

Intersections between violence against children and violence against women

Global research priorities



World Health
Organization



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Intersections between violence against children and violence against women: global research priorities

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Executive summary

There is growing global recognition that violence against women and violence against children, and in particular intimate partner violence against women and violence against children by parents or caregivers, intersect in different ways (1,2). As global evidence of and interest in these intersections continue to grow, strategies are needed to enhance collaborations across these fields and thus ensure the best outcomes for both women and children. In response, the Sexual Violence Research Initiative (SVRI), the UNICEF Innocenti – Global Office of Research and Foresight, and the UNDP/UNFPA/UNICEF/WHO/World Bank Special Programme of Research, Development and Research Training in Human Reproduction hosted by WHO's Department of Sexual and Reproductive Health, partnered to coordinate a global participatory process to identify research priorities that relate to the intersections between violence against children and violence against women.

Identifying research priorities is important as it will help to advance our understanding of the intersections of violence against children and violence against women in a more structured way and help monitor progress to fill evidence gaps. Setting research priorities also contributes to building knowledge systematically and ensures that research efforts make the best use of limited resources. Furthermore, the research priorities will guide research efforts to: inform the implementation of the multiagency RESPECT Women and INSPIRE frameworks; support the efforts of UNICEF to respond to the gender dimensions of violence against children and of WHO to strengthen work across violence against women and violence against children; guide the SVRI grant making strategy; and promote coherence in research and programming for the achievement of the 2030 Sustainable Development Goals.

While priorities are important, the way in which these priorities are determined is also crucial, especially for ownership, contextualization and use. Inclusive, participatory research-setting, such as used in this work, serves to promote a diversity of voices – especially from low- and middle-income countries which have historically lacked representation – and minimize the risk of bias when establishing research priorities.

This report describes the process used to determine the priorities for research on the intersections between violence against children and violence against women, and the top 10 research questions identified.

Advisory structures

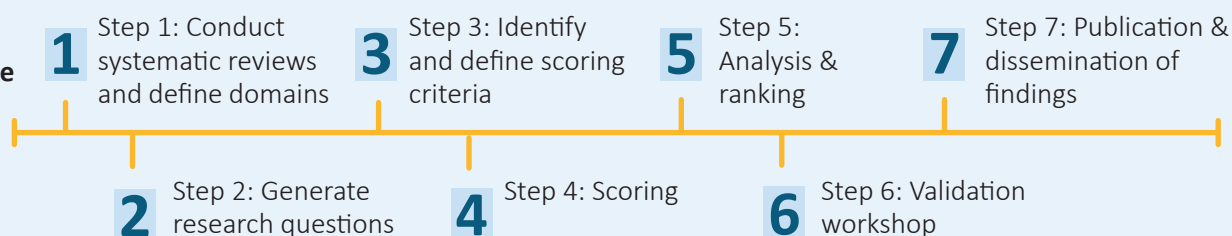
The following bodies were established to steer and validate the process. They were instrumental in ensuring the process was inclusive and diverse.

- **Coordinating group.** This group included representatives from Sexual Violence Research Initiative, UNICEF Innocenti, WHO Department of Sexual and Reproductive Health/HRP and Research and Stellenbosch University.
- **Advisory group.** This group included invited representatives from around the world who worked in research and practice on violence against children, violence against women and their intersections.
- **Global stakeholder group.** Anyone working to tackle violence against children, violence against women, or the intersections between these forms of violence was welcome to sign up for this group and provide their input into the priority-setting process.

Method

Priorities were developed by following seven steps adapted from the Child Health and Nutrition Research Initiative (CHNRI) method and informed by lessons learnt from the process of developing the Global shared research agenda on violence against women (3).

Figure 1. Steps in the research priority setting process



Step 1: Define domains. Two systematic reviews were undertaken to support this prioritization exercise and led to the identification, by the coordinating and advisory groups, of the following five overarching themes under which potential research questions were grouped.

Domain 1. Strengthening of our understanding of the intersections between violence against children and violence against women

Gender-sensitive research to understand the different intersections across multiple forms of violence against women and violence against children – including types, frequency, severity, prevalence, incidence, nature, impacts of, pathways between, and risk and protective factors associated with co-occurrence of violence against women and violence against children across the life course and generations.

Domain 2. Interventions and services focused on the intersections between violence against children and violence against women

Research on programmes, interventions, and services that prevent and/or respond to both violence against women and violence against children, including building an understanding of when and how interventions to prevent or respond to both violence against women and violence against children work and when coordinated or integrated violence against children and violence against women interventions are not recommended (and why).

Domain 3. Tools, methods and measurements for research on the intersections between violence against children and violence against women

Research to identify new and innovative ways to measure intersections of violence against women and violence against children; challenge hierarchies of knowledge, encourage practice-based learning and participatory approaches; and address ethical issues and strengthen monitoring and evaluation of interventions in ways that investigate outcomes relevant to both violence against women and violence against children.

Domain 4. Coordination and collaboration across the sectors concerned with violence against women and violence against children

Research into challenges and facilitating factors in coordination and collaboration across sectors at multiple levels, as well as research that provides insights into shared language, common values and principles, and helps address “thorny” issues (such as mandatory reporting, parental alienation) which often impede collaboration.

Domain 5. Policy research

Research to better understand policies, including how they address violence against children–violence against women intersections, how they influence governance and delivery of services (availability, mandates, funding, etc.), and what impacts they have.

Step 2: Generate research questions. Everyone involved in this process – global stakeholder group, advisory group and coordinating group – was invited to submit key questions they would like answered about violence against children–violence against women intersections for each of the five domains. This took place in March–April 2022 through an online submission form. Submissions could be made in Arabic, English, French, Portuguese and Spanish. A total of 463 questions were received from 86 respondents. The coordinating and advisory groups removed duplicates and combined questions when appropriate to reduce the number of questions to be scored. The groups aimed to reduce the questions to 10 per domain.

Step 3: Identify and define scoring criteria. The coordinating group reviewed criteria used in other research priority-setting processes – particularly in the Global shared research agenda for violence against women and girls (3) – to identify and define three criteria to be used in the scoring process. Each research question was scored on each criterion.

Applicability and impact. Will the knowledge from this research question influence understanding, practice or policy on violence against children–violence against women intersections?

Advancing the evidence base. Will the knowledge generated through this research question change our current understanding or approaches to researching violence against children–violence against women intersections?

Answerability and feasibility. Can an ethical research study be designed and implemented to document data to answer this question (within 10 years)?

Step 4: Scoring. The research questions generated in step 2 were organized into a survey with scoring options according to the three criteria in step 3. Stakeholders – including practitioners, service providers, researchers and academics, activists, policy-makers, donors and others – working worldwide to tackle violence against children and/or violence against women were invited to score the research questions in June 2022. Online surveys were available in Arabic, English, French and Spanish, and were widely disseminated both by social media and directly by email to specific colleagues in the field; because of the extremely low number of inputs on the Portuguese form for question submission, this language was not included in the scoring survey. A total of 225 respondents participated but only 153 surveys were completed and included in the analysis.

Step 5: Analysis and ranking. Data from the 153 fully completed scoring surveys were analysed and the research questions ranked according to a research priority-setting score (a score from 0 to 100) ranking the extent to which respondents believed that the research question best satisfied the priority-setting criteria (applicability and impact, advancing the evidence base, answerability and feasibility) (4).

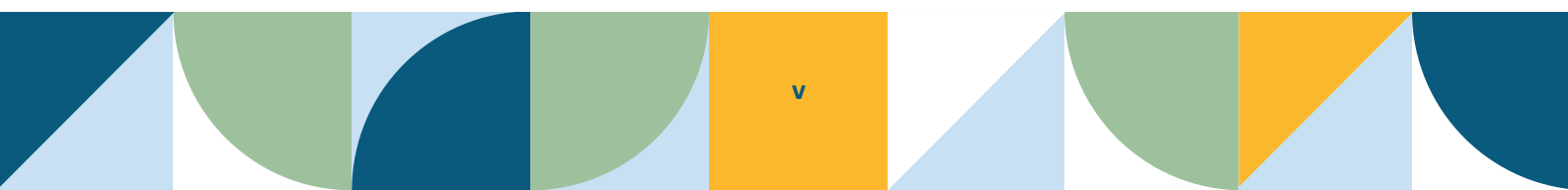
Step 6: Validation workshop. A validation workshop with key stakeholders was held at the 2022 Forum of the Sexual Violence Research Initiative to critically examine and discuss the results.

Step 7: Publication and dissemination

The findings on and priorities for research on the violence against children–violence against women intersections are published and widely disseminated.

Results

Most participants in the scoring survey were females (82%) and most surveys (85%) were completed in English. Practitioners/service providers/programme managers made up 44% of the participants, followed by researchers/academics/scholars who made up 41%. More than half of the respondents (59%) had expertise in violence against children–violence against women intersections. The greatest proportion of the participants (39%) were from sub-Saharan Africa followed by North America (20%) and Eastern Europe and Central Asia (16%), and most (59%) were based in low- and middle-income countries. Racial and ethnic minorities and indigenous people made up 22% of the respondents.



Based on the process of ranking (step 5) by the participants, the top 10 questions for research on the intersections between violence against children and violence against women were identified (Table 1).

Table 1. Top 10 ranked questions, by score and domain

OVERALL RANK	RESEARCH QUESTIONS	RESEARCH PRIORITY SCORE	DOMAIN
1	What are the essential elements of effective integrated programmes to address violence against women and violence against children?	94.9	2
2	How can parenting programmes be adapted to effectively prevent multiple forms of violence against children and violence against women?	91.9	2
3	What are innovative and valid measures for violence against women and violence against children that have been developed and tested in low-resource settings via participatory approaches?	91.8	3
4	How can we use the evidence of the violence against children–violence against women intersections to develop a common language and a shared framework for effective coordination and collaboration?	91.6	4
5	What are the policies which address violence against women and violence against children together?	91.6	5
6	At global, regional, national, and local levels, what are the key barriers to effective collaboration across violence against children and violence against women sectors and what are the main opportunities for driving forward a joint agenda (e.g., investment in positive parenting programmes)?	91.3	4
7	How do effective violence against women–violence against children prevention interventions achieve change?	91.0	2
8	What forms of violence against children and violence against women do adolescents experience, including in the digital sphere?	90.6	1
9	How are adolescent girls adequately addressed in policies that address violence against children, violence against women and their intersections?	89.9	5
10	How do we evaluate primary prevention interventions of violence against women and violence against children?	89.7	3

Way forward

The ranking emphasizes intervention research (domain 2) rather than epidemiological research (domain 1). It is also notable that the top ranked question scored 3 points more than the next question, suggesting that this question is a particularly high priority for research in the field of violence against children–violence against women intersections.

