Preventing and Responding to Gender-Based Violence: Expressions and Strategies

Gender equality is achieved when women and men, girls and boys, have equal rights, life prospects and opportunities, and the power to shape their own lives and contribute to society.
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SUMMARY

Ending gender-based violence (GBV) and ensuring women’s security is a priority for the Swedish government, a priority reflected in central objectives of Swedish policy for development cooperation. Sida defines GBV as any harm or suffering that is perpetrated against a woman or girl, man or boy and that has negative impact on the physical, sexual or psychological health, development or identity of the person. The cause of this violence is founded in gender-based inequalities and discrimination. GBV is the most extreme expression of these unequal gender relations in society, and a violation of human rights, as well as a main hindrance of the achievement of gender equality. In Sida’s work an important point of departure is that GBV is preventable, which entails a focus on the root causes of violence and on possibilities for change.

Women and girls are mostly affected by GBV, and globally at least one third of all women have been exposed to violence in an intimate relationship, but also men and boys can be subjected to GBV. Regardless, the violence is linked to gender inequalities and norms for gender. Most commonly GBV occurs in the family, but it also takes place at other arenas in society, private and public. GBV is an umbrella definition including a wide range of expressions of violence such as intimate partner violence, sexual violence by non-partners, Female Genital mutilation (FGM), honour violence, early marriage, violence against LGBTI and trafficking in human beings. In situations of war and conflict, GBV is particularly present.

Entry points in addressing GBV is that gender-based violence is a violation of human rights, and that tackling GBV is crucial for poverty reduction and economic development. GBV is furthermore a key to protect sexual and reproductive health and rights (SRHR), and reverse the spread of HIV. It is also a security concern and a prerequisite for sustainable peace.

When defining effective strategies to end a priority is to make efforts to prevent GBV. Given that GBV is linked to gender-based power inequalities, key in GBV prevention are efforts to increase gender equality and transformation of gender norms. Prevention strategies entail a shift from “victims” to “survivors” with a focus on women and girl’s empowerment and agency, efforts to increase women’s political and economic empowerment and sexual and reproductive rights, and to incorporate men and boys in the work. The strengthening of legal and policy framework is also of utmost importance, as are efforts to bridge the gap between law and practice and to end the impunity for GBV. Response to survivors, which meets their rights to protection and access to services, including shelters and health sector services, is also core.
Gender-based violence (GBV) is the most extreme expression of unequal gender relations in society. It is first and foremost a violation of human rights, and a global health issue that cuts across boundaries of economic wealth, culture, religion, age, and sexual orientation. While GBV is disproportionately affecting women and girls, it also affects men and boys. Wherever GBV occurs, it is a major obstacle for the achievement of gender justice, posing a serious threat to democratic development and public health, and is a critical barrier to achieving sustainable development, economic growth and peace. If women, girls, men and boys are not safe, they cannot be full citizens nor fully participate in the development of their own society.

Gender-based violence is a violation of human rights. This is reflected in international agreements such as the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), the Declaration on the Elimination of Violence against Women and emphasised in the UN Fourth World Conference on Women in Beijing 1995. GBV is preventable. In order to decrease and eventually end GBV a paradigm shift is needed. This entails a focus on the root causes of violence founded in gender-based power inequalities and gender-based discrimination.

Ending gender-based violence and ensuring women’s security is a priority for the Swedish government. This priority is reflected in central objectives of the Swedish policy for development cooperation and in thematic and geographical result strategies as well as in Sida’s interventions. This counts for both humanitarian assistance and long-term development cooperation.

This thematic overview looks at GBV in the context of Swedish development cooperation. It explains the underlying patterns and causes of, as well as different expressions of GBV. The overview outlines Sida’s threefold approach to address GBV: (i) Preventing violence, (ii) Strengthening legal and policy frameworks and (iii) Improving response services for survivors, illustrated by successful programs from Sida’s partner organisations. It is hoped that this thematic overview contributes with information that can guide the way forward in the quest to eliminate all forms of GBV in contexts of peace, crisis and conflict

1
2. What is Gender-Based Violence?

Gender equality is achieved when women and men, girls and boys, have equal rights, life prospects and opportunities, and the power to shape their own lives and contribute to society. The opposite of this — gender inequality, unequal power relations and discrimination based on gender — is the root of gender-based violence. This violence is also a main obstacle to the achievement of gender equality: unequal power relations are upheld through gender-based violence.

