani, Tazeen Saeed Ali, Nargis Asad, Esnat D. Chirwa & Rachel Jewkes \(2020\) Right To Play's intervention to reduce peer violence among children in public schools in Pakistan: a cluster-randomized controlled trial, Global Health Action, 13:1, DOI: 10.1080/16549716.2020.1836604](#)

Rwanda (community): [Chatterji S, Stern E, Dunkle K, Heise L. Community activism as a strategy to reduce intimate partner violence \(IPV\) in rural Rwanda: results of a community randomised trial. Journal of global health. 2020 Jun;10\(1\).](#)

Rwanda (couples): [Dunkle K, Stern E, Chatterji S, et al Effective prevention of intimate partner violence through couples training: a randomised controlled trial of Indashyikirwa in RwandaBMJ Global Health 2020;5:e002439](#)

South Africa: [Gibbs A, Washington L, Abdelatif N, Chirwa E, Willan S, Shai N, Sikweyiya Y, Mkhwanazi S, Ntini N, Jewkes R. Stepping Stones and Creating Futures intervention to prevent intimate partner violence among young people: cluster randomized controlled trial. Journal of Adolescent Health. 2020 Mar 1;66\(3\):323-35.](#)

Zambia: [Murray LK, Kane JC, Glass N, Skavenski van Wyk S, Melendez F, Paul R, Kmett Danielson C, Murray SM, Mayeye J, Simenda F, Bolton P. Effectiveness of the common elements treatment approach \(Ceta\) in reducing intimate partner violence and hazardous alcohol use in Zambia \(VATU\): a randomized controlled trial. PLoS medicine. 2020 Apr 17;17\(4\):e1003056](#)

Cost synthesis paper: [Torres-Rueda S, Ferrari G, Orangi S, Hitimana R, Daviaud E, Tawiah T, Prah RK, Karmaliani R, Kapapa E, Barasa E, Jewkes R. What will it cost to prevent violence against women and girls in low-and middle-income countries? Evidence from Ghana, Kenya, Pakistan, Rwanda, South Africa and Zambia. Health policy and planning. 2020 Aug;35\(7\):855-66.](#)

Dataset content:

The dataset contains start-up costs by input type. Start-up costs were collected in a research setting.

Implementation costs are reported in research and a national scale setting. They are disaggregated by input type and, where available, by location (Ghana, Zambia, Kenya).

Costs are reported in USD 2018

All impact data is already publicly available at the following repository: <http://medat.samrc.ac.za/index.php/home>

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