Through an inclusive and participatory process, we created opportunities for respondents from different geographical regions, multiple sectors and relevant fields to share their perspectives. The high level of participation of people from LMICs and both researchers and practitioners is encouraging.

We must now focus on building the evidence base in strategic ways that will ultimately increase effective services, interventions, and policies to make the world a safer place for women and children. Whatever the research that is undertaken in this field, ethics, safety, gender equality and equity must be central to the approach.

Introduction

There is growing global recognition of the intersections between violence against women and violence against children. The current evidence shows intersections between intimate partner violence against women and violence against children by parents or caregivers, but limited evidence is available on the links between other forms of violence against women and violence against children. Both violence against women by their (male) intimate partners and violence against children by parents or caregivers are widespread globally.

Of 83 countries with data on the Sustainable Development Goals (SDGs) – mostly from low- and middle-income countries (LMICs) – nearly 8 in 10 children aged 1–14 years experienced regular violent discipline by caregivers in the home (5). The World Health Organization (WHO) estimates that globally 27% of ever-partnered women have been subjected to physical and/or sexual violence by an intimate partner in their lifetime. However, the prevalence is much higher in many countries, with 35 countries reporting a prevalence of more than 35%, including 19 countries with a prevalence of more than 40% (6).

In addition to being pervasive, intimate partner violence and child abuse/maltreatment often occur in the same household. Evidence indicates that children in households affected by partner violence are more likely than other children to experience violent discipline by both male and female caregivers (7,8). Adolescents may experience both violence from a partner and violent discipline by parents/caregiver (9,10).

Both intimate partner violence and violence against children by parents or caregivers have shared drivers and risk factors, including gender inequality and widespread acceptance of violence against women and against children (9) (Figure 1). Population-based surveys from many countries suggest that social norms that condone violence against women correlate with a higher risk of both intimate partner violence and violence against children by parents or caregivers (11,12). Studies also show that factors such as family stress, economic deprivation, use of alcohol, mental health disorders, community-level violence, and weak legal sanctions against violence are associated with the perpetration of both violence against women by intimate partners and violence against children by parents or caregivers (9).

Equally important, intimate partner violence and violence against children by parents or caregivers are associated with similar mental, physical, sexual and reproductive health consequences. Some of these consequences may last a lifetime and lead to intergenerational effects that affect boys and girls differently. For boys, violent discipline and exposure to abuse of the mother in the childhood home can increase the risk of perpetration of violence against women in later life. For girls, these experiences increase violence victimization in later life (13,14). This exposure to abuse against mothers/women can raise the risk of violence for the next generation, thus perpetuating an intergenerational cycle of abuse (8,15–19). Unwanted pregnancy is a consequence of sexual violence with long-term effects specific to girls and women. The many intersections between intimate partner violence and violence against children by parents or caregivers provide a strong rationale for examining the evidence on how to effectively prevent and respond to both forms of violence, including through coordinated efforts.

Figure 1. Overview of intersections between violence against women and violence against children

<p>Shared risk factors</p> <ul style="list-style-type: none"> • Gender inequality and discrimination • Lack of responsive institutions • Weak legal sanctions against violence • Male dominance in the household • Marital conflict • Use of alcohol and drugs 	<p>Social norms</p> <ul style="list-style-type: none"> • Condone violent discipline (wife-beating and corporal punishment) • Promote masculinities based on violence and control • Prioritize family reputation and blame victims • Support gender inequality
<p>Common and compounding consequences</p> <ul style="list-style-type: none"> • Violence against women and violence against children have similar mental, physical, sexual and reproductive health consequences • Violence (polyvictimization) may have cumulative, compounding effects 	<p>Co-occurrence</p> <ul style="list-style-type: none"> • Partner violence and child abuse/maltreatment often occur in the same family • Children in households where mother is abused are more likely to experience violent discipline
<p>Adolescence</p> <ul style="list-style-type: none"> • Violence against women and violence against children intersect at adolescence • Adolescents are more vulnerable to some forms of violence • Perpetration of some forms of violence against women often begins in adolescence • Early marriage and childbearing are risk factors for such violence • Adolescents are sometimes overlooked by both fields • Prevention opportunities exist 	<p>Intergenerational effects</p> <ul style="list-style-type: none"> • Consequences of violence against children last into adulthood • Partner violence affects birth weight, under-5 mortality, and children’s mental health and social development • Violence against children and exposure to mother’s abuse increase the risk of perpetrating or experiencing violence later in life

Need for a research agenda

“Without priorities, development is blind. With priorities, the science and innovation sectors can flourish to support development, equity and health.” (Montorzi et al, 2010) (19).

Setting research priorities helps to identify evidence gaps, ensures research efforts make the best use of limited resources, and assists researchers, funders, programme developers, implementers and practitioners, policy-makers and donors with research planning and future fund-raising efforts. It also signals to stakeholders the research areas that have been identified as important, thus serving as an advocacy tool.

The research priorities will guide research efforts to:

- build knowledge in a more systematic way,
- ensure that they make the best use of limited resources,
- monitor progress over time,
- inform the implementation of the multiagency RESPECT Women (20) and INSPIRE frameworks (21),
- support UNICEF’s commitment to respond to the gender dimensions of violence,
- guide provision of grants within the Sexual Violence Research Initiative,
- inform HRP’s and WHO’s research in this field
- promote the achievement of the 2030 SDGs.

Research priorities help to build evidence in a more structured way and serve as a monitoring tool through continuously mapping progress against initial evidence gaps. The way in which these priorities are set is also important, especially for ownership, localization and use of the priorities to guide research and programming. An inclusive, participatory research setting process enables the inclusion of many different voices – especially from LMICs, which historically lack representation – and reduces the risk of bias when establishing research priorities (22).

To meet these needs, the Sexual Violence Research Initiative, the UNICEF Innocenti – Global Office of Research and Foresight, and the UNDP/UNFPA/ UNICEF/WHO/World Bank Special Programme of Research, Development and Research Training in Human Reproduction (HRP) in the World Health Organization (WHO) partnered to coordinate a global, inclusive and participatory process to identify research priorities for assessing the intersections of violence against women and violence against children.

State of the evidence base

Two systematic literature reviews were undertaken to support this prioritization exercise and led to the identification, by the coordinating and advisory groups, of the five overarching domains under which potential research questions were organized.

One review focused on the co-occurrence of intimate partner violence and violence against children by caregivers/parents in LMICs. This review identified the individual, social and environmental risk factors associated with co-occurrence of these forms of violence (23). The other review was a rapid systematic review of effective interventions that seek to prevent and/or respond to intimate partner violence against women and violence against children in coordinated ways (24).

Challenges in evidence building around intersections of violence against women and violence against children

An analysis of the two systematic reviews identified the following limitations in methodologies related to violence against women and violence against children intersectional research.

Inconsistent terminology, definitions and measures for violence against children

Measurements and definitions of violence against children varied greatly across studies. Violence against children by parents or caregivers, child abuse and violence against children are sometimes used interchangeably despite subtle differences between them and their definitions. For instance, according to the Convention on the Rights of the Child, violent discipline includes physical and emotional aggression against children. However, the inclusion of emotional aggression is not common in studies. While the negative effect on children of witnessing or exposure to violence against women by their partners is acknowledged, there is debate in the field about how to define this experience in research. Some studies include witnessing intimate partner violence within their measurement of violence against children by parents or caregivers and others do not, or they report the data separately. Population-based surveys, such as the Demographic and Health Surveys (25) and Multiple Indicator Cluster Surveys (26), as well as research studies use different measures for violence against children, leading to a lack of comparability between studies and an inability to undertake aggregated data analyses. This inconsistency in definitions and related measurements was noted as a methodological issue that makes it difficult to build a shared understanding, compare different studies in the field of violence against children and build a cohesive body of evidence.

Inadequate measurement of frequency and intensity of violence against children

In some studies, a wide variation in the types of violent acts included in measurements of violence against children was reported, with no measure of severity or frequency. In addition to hindering comparability, in the case of binary (yes/no) measures, this reporting results in more extreme and frequent acts of physical violence being counted the same way as a one-off incident of shouting. As the review of co-occurrence of violence points out (23), *“this conflation of various levels of discipline and abuse also creates problems for studies intended to measure children’s life-trajectory, especially their mental health, because there are likely to be distinct psychological effects from being punished (e.g. as the local culture dictates) versus suffering abuse that is perpetrated in anger or that is chronic child abuse (e.g. causes physical or psychological harm)”*.

Insufficient disaggregation of data by sex and age

The sex of the caregiver is often not reported, nor is the sex of the child, despite evidence indicating that there are often differences in the types and impacts of violence by sex. For example, older children and boys often experience greater physical violence than girls and younger children, whereas girls often experience more sexual violence and can become pregnant as a result. In addition, the failure to collect and report sex-disaggregated data on both male and female caregivers as perpetrators impedes an understanding of the interlinked factors relating to male and female use of violence against their children.