Sida defines gender-based violence as:

Any harm or suffering that is perpetrated against a woman or girl, man or boy and that has a negative impact on the physical, sexual or psychological health, development or identity of the person. The cause of the violence is founded in gender-based power inequalities and gender-based discrimination.

Many actors, including the UN, use the term “violence against women” (VAW). A multifaceted definition of VAW was articulated in the United Nations Declaration on the Elimination of Violence against Women3 adopted by the General Assembly in 1993. The declaration described abuse as any act of violence ‘that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life’.

The UN further described VAW as;

‘...a manifestation of historically unequal power relations between men and women, which have led to domination over and discrimination against women by men and to the prevention of the full advancement of women, and that violence against women is one of the crucial social mechanisms by which women are forced into a subordinate position compared with men.’

Due to the fact that GBV mostly affects women and girls, the terms GBV and VAW are often used interchangeably. However, men and boys can also be subject to GBV, and women can be perpetrators. Sida’s definition is in line with the UN definition of violence against women, but has a wider scope so as to include men and boys as potential survivors. GBV against women and girls is linked to gender inequalities and gender norms according to which the ‘female’ and the ‘feminine’ is associated with weakness, inferiority and victimisation. Likewise GBV against men and boys often builds on different norms for masculinity and femininity. For instance, men and boys who are subject to GBV can be punished for not being ‘real’ men, not complying with social expectations on manhood and masculinity norms, for example as gay, trans, bisexual and/or being identified as belonging to a low-status masculinity identity.

While gender inequality, unequal power relations and discrimination based on gender are the overarching causes of GBV, and this violence is not limited to specific regions or socioeconomic, religious, or ethnic groups but occur everywhere, the interplay between other causes and contributing factors influences the prevalence of GBV. These factors may include normalisation of violence in the wake of armed conflict, an ineffective criminal justice system,
poverty and economic stress as well as young boys and girls having experienced violence in childhood.7

**COSTS OF GBV**
The global costs of GBV are enormous. Apart from individual, community, family and society costs, GBV also has huge economic consequences at all levels. In many countries in the north as well as in the south, the costs of intimate partner violence are the same or even exceed the costs for primary education. In Peru, for example, the economic costs for interpersonal violence is more than 3.5% of GDP, and for primary education less than 1.5% (World Bank Group Voice and Agency 2014).

**THE LIFECYCLE OF GENDER-BASED VIOLENCE**
GBV takes on many forms and can occur throughout a person’s life cycle.8 Many experience multiple episodes of violence that may start in the prenatal period and continue through childhood to adulthood and old age. Examples of different forms of violence that may be experienced throughout a person’s life is described in the following box. This approach to GBV helps us to understand the continuum of violence9 and its cumulative impact in terms of physical and mental health consequences for women and girls, boys and men. This shows that “mild” and severe forms of violence are part of the same continuum. Not only the most severe forms of violence are hurtful, but even more so the every day presence of violence throughout a person’s life.

**The life cycle of gender-based violence**

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<thead>
<tr>
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<th>Female</th>
<th>Male</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Prenatal:</strong></td>
<td>Prenatal sex physical/sexual/psychological child abuse during pregnancy, coerced/forced pregnancy.</td>
<td>Prenatal sex selection.</td>
</tr>
<tr>
<td><strong>Infancy:</strong></td>
<td>Female infanticide, sexual, child abuse, living with domestic violence, neglect including access to food and medical care.</td>
<td>Physical/sexual/psychological child abuse, socialisation into violent behaviour, living with domestic violence neglect including access to food and medical care.</td>
</tr>
<tr>
<td><strong>Childhood:</strong></td>
<td>Sexual, physical and emotional abuse, prostitution, living with domestic violence, child/forced marriage, FGM, femicide, upbringing that does not allow deviation from traditional gender norms and discrimination in nourishing food distribution, medical care and education.</td>
<td>Sexual, physical and emotional abuse, prostitution, living with domestic violence, male circumcision, forced recruitment of child soldiers, upbringing that does not allow deviation from traditional gender norms.</td>
</tr>
<tr>
<td><strong>Adolescence</strong></td>
<td>FGM, prostitution and pornography, trafficking, sexual harassment at school and in the street, forced marriage, forced recruitment of child soldiers, honour crimes, intimate partner violence and rape and sexual assault by relatives, known persons or strangers.</td>
<td>Forced recruitment of child soldiers, honour crimes, gang violence, expectations of violent behaviour as the norm, invitation rites into violence.</td>
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<tr>
<td><strong>Adulthood</strong></td>
<td>Sexual harassment at work and in the public space, intimate partner violence, rape and sexual assault, femicide, forced pregnancy, dowry and bride price abuse, honour crimes, sexual exploitation and trafficking, stalking.</td>
<td>Gang violence, witnessing or forced to conduct rape, honour crimes, sexual exploitation, violence in the army and in conflict, gun violence.</td>
</tr>
<tr>
<td><strong>Old age</strong></td>
<td>Elder abuse, intimate partner violence, rape, abuse of widows, sexual harassment in public space, institutional abuse.</td>
<td>Elder abuse.</td>
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2. WHAT IS GENDER-BASED VIOLENCE?