Gendered stereotypes of parenting often frame study designs and research questions

Biased research design can perpetuate harmful norms and stereotypes, leading to unfounded assumptions and creating knowledge gaps. For example, many of the studies in the co-occurrence review (23), asked mothers, but not fathers, about how they disciplined their children. Studies often do not control for time spent with the children nor do they consider the context of inequitable gender roles and norms or whether the mother is being subjected to violence. As such, these studies are more likely to identify mothers as perpetrators of violence against their children without providing a full understanding of the context. Mothers may also choose to harshly discipline their children to protect them from the potentially greater violent discipline of the father or because they believe it is expected of them by the father or society more broadly (for example, being a “strict” mother may be praised). Similarly, studies tend to measure substance abuse in mothers in association with violence against children by parents or caregivers, but not in fathers, even though fathers are statistically more likely to use substances. It is important to understand the role of men’s alcohol and other substance use in co-occurring intimate partner violence and violence against children by parents or caregivers to guide relevant

interventions. Research needs to measure violence by multiple perpetrators and not just evaluate two-person and unidirectional relationships. It also needs to examine interactions between the different types of abuse within a family from a perspective that takes gender norms and dynamics into account (27).

Exploration of protective factors against violence against children by parents or caregivers and intimate partner violence

Interventions looking at maternal mental health showed a connection between positive maternal mental health and lower rates of in violence against children by parents or caregivers. Additionally, studies showed that emotional attachment between couples protected against both male-to-female partner violence and female-to-male partner violence. Given that there are links between intimate partner violence and violence against children by parents or caregivers, the effect of couples' emotional attachment on violence against children should be further explored.

Analyses of gender and power dynamics

Much of the research does not include a gender and power analysis which would help to bring together understanding of the shared drivers of violence against women and violence against children.

Addressing the limitations:

To further build evidence on the intersections between violence against children and violence against women and tackle the gaps identified, the following are needed.

- More consistent definitions and measures of violence against children and an exploration of the factors known to influence violence against women and violence against children separately, such as alcohol use.
- Measurement of the outcomes related to both violence against women and violence against children.
- Research that specifically addresses the intersections between violence against children and violence against women.
- Reporting on (i) the level of skill and training of those implementing interventions and (ii) the intensity, frequency, and duration of interventions and the potential effect of facilitator skill and training on efficacy.

Method

Shared research priorities for the intersections between violence against children and violence against women were co-created in 10 steps adapted from the method of the Child Health and Nutrition Research Initiative (Box 1) and guided by lessons learnt from the process of developing the Global shared research agenda on violence against women (27).

Box 1. Child Health and Nutrition Research Initiative method

The method for priority-setting was developed in 2005 by the Child Health and Nutrition Research Initiative and has been used extensively to identify research priorities. While it was initially developed for setting research priorities in child health (22), it has also been successfully used for priority setting in many other fields, for example in intersections of HIV and alcohol (28), mental health (29) and health of people with disabilities (30). The methodology was developed because of the following concerns about the ways in which research priorities were traditionally identified.

- Priorities were set in a way that was not transparent, making it impossible to know how decisions were made.
- Academic experts set priorities with little effort to engage other stakeholders, such as affected communities, community-based organizations, practitioners, policy-makers or donors.
- Individuals with power had undue influence over final decisions.
- Research likely to be published in high impact journals was prioritized rather than research which could more directly advance programming and policy.

Advisory structures

A number of different groups were involved in the process of identifying the shared research priorities.

Coordinating group

The Coordinating Group facilitated the process and included staff from the three lead organizations (SVRI, UNICEF Innocenti, and HRP in WHO's Sexual and Reproductive Health and Research department, as well as consultants from the Institute for Life Course Health Research, Stellenbosch University. The main responsibilities of the group included coordination, design of the process, analysis, reporting and dissemination.

Advisory group

The Advisory Group provided expert technical input and advice at key points in the process, including consultations on the domains and the selection of criteria. The Advisory Group consisted of 12 experts selected by the Coordinating Group based on their expertise who were practitioners and researchers from different parts of the world: Colombia; Indonesia; occupied Palestinian territory; Saudi Arabia; South Africa; Spain; Sri Lanka; United Kingdom of Great Britain and Northern Ireland; United States of America; and Uganda.

The Advisory Group was invited to draft and submit questions as part of the question collection process and to provide feedback on the consolidation of questions. The group continued to monitor the whole process.

Global stakeholders group

Throughout the process, the coordinating group aimed to engage widely with an even wider range of stakeholders working in violence against children and violence against women across the globe. The group included 510 researchers, practitioners, funders and policy-makers. Colleagues from this group participated in four webinars to learn about the research priority-setting process. They also helped to disseminate the two surveys among their networks.

Steps in the research priority-setting process

Step 1. Define domains

Based on the two systematic literature reviews, gaps in the literature were broadly grouped into the following five overarching domains under which research questions were grouped by the coordinating and advisory groups.

Domain 1. Strengthening of our understanding of the intersections between violence against children and violence against women

Gender-sensitive research to understand the different intersections across multiple forms of violence against women and violence against children – including types, frequency, severity, prevalence, incidence, nature, impacts of, pathways between, and risk and protective factors associated with co-occurrence of violence against women and violence against children across the life course and generations.

Domain 2. Interventions and services focused on the intersections between violence against children and violence against women

Research on programmes, interventions, and services that prevent and/or respond to both violence against women and violence against children, including building an understanding of when and how interventions to prevent or respond to both violence against women and violence against children work and when coordinated or integrated violence against children and violence against women interventions are not recommended (and why).

Domain 3. Tools, methods and measurements for research on the intersections between violence against children and violence against women

Research to identify new and innovative ways to measure intersections of violence against women and violence against children; challenge hierarchies of knowledge, encourage practice-based learning and participatory approaches; and address ethical issues and strengthen monitoring and evaluation of interventions in ways that investigate outcomes relevant to both violence against women and violence against children.

Domain 4. Coordination and collaboration across the sectors concerned with violence against women and violence against children

Research into challenges and facilitating factors in coordination and collaboration across sectors at multiple levels, as well as research that provides insights into shared language, common values and principles, and helps address “thorny” issues (such as mandatory reporting, parental alienation) which often impede collaboration.

Domain 5. Policy research

Research to better understand policies, including how they address violence against children–violence against women intersections, how they influence governance and delivery of services (availability, mandates, funding, etc.), and what impacts they have.

Step 2. Generate research questions

Everyone involved in this process – global stakeholders group, advisory group and coordinating group – was invited to respond to an online survey to submit research questions that they would like answered about the intersections between violence against children and violence against women for each of the five domains identified. There was also a sixth open domain where participants could submit questions they did not think fit into any other domain. Two online information sessions were held to inform stakeholders about the process of generating research questions; more information was also provided via the online survey form. Respondents could complete the survey between March and April 2022. Submissions could be made in Arabic, English, French, Portuguese and Spanish. A total of 463 questions were received from 86 respondents. The coordinating and advisory groups reviewed submissions, reduced duplicates and combined questions that belonged together, thus reducing the number of questions to be scored to a manageable number.

Step 3. Identify and define scoring criteria

After reviewing the criteria used in other research priority-setting processes (particularly the Global shared research agenda on violence against women (27)), the coordinating group selected and defined three criteria to be used in the scoring process. Each research question was scored on each criterion.

Applicability and impact. Will the knowledge from this research question influence understanding, practice or policy on violence against children–violence against women intersections?

Advancing the evidence base. Will the knowledge from this research question change our current understanding or approaches to researching violence against children–violence against women intersections?

Answerability and feasibility. Can an ethical research study be designed and implemented to document data to answer this question (within 10 years)?

Step 4. Scoring

The research questions were built into a survey with scoring options according to the criteria in step 3. Stakeholders – including practitioners, service providers, researchers and academics, activists, policy-makers, donors and others – working worldwide to address violence against children and/or violence against women were invited to score the research questions in June 2022. Surveys were made available online in Arabic, English (Annex 1), French and Spanish. A total of 225 respondents participated and 153 surveys were completed and included in the analysis.

Step 5. Analysis and ranking

Data from the 153 fully completed scoring surveys were analysed and the research questions ranked according to a research priority-setting score (a score from 0 to 100) ranking the extent to which the respondents believed that the research question best satisfied the priority-setting criteria (applicability and impact, advancing the evidence base, and answerability and feasibility).

Step 6. Validation workshop

A validation workshop with key stakeholders was held at the SVRI Forum 2022 to critically examine and discuss the results.

Step 7. Publication and dissemination

The findings on and priorities for research on the violence against children–violence against women intersections are published and widely disseminated.

Research questions

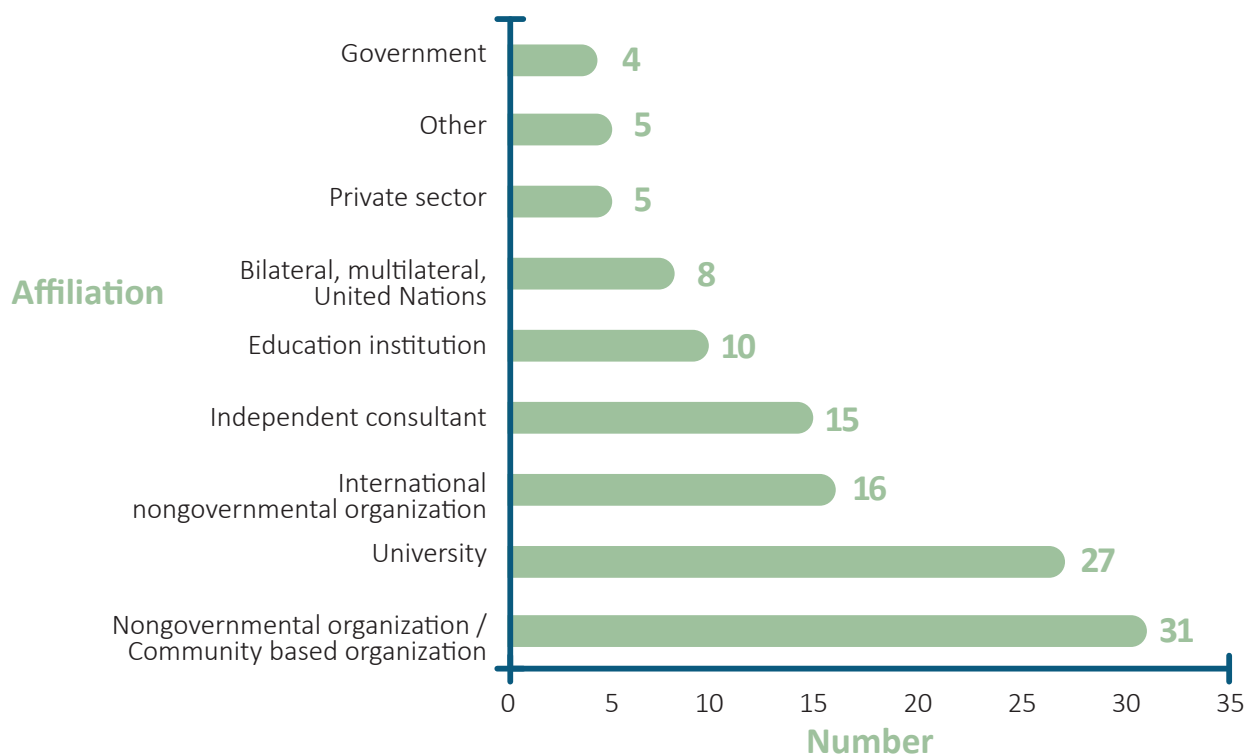
A total of 463 questions were received from 86 respondents. Table 1 shows the number of research questions received by domain and by the language the questions were received in: English, Spanish, French, and Arabic. No questions were received in Portuguese.

Table 1. Research questions received by language and domain

Domain	English	Spanish	French	Arabic	Total
1	63	15	8	3	89
2	64	13	5	3	85
3	59	15	5	3	82
4	69	11	5	2	87
5	82	10	4	3	99
Other	13	6	2	0	21
Total	350	70	29	14	463

Respondents to the survey to generate research questions were from 39 countries, with 38% from LMICs. The respondents also represented various stakeholder groups (Figure 2), with the greatest proportion working for nongovernmental organizations or universities.

Figure 2. Respondents' affiliation on research questions submission survey (note: respondents could select more than one affiliation)



After the online survey closed, the coordinating group worked to refine and reduce the research questions. To make the next step of scoring the questions feasible, the group aimed to reduce the questions to 10 per domain. The following process was used to clean the data.

- Questions that were unclear or not relevant to intersections between violence against children and violence against women were removed.
- The remaining questions were analysed thematically within each domain. Through this analysis, duplicates were removed and overlapping and similar questions were combined.
- The coordinating group and advisory group members then voted yes/no/maybe on all remaining questions for inclusion. These responses were scored (yes=1, no=0, maybe=0,5) for each question and the questions then ordered by rank for inclusion in the final scoring survey.
- Through this process, the groups reduced the questions, through consensus, to a final list of 45 questions across the five domains.

Scoring survey

The priority-setting survey was developed using online survey software (Survey Monkey). Participants could elect to only answer questions for particular domains or only specific research questions depending on where they felt they had sufficient expertise. They were told they could leave blank any items they feel they did not have the expertise to score. The participants were asked to apply the three criteria (applicability and impact, advancing the evidence base, and answerability and feasibility) to every research question and score each criterion: yes, no, maybe or leaving it blank (see Annex 1).

On 30 May 2022, two online information sessions were held to provide information to potential participants about the priority-setting process and particularly about the scoring questionnaire. The priority-setting surveys were disseminated in four languages: Arabic, English, French and Spanish. The surveys were distributed by email to members of the global stakeholders group, advisory group and coordinating group as well as via a social media campaign and the Sexual Violence Research Initiative Update, which was emailed weekly to 7616 colleagues in the VAC/VAW field. The survey was open for respondents from 30 May 2022 until 30 June 2022. Anyone working to tackle violence against children, violence against women, or violence against children and violence against women together was eligible to participate and people were encouraged to share the survey link widely across their own networks. Members of the global stakeholders, advisory, and coordinating groups were also encouraged to invite colleagues in their networks to participate in the scoring survey.

Analysis

Intermediate research priority scores were calculated by summing all the answers (that is, 1 yes, 0.5 maybe, and 0 no). This sum was divided by the number of answers received (blanks were omitted from the numerator and the denominator). This process resulted in research priority scores between 0% and 100%. This score represents the extent to which respondents believed that the research question best satisfied the priority-setting criteria (applicability and impact, advancing the evidence base, and answerability and feasibility). This score was used to determine the rank order.

To compare responses, a comparative analysis of scores was undertaken. Responses were disaggregated by:

- stakeholder area of expertise (intersections between violence against children and violence against women, or violence against children, or violence against women);
- stakeholder type of work (researcher/academic/scholar, practitioner/service provider/programme manager, donor/funder, policy-maker, activist, and other);
- stakeholder geographical region; and
- marginalized voices (for example, lesbian, gay, bisexual, transgender, queer and intersex (LGBTQI+); racial or ethnic minority; indigenous person; and person with a disability).

Scoring results

Survey respondents

A total of 225 respondents accessed the survey. A number of them only completed the background information section and did not score any items; as a result, only 153 surveys could be included in the analysis. Table 2 shows the number of responses received in each language. Most of the completed surveys (85%) were submitted in in English.

Table 2. Overview of responses received by language

Language	Total number of responses received	Number of completed surveys	Number of incomplete surveys	
			Scoring only completed	Background only completed
English	186	130	12	44
Spanish	15	8	0	7
French	18	12	0	6
Arabic	6	3	1	2
Total	225	153	13	59

During the course of the surveys, a number of measures were adopted to boost the response rate, including: placing the background information section after the scoring; sending follow-up emails to select stakeholders who had only completed certain sections; and moving the instructions to the top of the survey and putting them in bold for each section. It did not appear that any of these measures made much difference in changing the response rate. Most respondents who completed the survey (82%) identified as female (Table 3). There was good representation of both practitioner/service providers/programme managers (44%) and researchers/academics (41%) among the respondents who completed the survey; however, very few donor/funders (2%) and policy-makers (1%) participated. Most participants (59%) identified their area of expertise as intersections between violence against children and violence against women. A major strength of this exercise was that we were able to mobilize voices from LMICs – 59% of the sample were currently based in a LMIC (Appendix 2).

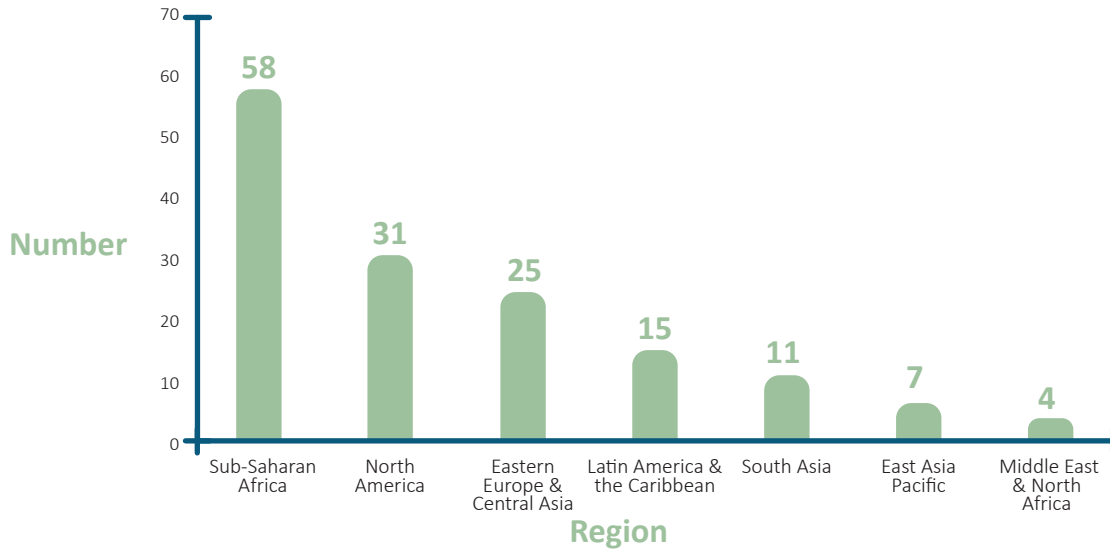
Table 3. Background information of participants by completeness of the scoring survey submitted

Respondent background	Complete (n = 153)	Incomplete ^a (n = 59)
Sex		
Female	126	38
Male	23	19
Non-binary	2	2
Other	2	1
Role		
Practitioner/service provider/programme manager	68	22
Researcher/academic/scholar	62	23
Activist	13	7
Donor/funder	3	4
Policy-maker	2	0
Other	5	3
Area of expertise		
Intersections between violence against children and violence against women	90	41
Violence against children	28	7
Violence against women or violence against women and girls	32	11
Country of residence		
High-income country	61	28
Low and middle-income country	90	31

^a Only the surveys with background information could be analysed for this comparison so 13 surveys were omitted. Even within the background information section, each question was voluntary and thus not every participant answered every question which accounts for the discrepancies in totals for various subsections.

The regional distribution of respondents was generally consistent with the regional distribution of the membership of the Sexual Violence Research Initiative (Figure 3). The largest number of responses came from sub-Saharan Africa (n=58; 38%) with most of these responses coming from South Africa. North America had the second largest geographical representation, 31 (21%) respondents, with most based in the United States.

Figure 3. Respondent location (scoring survey)



Research question rankings

The final research priority scores for the 45 research questions ranged from 80.6/100 to 94.9/100. For some research priority-setting exercises, the range can be much larger (for example, from 30.8/100 to 88.6/100) (22). These results suggest a relatively high level of agreement among the respondents for all of the questions. Even the lowest scoring research option scored 80.6.

The 10 research questions that scored the highest, and hence were considered the most important to address by the respondents as a whole, are shown in Table 4.