Facts on GBV

- According to the 2013 WHO report on intimate partner violence and non-partner violence against women, nearly one third of all women who have been in a relationship have experienced violence by their intimate partner, and as many as 38% of all murders of women are committed by intimate partners.
- 603 million women live in countries where intimate partner violence/domestic violence is not yet considered a crime.
- Most women who experience violence never seek help or report. Data from 30 countries shows that only 4 in 10 seeks help at all, and only 6% from authorities. There is an 11.9% lifetime prevalence of non-partner sexualised violence in Africa according to WHO.
- Nearly a quarter of the 10,000 men interviewed for the UN P4P unprecedented study on men’s use of violence against women in Asia and the Pacific, reported having raped a woman or girl.
- Between January and November 2013, the UN recorded at least 4,530 cases of sexualised violence perpetrated by armed men in different parts of the Central African Republic.
- Every year, approximately 15 million girls are married before the age of 18, across countries, cultures and religions. Statistics for 2012 showed that of all known Syrian girls who were married between the ages of 15 and 17, 16.2% were married to men 15 years older than them or more.
- More than 125 million girls and women alive today have been subject to FGM in the 29 countries in Africa and the Middle East where FGM is concentrated.
- UNFPA estimates that the annual worldwide number of ‘honour killing’ victims may be as high as 5,000 women.
- According to a screening of male refugees from eastern DRC, 13.4% of the male population aged 18 or older had experienced sexual violence in the preceding 12 months.
- In South Africa, perpetrators of GBV often rape lesbians and gays to ‘make them straight’ or to ‘correct’ their sexuality. Lesbian women are particularly targeted for rape in townships where men rape or gang-rape 10 lesbian, or ‘perceived to be lesbian’, women weekly.
Gender-based violence occurs in homes but also in schools, at workplaces, parks and other public places. GBV is sometimes random but often, particularly when the perpetrator knows the victim, repeated and systematic. While GBV cuts across economic wealth, culture, religion, sexual orientation and age, some groups are particularly vulnerable. They include for example women in war and conflict, refugee and migrant women, LGBTI persons, women and men in prostitution, women belonging to minority and indigenous groups, women with disabilities and elderly women.

GBV is an umbrella definition including a wide range of expressions of violence. The expressions below are examples relevant for Sida’s cooperation, but are not meant to undermine the relevance and urgency of other forms of violence.

3. Multiple Expressions of Gender-Based Violence

INTIMATE PARTNER VIOLENCE

The form of violence that we most often associate with the concept gender-based violence is intimate partner/domestic violence, in particular men’s violence against women. Intimate partner violence is a global phenomenon and also the form of violence we have most statistics on, even though numbers are still unreliable or unavailable in many contexts. International surveys show that at least 1/3 of women in intimate relationships have experienced violence from their partner.

Intimate partner violence is often systematic and contains parallel physical, sexual and psychological violence. It may take many different forms, be conducted by different perpetrators throughout the lifetime, and have severe direct and indirect health consequences. Additionally children who witness violence are indirect victims, and are also likely to be exposed to direct violence.

Thanks to pressure from the feminist and women’s movement worldwide, many countries have passed laws and policies to address men’s physical violence towards their partners. The World Bank notes that in 1976 only one country had legislation against domestic violence, and in 2013 the number had increased to 76. However, marital rape, economic and emotional abuses are still not considered criminalised acts within many legal frameworks. Even when intimate partner violence is legally condemned, many still see it as a private matter and women are often held responsible for the violence inflicted upon them. Reference to the privacy of the home, in both law and practice, contributes not only to impunity for violence against women at the hands of family members, but also to impunity for violence against domestic workers. This creates a stigma which often deters women and girls from seeking medical service or legal redress.