Table 4. Top 10 ranked questions with their research priority score and domain

OVERALL RANK	RESEARCH QUESTIONS	RESEARCH PRIORITY SCORE	DOMAIN
1	What are the essential elements of effective integrated programmes to address violence against women and violence against children?	94.9	2
2	How can parenting programs be adapted to effectively prevent multiple forms of violence against children and violence against women?	91.9	2
3	What are innovative and valid measures for violence against women- violence against children that have been developed and tested in low resource settings via participatory approaches?	91.8	3
4	How can we use the evidence of the violence against children- violence against women intersections to develop common language and a shared framework for effective coordination and collaboration?	91.6	4
5	What are the policies which address violence against women and violence against children together?	91.6	5
6	At global, regional, national, and local levels, what are the key barriers to effective collaboration across violence against children and violence against women sectors and what are the main opportunities for driving forward a joint agenda (e.g., investment in positive parenting programmes)?	91.3	4
7	How do effective violence against women- violence against children prevention interventions achieve change?	91.0	2
8	What forms of violence against children and violence against women do adolescents experience, including in the digital sphere?	90.6	1
9	How are adolescent girls adequately addressed in policies that address violence against children, violence against women and their intersections?	89.9	5
10	How do we evaluate primary prevention interventions of violence against women and violence against children?	89.7	3

This ranking leans toward intervention research (domain 2: research on interventions and services focused on the intersections between violence against children and violence against women), rather than epidemiological research (domain 1: research to strengthen our understanding of the intersections between violence against children and violence against women). It is also notable that the top ranked question scored three points more than the next question, suggesting that this question is a particularly high priority for the field.

The results of the scoring process, including the 45 questions listed by overall rank, are given in Annex 3. Interestingly, half of the lowest scoring research options were from domain 1, which again suggests that research related to epidemiological or descriptive aspects was considered lower priority than other questions by this group of stakeholders.

Rankings within each domain

Domain 1

The top five questions in domain 1 are listed in Table 5. Only one question from domain 1 was ranked in the overall top 10 questions.

Table 5. Top five questions of domain 1 – Strengthening of our understanding of the intersections between violence against children and violence against women

RANK WITHIN THE DOMAIN	OVERALL RANK	RESEARCH QUESTIONS	RESEARCH PRIORITY SCORE
1	8	What forms of VAC and VAW do adolescents experience, including in the digital sphere?	90.6
2	12	What are the risk and protective factors that enable and break the intergenerational cycle of violence respectively?	89.1
3	25	What are the different ways in which women’s and men’s experiences or perpetration of VAW may shape their child rearing practices and emotional engagement with their children?	87.1
4	32	What are service providers’ and practitioners’ views and experiences, including practice-based knowledge, of the intersections between VAW and VAC?	86.5
5	33	What are the drivers of male perpetration of both VAW and VAC?	86.4

Domain 2

The top five questions in domain 2 are listed in Table 6. Three of these questions were included in the overall top 10 questions.

Table 6. Top five questions of domain 2 – Interventions and services focused on the intersections between violence against children and violence against women

RANK WITHIN THE DOMAIN	OVERALL RANK	RESEARCH QUESTIONS	RESEARCH PRIORITY SCORE
1	1	What are the essential elements of effective integrated programmes to address violence against women and violence against children?	94.9
2	2	How can parenting programs be adapted to effectively prevent multiple forms of violence against children and violence against women?	91.9
3	7	How do effective violence against women- violence against children prevention interventions achieve change?	91.0
4	11	What is the evidence of effectiveness of interventions to break cycles of violence against children and violence against women?	89.7
5	18	What are the risks of having combined violence against women / violence against children prevention and response and how can these risks be mitigated?	88.6

Domain 3

The top five questions in domain 3 are listed in Table 7. Two of these questions were included in the overall top 10 questions.

Table 7. Top five questions of domain 3 – Tools, methods and measurements for research on the intersections between violence against children and violence against women

RANK WITHIN THE DOMAIN	OVERALL RANK	RESEARCH QUESTIONS	RESEARCH PRIORITY SCORE
1	3	What are innovative and valid measures for violence against women- violence against children that have been developed and tested in low resource settings via participatory approaches?	91.8
2	10	How do we evaluate primary prevention interventions of violence against women and violence against children?	89.7
3	14	How can children, adolescents, and women (and women's / youth groups) participate in developing tools, methods and measurements for violence against women / violence against children intersections, incidence, prevalence, and prevention?	88.9
4	22	What are the potential benefits, limitations, and ethical principles for the use of information technologies in the violence against women- violence against children approach?	88.2
5	24	What are the ethical and methodological implications of, and required ethical protocols, related to doing multi-generational research or intra-household research with children and adults?	88.0

Domain 4

The top five questions in domain 4 are listed in Table 8. Two of these questions were included in the overall top 10 questions.

Table 8. Top five questions of domain 4 – Coordination and collaboration across the sectors concerned with violence against women and violence against children

RANK WITHIN THE DOMAIN	OVERALL RANK	RESEARCH QUESTIONS	RESEARCH PRIORITY SCORE
1	4	How can we use the evidence of the violence against children- violence against women intersections to develop common language and a shared framework for effective coordination and collaboration?	91.6
2	6	At global, regional, national, and local levels, what are the key barriers to effective collaboration across violence against children and violence against women sectors and what are the main opportunities for driving forward a joint agenda (e.g., investment in positive parenting programmes)?	91.3
3	15	What can violence against children and violence against women prevention sectors learn from one another?	88.8
4	16	How can we best support those delivering violence against women- violence against children interventions to promote their own resilience and longevity of the program?	88.6
5	26	What are examples of whole of government approaches to effectively address violence against children- violence against women intersections?	87.6

Domain 5

The top five questions in domain 5 are listed in Table 9. Two of these questions were included in the overall top 10 questions.

Table 9. Top five questions of domain 5 – policy research

RANK WITHIN THE DOMAIN	OVERALL RANK	RESEARCH QUESTIONS	RESEARCH PRIORITY SCORE
1	5	What are the policies which address violence against women and violence against children together?	91.6
2	9	How are adolescent girls adequately addressed in policies that address violence against children, violence against women and their intersections?	89.9
3	13	How do policies and legislation for violence against women and violence against children overlap, what are the contradictions (if any) and where are the gaps?	89.0
4	17	How should policymakers meaningfully and safely engage children/youth, women, and survivor groups in development of policy on prevention and response to violence against children - violence against women intersections, to ensure their views and needs can be heard and incorporated?	88.6
5	19	How is gender equality, intersectionality, and human rights included in violence against children- violence against women intersections policy impact evaluations?	88.5

LGBTQI+: lesbian, gay, bisexual, transgender, queer, intersex, plus other.

Priorities of different stakeholder groups

We conducted additional analyses to explore how different groups of stakeholders ranked the questions. As stated above, differences should be interpreted with caution given that all research priorities had research priority scores of more than 80. Disaggregated analyses for all subgroups was not possible because of small numbers that limited meaningful interpretation.

Area of expertise

Table 10 shows the top five priorities by area of expertise: violence against children–violence against women intersections; violence against children; or violence against women or violence against women and girls. The top overall ranked question (What are the essential elements of effective integrated programmes to address violence against women and violence against children?) was ranked first by participants working in the fields of intersections between violence against children and violence against women and violence against women or violence against women and girls. However, participants working in violence against children ranked it fourth on their priority list. The top priority for participants working in violence against children was the question, “How can parenting programmes be adapted to effectively prevent multiple forms of violence against children and violence against women?”, which was ranked second overall. Overall, participants working in violence against children–violence against women prioritized intervention research (domain 2). This group also gave priority to development of tools and measures (domain 3), and more research to strengthen coordination and collaboration (domain 4). Similarly, participants working in violence against children also prioritized intervention research (domain 2); the other highly ranked questions for this group were split between domains 3, 4 and 5. In contrast, respondents working in violence against women or violence against women and girls ranked questions about coordination and collaboration (domain 4) and policy research (domain 5) highly although their top-ranked question was on intervention research (domain 2).

Table 10. Top five questions by stakeholders’ area of expertise

OVERALL RANK	DOMAIN	RESEARCH QUESTIONS	RANK BY PARTICIPANTS WORKING IN VIOLENCE AGAINST:		
			children & women (n = 90)	children (n = 28)	women or women & girls (n = 32)
1	2	What are the essential elements of effective integrated programmes to address violence against women and violence against children?	1	4	2
2	2	How can parenting programs be adapted to effectively prevent multiple forms of violence against children and VAW violence against women?	3	1	
3	3	What are innovative and valid measures for violence against women- violence against children that have been developed and tested in low resource settings via participatory approaches?	5	1	
4	4	How can we use the evidence of the violence against children- violence against women intersections to develop common language and a shared framework for effective coordination and collaboration?	2		
5	5	What are the policies which address violence against women and violence against children together?			2
6	4	At global, regional, national, and local levels, what are the key barriers to effective collaboration across violence against children and violence against women sectors and what are the main opportunities for driving forward a joint agenda (e.g., investment in positive parenting programmes)?		5	4
7	2	How do effective violence against women- violence against children prevention interventions achieve change?	4		
9	5	How are adolescent girls adequately addressed in policies that address violence against children, violence against women and their intersections?			5
15	4	What can violence against children and violence against women prevention sectors learn from one another?			3
17	5	How should policymakers meaningfully and safely engage children/ youth, women, and survivor groups in development of policy on prevention and response to violence against children- violence against women intersections, to ensure their views and needs can be heard and incorporated?		2	

Region of work

Table 11 shows the top five priorities ranked by participants based on their country of residence (LMIC and high-income country (HIC)). The overall top ranked question was identified as the top priority by respondents in both LMICs and HICs. Respondents from LMICs prioritized more questions related to intervention research (domain 2) than those from HICs. Respondents based in LMICs also prioritized questions from domain 3 (research methodology) and domain 4 (collaboration and coordination). Respondents based in HICs additionally prioritized a policy question (domain 5). Respondents from both LMICs and HIC did not include epidemiological research (domain 1) in their top five priorities.

Table 11. Top five questions by income level of stakeholder’s country of residence (HIC vs LMIC)

OVERALL RANK	DOMAIN	RESEARCH QUESTIONS	HICs (n=61)	LMICs (n=90)
1	2	What are the essential elements of effective integrated programmes to address violence against women and violence against children?	1	1
2	2	How can parenting programs be adapted to effectively prevent multiple forms of violence against children and VAW violence against women?	3	3
3	3	What are innovative and valid measures for violence against women- violence against children that have been developed and tested in low resource settings via participatory approaches?	2	
4	4	How can we use the evidence of the violence against children- violence against women intersections to develop common language and a shared framework for effective coordination and collaboration?	5	
5	5	What are the policies which address violence against women and violence against children together?	4	
6	4	At global, regional, national, and local levels, what are the key barriers to effective collaboration across violence against children and violence against women sectors and what are the main opportunities for driving forward a joint agenda (e.g., investment in positive parenting programmes)?		2
7	2	How do effective violence against women- violence against children prevention interventions achieve change?		4
10	3	How do we evaluate primary prevention interventions of violence against women and violence against children?		5

Appendix 4 shows the top five priorities ranked by the participants according to the region in which they are currently based. The regional analyses show wide ranging priorities in each region suggesting the importance of contextualizing priorities across settings.

Stakeholder type of work

Table 12 shows the top five priorities disaggregated by the type of work the stakeholders were engaged in; for example, researcher/academic/scholar, practitioner/service provider/programme manager, donor/funder, activist, policy-maker, and other. Practitioners and researchers had overlap in the priority questions selected, but the other groups had so few participants that it is difficult to draw conclusions from the results.

Table 12. Top five questions by stakeholders' type of work

OVERALL RANK	DOMAIN	RESEARCH QUESTIONS	Researcher/academic/scholar (n = 62)	Practitioner/service provider/programme manager (n = 68)	Donor/funder (n = 3)	Policy-maker (n = 2)	Activist (n=13)	Other (n=5)
1	2	What are the essential elements of effective integrated programmes to address violence against women and violence against children?	1	1	1			
2	2	How can parenting programs be adapted to effectively prevent multiple forms of VAC and VAW?		2	5	3		2
3	3	What are innovative and valid measures for VAW-VAC that have been developed and tested in low resource settings via participatory approaches?		3				
4	4	How can we use the evidence of the VAC-VAW intersections to develop common language and a shared framework for effective coordination and collaboration?	3				2	3
5	5	What are the policies which address VAW and VAC together?	2					
6	4	At global, regional, national, and local levels, what are the key barriers to effective collaboration across VAC and VAW sectors and what are the main opportunities for driving forward a joint agenda (e.g., investment in positive parenting programmes)?	5	4				
7	2	How do effective VAW-VAC prevention interventions achieve change?	4		2		5	
8	1	What forms of VAC and VAW do adolescents experience, including in the digital sphere?				2		
10	3	How do we evaluate primary prevention interventions of VAW and VAC?		5				
11	2	What is the evidence of effectiveness of interventions to break cycles of VAC and VAW?					1	
12	1	What are the risk and protective factors that enable and break the intergenerational cycle of violence respectively?						4
14	3	How can children, adolescents, and women (and women's / youth groups) participate in developing tools methods and measurements for VAW/VAC intersections, incidence, prevalence, and prevention?					4	
19	5	How is gender equality, intersectionality, and human rights included in VAC-VAW intersections policy impact evaluations?					3	
20	2	What interventions achieve long-term effectiveness in preventing VAC and VAW?			3			
23	2	When and how could VAW programs be adapted to address VAC?				4		
25	1	What are the different ways in which women's and men's experiences or perpetration of VAW may shape their child rearing practices and emotional engagement with their children?			4			
36	1	How do risk and protective factors for co-occurrence of VAW and VAC differ according to key characteristics of parents and children (e.g., gender, sexuality, age, ability, etc.)?						1
41	1	What role does mental health play in intergenerational transmission of violence?				1		
42	2	What adaptations should parenting, couple or healthy relationship interventions that seek to address both VAW and VAC make to be effective for LGBTQ+ and other minoritised populations?				5		
44	1	What is the relationship between harmful practices such as child marriage and FGM and the experience of other forms of family violence for women and girls?						5

LGBTQI+: lesbian, gay, bisexual, transgender, queer, intersex, plus other.

Marginalized voices

Table 13 shows the top five priorities disaggregated by minority group identification (e.g., LGBTQI+; racial or ethnic minority and indigenous people; people with disabilities). Priority ranking by these groups showed a lot of variation indicating the unique needs of the various marginalised groups. Therefore, when working with marginalised and minority groups it is important to reach a more nuanced understanding of priorities within these intersecting identities.

Table 13. Top five questions of respondent's identifying with a minority group

OVERALL RANK	DOMAIN	RESEARCH QUESTIONS	GROUP WITH WHICH RESPONDENT IDENTIFIES		
			LGBTQI+ (n=14, 9% of total)	Racial or ethnic minorities & Indigenous people (n=34, 22% of total)	People with a disability (n=14, 9% of total)
1	2	What are the essential elements of effective integrated programmes to address violence against women and violence against children?	4	2	
3	3	What are innovative and valid measures for violence against women- violence against children that have been developed and tested in low resource settings via participatory approaches?		4	
5	5	What are the policies which address violence against women and violence against children together?		1	
6	4	At global, regional, national, and local levels, what are the key barriers to effective collaboration across violence against children and violence against women sectors and what are the main opportunities for driving forward a joint agenda (e.g., investment in positive parenting programmes)?		3	
7	2	How do effective violence against women- violence against children prevention interventions achieve change?	1		
8	1	What forms of violence against children and violence against women do adolescents experience, including in the digital sphere?			5
10	3	How do we evaluate primary prevention interventions of violence against women and violence against children?		5	
11	2	What is the evidence of effectiveness of interventions to break cycles of violence against children and violence against women?	5		1
19	5	How is gender equality, intersectionality, and human rights included in violence against children- violence against women intersections policy impact evaluations?			2
3	3	What are innovative and valid measures for violence against women- violence against children that have been developed and tested in low resource settings via participatory approaches?		4	
5	5	What are the policies which address violence against women and violence against children together?		1	
6	4	At global, regional, national, and local levels, what are the key barriers to effective collaboration across violence against children and violence against women sectors and what are the main opportunities for driving forward a joint agenda (e.g., investment in positive parenting programmes)?		3	
7	2	How do effective violence against women- violence against children prevention interventions achieve change?	1		
8	1	What forms of violence against children and violence against women do adolescents experience, including in the digital sphere?			5
10	3	How do we evaluate primary prevention interventions of violence against women and violence against children?		5	
11	2	What is the evidence of effectiveness of interventions to break cycles of violence against children and violence against women?	5		1
19	5	How is gender equality, intersectionality, and human rights included in violence against children- violence against women intersections policy impact evaluations?			2
31	5	What is the association between social or feminist movements and the development or implementation of policies for the prevention of and response to violence against children and violence against women?			4
34	4	How are funding streams creating competition between violence against children and violence against women actors and where are the synergies?			3
37	3	How can we promote the development and adoption of appropriate measures that capture the different drivers of violence in LGBTQI+ and other minoritised populations across violence against women / violence against children sectors?	3		
43	2	How can women experiencing IPV while parenting be supported in a positive way rather than be reported to child protection?	2		

LGBTQI+: lesbian, gay, bisexual, transgender, queer, intersex, plus other.

Lessons and limitations

- Priority setting exercises are time-consuming, making response rates a concern. We had responses from 153 people which is considerably higher than many priority-setting exercises which tend to include fewer than 50 respondents (22). However, our response rate was low (31%) given that 500 people had registered to be on the global stakeholder list but most did not respond.
- Efforts to include different stakeholders were successful with some groups, for example, our sample included participants from LMICs as well as both researchers and practitioners. However, we did not have adequate representation from some geographic regions, from marginalized groups, or from donors and policy-makers. In future, ways to bring in stakeholders from these subgroups should be explored.
- Most of the respondents (82%) identified as female, which is largely the gender composition of those working in the field of violence against women and violence against children. It is unclear to what extent the results would have been different if more males and non-binary individuals had participated.
- The results of this exercise reflect the priorities held by the participants who chose to take part in this activity. Considerable effort was made reach out and ensure as varied a group of respondents as possible. Nonetheless, it is noteworthy that certain research areas were not among the priorities selected, including: prevention of adverse childhood experiences to reduce both violence against children and violence against women; school-based violence prevention; research on interventions that show promise at a population level (for example, laws to reduce access to alcohol and to ban corporal punishment); and other forms of violence affecting children and adolescents, such as bullying and gang violence. These research priorities should not be interpreted as a rigid set of the only research that should be conducted over the next 10 years, but rather as guidance based on overall insights from representatives of the field.
- In spite of reviews by content experts, some challenges arose with translations of the surveys used for this process. Therefore, future prioritization exercises should consider investing in additional efforts to enhance the participation of non-English speakers.
- Some respondents found the survey to be time-consuming and repetitive, which at least partially explains the discrepancy between those who signed up for the global stakeholder group and those who completed the questionnaire in full. Thought should be given to how best to streamline future research prioritization exercises and make them simpler for respondents to engage with.

Conclusions and recommendations

Identifying global research priorities is a complex process; however, through an inclusive and participatory process we created opportunities for respondents from different geographical regions, multiple sectors and relevant fields (that is, violence against children, violence against women and violence against children–violence against women intersections) to share their perspectives. The high level of participation of people from LMICs and both researchers and practitioners is encouraging. These inputs allowed us to generate research priorities that reflect the priorities of different groups of stakeholders.

The overall high scores of all research questions suggest a certain consensus around knowledge gaps that need to be filled to better understand and address violence against children–violence against women intersections in effective ways. In general, intervention research was prioritized more than research in other domains and there was support for action to tackle violence against children and violence against women and their intersections in coordinated ways. Considerable progress has been made in recent years to understand how violence against women and violence against children intersect. We must now focus on identifying the most effective interventions to prevent and respond to both forms of violence.