Ring the Bell by Breakthrough

[Ring the Bell in Hindi] launched in India in 2008, is a community and media campaign that has reached 130 million people in India and is now spreading across the world as a good practice to stop violence.

The campaign uses series of powerful print, radio, and TV ads telling true stories of men and boys stopping intimate partner violence with simple actions such as ringing the door bell to deliver mail, ask for sugar or other excuse. The campaign encourages neighbours and people passing by to ‘interrupt’ violence against women in a constructive way. The campaign includes a series of public service announcements combined with community outreach to build a new norm supportive of intervening in violence against women.
Safe Cities by UN Women

“I have started carrying pepper spray to protect myself. My parents have become more protective, they want to know where I’m going, when I’ll be back and with whom I’m hanging out” says Srishti, a 20-year-old Delhi student who feels unsafe when she leaves her house.

UN Women’s Safe Cities Global Initiative in New Delhi has generated a number of innovative results. Through partnerships with mayors’ offices, public transportation, police, media and women’s groups – communities in New Delhi have started to conduct extensive safety audits, spreading awareness and advocating with authorities for better lighting and pavement. Awareness raising and capacity building as well as engaging men and boys, have been successful components. The initiative started with a core group of youth from diverse backgrounds leading localised campaigns, interrupting harassment when it is witnessed, as well as focusing on longer-term prevention efforts. The Delhi Safe Cities model will be replicated in other Indian states.

THE ECOLOGICAL FRAMEWORK: EXAMPLES OF RISK FACTORS AT EACH LEVEL

The so call “ecological framework” is based on evidence that no single factor can explain why some people or groups are at higher risk of interpersonal violence, while others are more protected from it. This framework views interpersonal violence as the outcome of the interaction between many factors at four levels – individual, relationship, community, and societal.

SEXUAL VIOLENCE BY NON-PARTNERS

Sexual violence by non-partners include for example sexual assault, sexual harassment, rape and gang rape. WHO statistics show that globally 7% of women have been exposed to sexual violence outside a relationship. However statistics are unreliable and numbers vary, and in some contexts sexual violence by non-partners is far more prevalent. In South Africa for example, studies reveal that nearly 33% of men report raping a woman during their lifetime. In a recent study in Asia and the Pacific, men reporting having raped a woman who was not their partner and being involved in gang rapes ranged from 3 and 1% (rural Bangladesh) to 27 and 14% (Bougainville, Papua New Guinea). Gang rape is a violent crime in which various men use sexualised acts to intentionally harm and hurt mostly women and girls, but also men and boys are victims. These acts are expressions of misogynistic, xenophobic, racist, homophobic norms that produce and reproduce socialisation processes that victimise and devalue women and femininity, and high levels of economic poverty, unemployment, social exclusion and marginalisation seem to increase the violence. UN Women has been one of the key actors addressing sexualised violence against women and girls by non-partners in public spaces through global initiatives like ‘Safe Cities’.

CONFLICT-RELATED GENDER-BASED AND SEXUAL VIOLENCE

When violence in general is more present in a society and in situations of increased militarisation, subordinated groups in the society become more vulnerable in public arenas as well as in private. Displacement and heightened tensions within communities and households exacerbate the risk of gender-based violence, including men’s violence against their intimate partners and other forms of violence in the family. Poor welfare services and the breakdown of social networks and justice systems make it more difficult for victims of violence to escape, and leave the perpetrators unpunished.

In times of crisis traditional gender norms are often emphasised, but might also lead to changed gender roles. When men are absent during war, women are forced to uphold men’s duties. This might lead to more stable changes of gender relations in a post-conflict situation, but more likely it becomes a parenthesis.
3. MULTIPLE EXPRESSIONS OF GENDER-BASED VIOLENCE

Gender Relations, Sexual and Gender-Based Violence and the Effects of Conflict on Women and Men in North Kivu

The results from the International Men and Gender Equality Survey (IMAGES) in eastern Democratic Republic of the Congo (DRC) affirms that the devastating impact of war affects nearly all those living in the region, and is manifested in highly inequitable and violent partner relations. The report describes communities where violence, including gender-based violence, is normalised and where years of conflict, combined with persistent poverty, limited functioning of the state and widespread inequitable norms, have created multiple vulnerabilities for women and girls, but also for men and boys. The study also points to the strong associations between experiencing violence in conflict and intimate partner violence. Sexual violence as part of conflict, while brutal and traumatic for those who experience it, happens at lower rates than sexual violence carried out in the home. In sum, the effects of economic stress, trauma, fear, frustration, hunger and lack of means to sustain the family are felt first and foremost in family and partner relations. Furthermore, additionally to the compounding effects of the conflict, men’s childhood experiences of violence were closely associated with their use of physical and sexual violence against a partner later in life.