Whatever the research that is undertaken in the area of violence against children–violence against women intersections, ethics and equity must be central to the approach. We hope that stakeholder groups will take up these research priorities so that we can strategically strengthen the evidence base and increase effective services, interventions, and policies to make the world a safer place for both women and children, in all their diversity.

This research-priority agenda was built by people working in the field of violence against children and violence against women for the people working in the field. Its value lies in how it was created as well as in its use for building the evidence base. Thus, we make the following recommendations.

- 1. Researchers, practitioners and activists should use this agenda as an advocacy tool for more and better investment in resources to address these research priorities, and to guide their own research efforts to build further evidence around the intersections between violence against children and violence against women and how to address these ethically and effectively.**
- 2. Funders, in conversation with their grantee partners, should use this agenda to guide their investments in research and knowledge-building.**
- 3. Policy-makers and governments should use this agenda to advocate for and support further research on the priorities outlined in this agenda.**

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Annexes

Annex 1. Scoring survey form

Research question	Will the knowledge from this research question influence understanding, practice or policy on violence against children–violence against women intersections?			Will the knowledge from this research question change our current understanding or approaches to researching violence against children–violence against women intersections?			Can an ethical research study be designed and implemented to document data to answer this question (within 10 years)?		
	Yes	No	Maybe	Yes	No	Maybe	Yes	No	Maybe
Domain 1. Gender-sensitive research to understand the different intersections across multiple forms of violence against women and violence against children – including types, frequency, severity, prevalence, incidence, nature, and impacts of, pathways between, and risk and protective factors associated with co-occurrence of violence against women and violence against children across the life course and generations.									
What role does mental health play in intergenerational transmission of violence?									
What are the risk and protective factors that enable and break the intergenerational cycle of violence respectively?									
What are service providers’ and practitioners’ views and experiences, including practice-based knowledge, of the intersections between violence against women and violence against children?									
What forms of violence against children and violence against women do adolescents experience, including in the digital sphere?									
How do risk and protective factors for co- occurrence of violence against women and violence against children differ according to key characteristics of parents and children (e.g., gender, sexuality, age, ability, etc.)?									
What are the different ways in which women’s and men’s experiences or perpetration of violence against women may shape their child rearing practices and emotional engagement with their children?									
What is the prevalence of violence against women and violence against children co-occurrence?									
What are the drivers of male perpetration of both violence against women and violence against children?									
What is the relationship between harmful practices such as child marriage and female genital mutilation and the experience of other forms of family violence for women and girls?									
What are the common and long-term impacts of sexual violence, whether experienced in childhood or adulthood?									
Domain 2: Research on programmes, interventions, and services that prevent and/or respond to both violence against women and violence against children including building an understanding of when and how interventions to prevent or respond to both violence against women and violence against children work and when coordinated or integrated violence against children and violence against women interventions are not recommended (and why).									
What are the essential elements of effective integrated programmes to address violence against women and violence against children?									

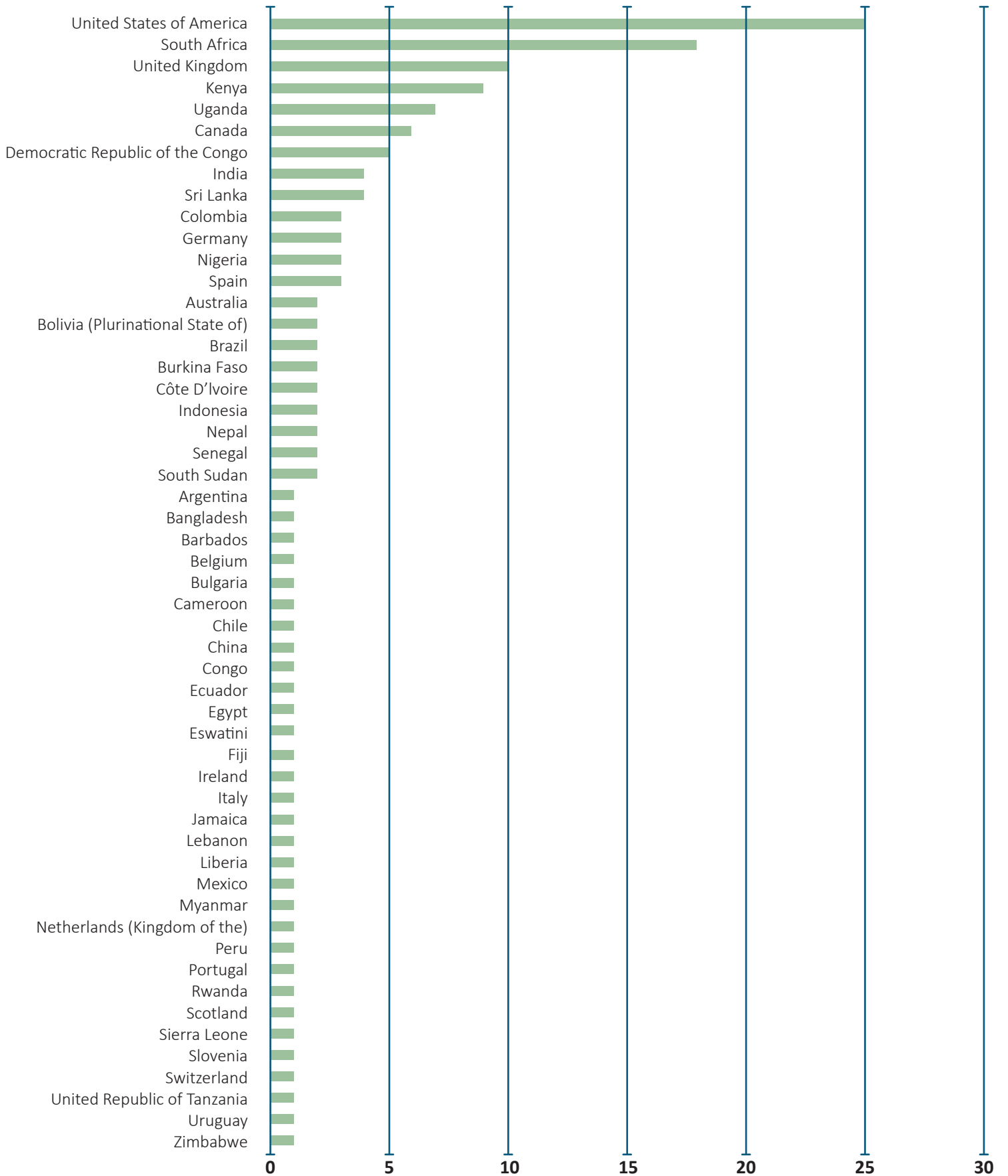
How can parenting programmes be adapted to effectively prevent multiple forms of violence against children and violence against women?									
What are the risks of having combined violence against women / violence against children prevention and response and how can these risks be mitigated?									
When and how could violence against women programmes be adapted to address violence against children?									
How can women experiencing intimate partner violence while parenting be supported in a positive way rather than be reported to child protection?									
What adaptations should parenting, couple or healthy relationship interventions that seek to address both violence against women and violence against children make to be effective for LGBTQ+ and other minority populations?									
What is the evidence of effectiveness of interventions to break cycles of violence against children and violence against women?									
How do effective violence against women-violence against children prevention interventions achieve change?									
What works to ensure that adolescent girls receive the support they need to recover from violence, no matter which service provider they approach: healthcare, adult gender-based violence or child protection?									
What interventions achieve long-term effectiveness in preventing violence against children and violence against women?									
Domain 3. Research to identify new and innovative ways to measure intersections of violence against women and violence against children; challenge hierarchies of knowledge, encourage practice-based learning and participatory approaches; and address ethical issues and strengthen monitoring and evaluation of interventions in ways that investigate outcomes relevant to both violence against women and violence against children.									
How do we create common measurement tools and scales that enable cross-country and cross-study comparisons of violence against children and violence against women intersections, including in violent environments such as displacement and conflict?									
How can children, adolescents, and women (and women's/youth groups) participate in developing tools methods and measurements for violence against women/violence against children intersections, incidence, prevalence, and prevention?									
What are the ethical and methodological implications of, and required ethical protocols related to, doing multi-generational research or intra-household research with children and adults?									

How can health (including mental health) status be more efficiently and demonstrably measured in survivors of violence against children/violence against women and those who have witnessed violence in the household?									
How can the unique characteristics of violence against women and violence against children in Afro-descendant and indigenous peoples be measured and visualised with culturally relevant and sensitive epidemiological methods and studies?									
What are the potential benefits, limitations, and ethical principles for the use of information technologies in the violence against women-violence against children approach?									
How can we promote the development and adoption of appropriate measures that capture the different drivers of violence in LGBTQI+ and other minoritised populations across violence against women / violence against children sectors?									
What are innovative and valid measures for violence against women-violence against children that have been developed and tested in low resource settings via participatory approaches?									
How do we evaluate primary prevention interventions tackling violence against women and violence against children?									
Domain 4: Research into challenges and facilitating factors associated with coordination and collaboration across sectors at multiple levels as well as research that provides insights into shared language, common values, and principles, and helps address "thorny" issues (such as mandatory reporting, parental alienation, etc.) which often impede collaboration.									
At global, regional, national, and local levels, what are the key barriers to effective collaboration across violence against children and violence against women sectors and what are the main opportunities for driving forward a joint agenda (e.g. investment in positive parenting programmes)?									
How are funding streams creating competition between violence against children and violence against women actors and where are the synergies?									
To what extent can violence against children and violence against women reporting, and referral procedures become harmonized?									
How can violence against children and violence against women sector coalesce around an agenda which focuses on adolescence as a critical period of transformative change and violence prevention?									
What can violence against children and violence against women prevention sectors learn from one another?									
What are examples of whole of government approaches to effectively address violence against children-violence against women intersections?									
How can we best support those delivering violence against women-violence against children interventions to promote their own resilience and longevity of the programme?									