The report reveals the urgent need for more intense promotion of gender equality in DRC’s education, health and justice sectors, at both the local and national level; a rollout of psychosocial and secondary prevention that enables boys and girls to overcome violence they have experienced and witnessed; and long-term rebuilding from the conflict that takes into consideration men’s and women’s sense of loss of status and identity, and their need for psychosocial support.

Conflict-related gender-based and sexual violence remains pervasive across the globe, and its widespread use has been reported in most conflict settings, such as in Europe during World War II Bosnia, Rwanda, Liberia, Northern Uganda, Democratic Republic of Congo (DRC), Sudan, Iraq, Libya and Syria. State forces are more likely to be reported as perpetrators of sexual violence than rebels. In some conflicts sexual violence is used as a ‘weapon of war’, i.e. when state and non-state armed actors use rape and forced pregnancy as instruments of ethnic cleansing and to degrade and humiliate women or girls, and men by rendering them “failed protectors”. Yet, it is important to remember that wartime rape need not be ordered for it to occur on a massive scale. In fact, recent academic research shows that wartime rape is ‘more frequently tolerated than ordered’ and often not an intentional strategy of war.

Women and girls are the main targets for perpetrators of conflict-related sexual violence, and adolescent girls are particularly exposed to sexual violence such as rape, but also sexual exploitation, early and forced marriage, unintended or forced pregnancy, and forced abortion. However, men and boys are also exposed to sexual violence in war. There is an increased risk of sexual violence against women, girls and boys in refugee camps (including by humanitarian personnel), and ‘survival sex’, particularly female but also male, may increase in conflict as a way of dealing with loss of income, and due to an increase in demand for sex (including from international male presence).

“HARMFUL PRACTICES”

In international human rights discussions during the last decades, the concept “harmful traditional practices” has been used with reference to traditional beliefs and customs that underscore control over women and girls, and are thus “consequences of the value placed on women and girls by society”. Initially and throughout the years the main focus was on female genital mutilation (FGM). In recent years, violence in the name of honour has also been particularly highlighted. This concept, and the discussions and agendas that have developed around it, has been helpful in recognising survivors and in prompting action against forms of violence that have not been given adequate consideration. On the other hand, it has contributed to framing certain (non-Western) cultures as particularly harmful to women, and of other (Western) societies as not containing discriminatory traditions, or “traditions” at all. Such ethnocentric perspectives have been highly questioned, not least by third-world and
post-colonial academics and activists. No tradition, culture or religion can be used as an excuse to exercise GBV. To identify only some, but not other, forms of violence as culturally sanctioned delinks the violence from its root causes: unequal power relations. However, the attention given to the forms of violence that have been dealt with within the ‘traditional practices’ agenda has made it clear that GBV has to be understood in relation to culturally accepted gender norms. This is a knowledge that can be brought to other arenas: regardless of the context in which gender-based violence occurs, the everyday life of women and men, girls and boys forms the situation where this violence becomes possible.

**FEMALE GENITAL MUTILATION (FGM)**

This form of GBV is most widely practiced in Sub-Saharan Africa and in the Middle East, but also occurs in Northern Africa, Europe, Asia and the Americas. It is often carried out by traditional practitioners, not by medical personnel. In half of the 29 countries where it is practiced, the majority of girls go through FGM before the age of 5, and in the other half between the ages of 5 and 14. Altogether the percentage of women who have suffered FGM ranges from over 90% (Somalia, Guinea, Djibouti and Egypt) to less than 5% (Ghana, Togo, Niger, Cameroon and Uganda).

FGM lies at the intersection of very sensitive issues: patriarchy, gender roles, women’s reproduction, and men’s perceptions of women’s sexuality. FGM is also a clear example of gender-based violence that is sustained by women performing the practice. In an overview and exploration by UNICEF, the most frequently cited reason for supporting FGM was ‘social acceptance’, and this was also the benefit of FGM most commonly reported. Both the attitudes and the practice vary according to levels of education, economic wealth, and location, and in most countries it is less common amongst youth than adult women. UNICEF’s report also states that prevalence has dropped in more than half of the 29 countries in Africa and the Middle East where the practice is concentrated.