How can we use the evidence of the violence against children-violence against women intersections to develop common language and a shared framework for effective coordination and collaboration?									
Domain 5. Research to better understand policies including how they address violence against children-violence against women intersections, how they influence governance and delivery of services (availability, mandates, funding, etc.), and what impacts they have.									
How should policymakers meaningfully and safely engage children/youth, women, and survivor groups in development of policy on prevention and response to violence against children-violence against women intersections, to ensure their views and needs can be heard and incorporated?									
How are adolescent girls adequately addressed in policies that address violence against children, violence against women and their intersections?									
What are the barriers and facilitators of joint policy-making, planning, and implementation between violence against women-violence against children stakeholders at the regional, national, and sub-national levels?									
How do policies and legislation for violence against women and violence against children overlap, what are the contradictions (if any) and where are the gaps?									
How do policies aimed at preventing and responding to violence against children/violence against women work across the life-course to end intergenerational cycles of violence?									
What are the policies which address violence against women and violence against children together?									
How is gender equality, intersectionality, and human rights included in violence against children-violence against women intersections policy impact evaluations?									
What is the association between social or feminist movements and the development or implementation of policies for the prevention of and response to violence against children and violence against women?									

LGBTQI+: lesbian, gay, bisexual, transgender, queer, intersex, plus other.

Annex 2. Geographical location of respondents in the scoring survey



Annex 3. Overall ranking of research questions

OVERALL RANK	RESEARCH QUESTIONS	OVERALL RESEARCH PRIORITY SCORES	DOMAIN
1	What are the essential elements of effective integrated programmes to address violence against women and violence against children?	94.9	2
2	How can parenting programmes be adapted to effectively prevent multiple forms of violence against children and violence against women?	91.9	2
3	What are innovative and valid measures of violence against women and violence against children that have been developed and tested in low-resource settings via participatory approaches?	91.8	3
4	How can we use the evidence of the violence against children- violence against women intersections to develop common language and a shared framework for effective coordination and collaboration?	91.6	4
5	What are the policies which address violence against women and violence against children together?	91.6	5
6	At global, regional, national, and local levels, what are the key barriers to effective collaboration across violence against children and violence against women sectors and what are the main opportunities for driving forward a joint agenda (e.g., investment in positive parenting programmes)?	91.3	4
7	How do effective violence against women- violence against children prevention interventions achieve change?	91.0	2
8	What forms of violence against children and violence against women do adolescents experience, including in the digital sphere?	90.6	1
9	How are adolescent girls adequately addressed in policies that address violence against children, violence against women and their intersections?	89.9	5
10	How do we evaluate primary prevention interventions of violence against women and violence against children?	89.7	3
11	What is the evidence of effectiveness of interventions to break cycles of violence against children and violence against women?	89.7	2
12	What are the risk and protective factors that enable and break the intergenerational cycle of violence respectively?	89.1	1
13	How do policies and legislation for violence against women and violence against children overlap, what are the contradictions (if any) and where are the gaps?	89.0	5
14	How can children, adolescents, and women (and women's / youth groups) participate in developing tools methods and measurements for violence against women / violence against children intersections, incidence, prevalence, and prevention?	88.9	3
15	What can violence against children and violence against women prevention sectors learn from one another?	88.8	4
16	How can we best support those delivering violence against women- violence against children interventions to promote their own resilience and longevity of the program?	88.6	4
17	How should policymakers meaningfully and safely engage children/youth, women, and survivor groups in development of policy on prevention and response to violence against children - violence against women intersections, to ensure their views and needs can be heard and incorporated?	88.6	5
18	What are the risks of having combined violence against women / violence against children prevention and response and how can these risks be mitigated?	88.6	2
19	How is gender equality, intersectionality, and human rights included in violence against children- violence against women intersections policy impact evaluations?	88.5	5
20	What interventions achieve long-term effectiveness in preventing violence against children and violence against women?	88.3	2
21	What are the barriers and facilitators of joint policy-making, planning, and implementation between violence against women- violence against children stakeholders at the regional, national, and sub-national levels?	88.2	5
22	What are the potential benefits, limitations, and ethical principles for the use of information technologies in the violence against women- violence against children approach?	88.2	3
23	When and how could violence against women programs be adapted to address violence against children?	88.0	2
24	What are the ethical and methodological implications of, and required ethical protocols related to, doing multi-generational research or intra-household research with children and adults?	88.0	3

25	What are the different ways in which women's and men's experiences or perpetration of violence against women may shape their child rearing practices and emotional engagement with their children?	87.9	1
26	What are examples of whole of government approaches to effectively address violence against children- violence against women intersections?	87.6	4
27	How can violence against children and violence against women sectors coalesce around an agenda which focuses on adolescence as a critical period of transformative change and violence prevention?	87.4	4
28	What works to ensure that adolescent girls receive the support they need to recover from violence, no matter which service provider they approach: healthcare, adult GBV or child protection?	87.3	2
29	How do we create common measurement tools and scales that enable cross-country and cross-study comparisons of violence against children and violence against women intersections, including in violent environments such as displacement and conflict?	87.3	3
30	How do policies aimed at preventing and responding to violence against children / violence against women work across the life-course to end intergenerational cycles of violence?	87.2	5
31	What is the association between social or feminist movements and the development or implementation of policies for the prevention of and response to violence against children and violence against women?	86.9	5
32	What are service providers' and practitioners' views and experiences, including practice-based knowledge, of the intersections between violence against women and violence against children?	86.5	1
33	What are the drivers of male perpetration of both VA violence against women W and violence against children?	86.4	1
34	How are funding streams creating competition between violence against children and violence against women actors and where are the synergies?	86.3	4
35	To what extent can violence against children and violence against women reporting, and referral procedures become harmonised?	86.2	4
36	How do risk and protective factors for co-occurrence of violence against women and violence against children differ according to key characteristics of parents and children (e.g., gender, sexuality, age, ability, etc.)?	86.1	1
37	How can we promote the development and adoption of appropriate measures that capture the different drivers of violence in LGBTQI+ and other minoritised populations across violence against women / violence against children sectors?	85.3	3
38	How can health (including mental health) status be more efficiently and demonstrably measured in survivors of violence against children / violence against women and those who have witnessed violence in the household?	83.8	1
38	What is the prevalence of violence against women and violence against children co-occurrence?	83.4	1
40	How can the unique characteristics of violence against women and violence against children in Afro-descendant and indigenous peoples be measured and visualised with culturally relevant and sensitive epidemiological methods and studies?	83.4	3
41	What role does mental health play in intergenerational transmission of violence?	83.4	1
42	What adaptations should parenting, couple or healthy relationship interventions that seek to address both violence against women and violence against children make to be effective for LGBTQI+ and other minoritised populations?	82.5	2
43	How can women experiencing intimate partner violence while parenting be supported in a positive way rather than be reported to child protection?	81.6	2
44	What is the relationship between harmful practices such as child marriage and female genital mutilation and the experience of other forms of family violence for women and girls?	80.9	1
45	What are the common and long-term impacts of sexual violence, whether experienced in childhood or adulthood?	80.6	1

LGBTQI+: lesbian, gay, bisexual, transgender, queer, intersex, plus other.

**Annex 4. Top five ranked questions by geographic region of the respondents
(where currently based)**

OVERALL RANK	DOMAIN	RESEARCH QUESTIONS	REGION						
			Sub-Saharan Africa (n = 58)	North America (n = 31)	Eastern Europe & Central Asia (n = 25)	Latin America & the Caribbean (n = 15)	South Asia (n = 11)	East Asia Pacific (n = 7)	Middle East & North Africa (n = 4)
1	2	What are the essential elements of effective integrated programmes to address violence against women and violence against children?	1	1		3			1
2	2	How can parenting programs be adapted to effectively prevent multiple forms of violence against children and violence against women?	2	2	4`				
3	3	What are innovative and valid measures for violence against women- violence against children that have been developed and tested in low resource settings via participatory approaches?			3			3	
4	4	How can we use the evidence of the violence against children - violence against women intersections to develop common language and a shared framework for effective coordination and collaboration?		3		2			
5	5	What are the policies which address violence against women and violence against children together?		4				5	
8	1	What forms of violence against children and violence against women do adolescents experience, including in the digital sphere?					1	1	1
9	5	How are adolescent girls adequately addressed in policies that address violence against children, violence against women and their intersections?	5		5				
11	2	What is the evidence of effectiveness of interventions to break cycles of violence against children and violence against women?				4			
13	5	How do policies and legislation for violence against women and violence against children overlap, what are the contradictions (if any) and where are the gaps?					3		
16	4	How can we best support those delivering violence against women- violence against children interventions to promote their own resilience and longevity of the program?	4					4	
17	5	How should policymakers meaningfully and safely engage children/youth, women, and survivor groups in development of policy on prevention and response to violence against children- violence against women intersections, to ensure their views and needs can be heard and incorporated?			2		2		

19	5	How is gender equality, intersectionality, and human rights included in violence against children- violence against women intersections policy impact evaluations?	3						
24	3	What are the ethical and methodological implications of, and required ethical protocols related to, doing multi-generational research or intra-household research with children and adults?				5			
26	4	What are examples of whole of government approaches to effectively address violence against children- violence against women intersections?			1				
28	2	What works to ensure that adolescent girls receive the support they need to recover from violence, no matter which service provider they approach: healthcare, adult GBV or child protection?					4		
33	1	What are the drivers of male perpetration of both violence against women and violence against children?							4
35	4	To what extent can violence against children and violence against women reporting, and referral procedures become harmonised?						3	
36	1	How do risk and protective factors for co-occurrence of violence against women and violence against children differ according to key characteristics of parents and children (e.g., gender, sexuality, age, ability, etc.)?					5		
37	3	How can we promote the development and adoption of appropriate measures that capture the different drivers of violence in LGBTQI+ and other minoritised populations across violence against women / violence against children sectors?		5		1			
41	1	What role does mental health play in intergenerational transmission of violence?							2
44	1	What is the relationship between harmful practices such as child marriage and female genital mutilation and the experience of other forms of family violence for women and girls?							5

LGBTQI+: lesbian, gay, bisexual, transgender, queer, intersex, plus other.

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