**HONOUR VIOLENCE OR VIOLENCE IN THE NAME OF HONOUR**

These concepts refer to violence against family members (usually women and girls) conducted with reference to the shame and dishonour a person is supposed to have brought to their family and/or community. This may include kin in a wide sense, but also religious, ethnic, national, political or regional affiliation. Honour violence may include physical, sexualised and psychological violence as well as other forms of control such as forced marriages or coerced marriages of women with the men who raped them. Not only ‘actual’ behaviour, but also how the community perceives a woman’s, or in some cases a man’s, behaviour can be interpreted as shameful. Lost virginity, adultery or rumours of the same are perceived as an irreparable dishonour on the family/community, which in extreme cases lead to decisions to murder – an ‘honour killing’.

It is difficult to tell the frequency, where and among which groups honour violence occurs. When the concept of honour was first discussed in the sixties it was often placed in the Mediterranean area, and later it was often associated to the Middle East and North Africa (MENA) and in India and Pakistan as well as immigrant communities in the West. It is sometimes perceived as an Islamic phenomenon, which is not true: honour violence occurs among Christians, Muslims, Hindus, and in other religious and non-religious groups. The logic used to justify honour crimes may be relevant when interpreting gender-based violence in many contexts.

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**Promoting the Abandonment of Female Genital Mutilation**

The international NGO Tostan, works to empower rural and remote African communities to bring about positive social transformation and sustainable development through a holistic non-formal education programme based on human rights. Through their Community Empowerment Program, Tostan not only raises awareness of the health risks of female genital mutilation (FGM), but tries to change the deeply rooted social norms connecting FGM with marriageability. In class sessions, participants learn about their right to health and their right to be free from all forms of violence, and discuss the responsibilities they share to protect these rights in their own community. They also learn about the potential harmful consequences of the practice and discuss ways to prevent these health problems in the future. By mobilizing village elders/leaders, encouraging dialogue and raising awareness, many communities have decided to end FGM together. Over 7,000 communities from Djibouti, Guinea, Guinea-Bissau, Mali, Mauritania, Senegal, Somalia, and the Gambia have publicly declared their decision to abandon both FGM and child/forced marriage. A 2008 study by UNICEF showed that among Tostan communities that had publicly declared their abandonment of FGM eight to ten years earlier, 77 percent had indeed stopped the practice.
3. MULTIPLE EXPRESSIONS OF GENDER-BASED VIOLENCE

EARLY/CHILD MARRIAGE
Also early/child marriage, a formal or informal union before the age of 18, is a form of GBV as it robs girls of their right to childhood, health, education and security. In the 2014 “State of the World Population”, UNFPA notes that every day 39,000 girls become child brides, or about 140 million in a decade. Consequences of early/child marriages can include: domestic violence and rape, undesired pregnancies, illegal abortions, inadequate or lacking pregnancy follow-up and antenatal care leading to high risk delivery and heightened risk of the death of very young expecting mothers. Early/child marriage often occurs in contexts of poverty, and is increasingly an issue amongst conflict-affected communities (i.e. Syrian refugee girls in Lebanon and Jordan). Although girls are disproportionately the most affected by early/child marriage, it is a reality for boys as well.

VIOLENCE AGAINST LGBTI PERSONS
Lesbian, gay, bisexual, transgender and intersex (LGBTI) people face high levels of discrimination and GBV worldwide. Virtually every country in the world retains legal provisions that impinge on the rights of transgender people exposing them to some of the highest rates of violence of any group of people in the world. In 76 countries, being LGBTI is a crime, and in 10 it is legal grounds for life imprisonment or execution. Violence against LGBTI persons is often labelled “hate crimes”, which is when a person is victimised because of his or her race, ethnicity, religion, gender or sexual orientation. When LGBTI persons are struck, gender-based violence becomes a way of controlling and punishing those who are not seen as “real/proper” men or women and therefore threatening traditional norms of masculinity and femininity. Women and girls who are either lesbian, perceived to be lesbian, or both, can be subject to so called ‘corrective rapes’, including gang rapes and forced marriages. The UN Special Rapporteur on extrajudicial-, summary or arbitrary executions has regularly drawn attention to persons killed because of their sexual orientation and/or gender identity, and particularly lifts transgender persons as a group in a situation of particular vulnerability. Most cases of violence against LGBTI people are not reported due to fear of secondary victimisation, which results in most survivors avoiding or delaying accessing healthcare, criminal justice services and psychosocial support.

TRAFFICKING IN HUMAN BEINGS
Trafficking in human beings is about girls and women, boys and men that in an organised way, with or without consent, are transported to another region or abroad to provide for exploitation, so that actors between the client and the victim profit from this. Trafficking in human beings is a global phenomenon with countries of origin, transit and destinations intermixed in a complex web. It is difficult to measure the global magnitude, but the US Department of State talks about 44,000 survivors during the last years, and more than 20 million victims of trafficking (state.gov). Interpol calls trafficking in human beings a “multi-billion-dollar” crime, “constituting modern-day slavery” (interpol.int). The human rights of trafficked people are violated in a variety of ways. In the Palermo Protocol from 2000, the UN defines trafficking and points out strategies for prevention, suppression and punishment of trafficking, with a particular focus on women and girls.
Addressing GBV is a central development goal in its own right, and key to achieve other development outcomes. GBV cannot be separated from issues of human rights economic development, poverty, education, health, peace and justice. Below are some crucial entry points to combat gender-based violence in development cooperation.

**GENDER-BASED VIOLENCE IS A HUMAN RIGHTS ISSUE**

GBV is a violation of human rights. Addressing GBV as a human rights issue empowers survivors of gender-based violence as active rights-holders. The Committee overseeing the implementation of CEDAW has made clear that all forms of violence against women fall within the definition of discrimination against women as set out in the CEDAW Convention. International human rights law imposes an absolute prohibition on discrimination in regard to the full enjoyment of all human rights. This includes respect for sexual rights, sexual orientation and gender identity. To meet their human rights obligations states should seek to transform the social and cultural norms regulating power relations between women and men, and other linked aspects of subordination. Recognising GBV as a violation of human rights clarifies the binding obligations on states to prevent, eradicate and punish such violence.

**TACKLING GENDER-BASED VIOLENCE IS CRUCIAL FOR POVERTY REDUCTION AND ECONOMIC DEVELOPMENT**

As stated in the UN Secretary-General’s in-depth study on all forms of violence against women:

> “violence prevents women from contributing to, and benefiting from, development by restricting their choices and limiting their ability to act. The resulting consequences for economic growth and poverty reduction should be of central concern to governments.”

Reducing poverty thus requires a sustained focus on tackling gender-based violence. The physical and psychological harm, fears and threats of gender-based violence, limit women’s and also men’s ability to participate fully in economic, social and political processes that results in decreased productivity and reduced family income. Research by the World Bank shows that domestic violence has a significant impact on a country’s GDP. GBV also has an underestimated economic cost in terms of health services and care, police and judicial sector, and related absenteeism. However, poverty and socio-economic insecurity is also one of the factors contributing to GBV, particularly trafficking, early marriage and sexual violence in displacement. Intimate partner violence also tends to increase in contexts of poverty, partly reflecting ideals and expectations linking masculinity to the provider role and subsequent sentiments of ‘failed masculinity’.

The number of years a person spends in school has a positive correlation with a decrease in both future victimisation and perpetration of physical and sexual violence. The empowerment of women through increased income opportunities as a result of education reduces the unequal power relationship
between women and men and thus in a long-term perspective has a positive effect on GBV. In the short run however, changed gender relations may increase the prevalence of violence. Schools and other educational institutions do not have a universal nor automatically positive impact on reducing GBV, and can also be sites of GBV, and therefore need to actively promote a gender sensitive, respectful and non-violent culture.

**TACKLING GENDER-BASED VIOLENCE IS A KEY TO PROTECT SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS AND REVERSE SPREAD OF HIV**

Gender-based discrimination and violence, including forced sex, is the cause of many sexual and reproductive health problems including sexually transmitted infections and unwanted pregnancy. Unwanted pregnancy can have serious repercussions, including unsafe abortions, and ostracism by family members leading to social isolation, suicide and sometimes murder. In addition, violence before, during and after pregnancy is linked to a range of pregnancy-related problems, such as miscarriage, preterm labour or maternal mortality, and efforts to reduce these problems including tackling GBV. The stigma associated with sex and sexuality may deter women, girls and LGBTI people from seeking or receiving medical services. This is especially true in the case of adolescent girls who are assumed not to need sexual health services because they are not expected to be having sex. The staff at health services are often not adequately trained and equipped to deal with health problems related to FGM, rape and other forms of sexual violence, which leaves underlying problems undealt with.

Moreover, tackling GBV is crucial in reversing the spread of HIV. Tears or abrasions associated with violent sexual encounters increase women’s biological risk of contracting the infection, especially for young girls. Fear of gender-based violence, or the stigma associated with having been victimised, is also an obstacle to accessing information, care and treatment for HIV/AIDS.

**GBV IS A SECURITY CONCERN AND A PREREQUISITE FOR SUSTAINABLE PEACE**

Although data is scarce, GBV often escalates dramatically during conflict and displacement. As stipulated in UN Security Council Resolution 1325 and subsequent resolutions, women’s rights must be at the centre of conflict prevention and conflict resolution. All parties to armed conflict must make commitments to protect women and girls from GBV, particularly sexual violence, and to combat sexual violence through prohibition, codes of conduct and other means.

The need to frame GBV as a security issue and the responsibility to protect goes beyond meeting immediate security needs of women. Implementing globally agreed frameworks is essential for longer-term peace and development. When women are not safe, they cannot fully participate in political life or in peace processes and recovery efforts. Women have to be engaged, protected and empowered during conflict and post-conflict settings, including in displacement, in order to lay a strong foundation for recovery and sustainable peace and development.
In order to prevent GBV and to protect and bring justice to survivors, Sida has an interconnected overarching strategy which includes: Preventing violence, strengthening legal and policy frameworks, and improving response services for survivors. Supporting different programs and projects aligned with cooperation partners’ priorities on ending GBV is a priority in Sida’s development cooperation.

PREVENTING GENDER-BASED VIOLENCE

Preventing GBV, to stop it from happening in the first place, is a key priority. Given that GBV is based on gender norms and gender-based power inequalities, GBV prevention strategies are intrinsically linked to efforts to increase gender equality more generally. Hence, rather than disconnecting and treating GBV as a separate and isolated problem, it has to be situated in the context of gender inequalities. Sida’s prevention strategies therefore entail:

- **A shift in focus** from seeing women (and other groups exposed to gender-based violence) as victims to seeing them as survivors, actors and agents of change with a strong focus on women and girls’ empowerment and agency.

- **Efforts to increase women’s political participation and influence** in contexts of peace, conflicts and other humanitarian crisis. Women have rights to participate on equal terms with men in political bodies at all levels of the society, including in peace processes. In many countries women’s political representation is very low, and women are often excluded from formal peace negotiations. This has evastating consequences for the possibility to reach a sustainable development, peace and human security.

- **Efforts to increase women’s economic empowerment** that enhance women’s bargaining power and ability to leave abusive relationships. This includes strengthening women’s entrepreneurship and employment opportunities, improving women’s access to land and property rights, promoting equal sharing of unpaid care work between women and men and encouraging universal access to quality education. While such efforts can contribute to increased violence against women in the short term due to gender ideals linking masculinity to the provider role, increasing women’s economic empowerment is still crucial for longer term prevention of GBV. Women’s economic empowerment interventions which also address gender norms and reach couples and communities can reduce such risks.

- **Efforts to increase sexual and reproductive health and rights** are crucial for preventing GBV given the close relationship between the two. Such efforts include promotion and protection of women’s right to have control and decide freely over matters related to their sexuality, including sexual and reproductive health, family-planning possibilities and HIV/Aids prevention.
**Gender-Based Violence Prevention Projects**

**Women, Citizenship and Peace Building**
This project, run by Kvinna till Kvinna and International Alert in the Democratic Republic of the Congo, shows the importance of women’s organisation, collective action and voice, both for the prevention of violence and in peace and state building. The project established so called community-based dialogue groups consisting of both men and women which led to community cohesion, first within the groups and then within families and between female participants. Addressing issues related to gender equality including gender-based violence and obstacles to women’s political participation in a constructive way, the dialogue groups also succeeded in changing discriminatory norms and behaviour such as men’s attitudes towards sending girls to school, decision making around household budget, and participation by women in public spaces. The sustained support to women candidates and strategic advocacy by women’s rights organisations participating in the project contributed to positive results. For example, in the province of South Kivu, 40 % of all ministers are women.

**Addressing the Core Driver of Violence Against Women**
SASA! is a groundbreaking community mobilisation approach developed by Raising Voices for preventing violence against women and the spread of HIV. By getting people to talk about power, the SASA! Approach (Start, Awareness, Support, and Action) was founded on the presumption that it is possible to prevent violence against women and reduce risk behaviors around HIV infection by engaging and transforming the root causes of the problems – unequal gender power relations. Results show decreased rates of physical violence by men against their female partners, improved social attitudes towards women’s right to say ‘no’, and increased sisterhood amongst women. The Raising Voices and Uganda’s Centre for Domestic Violence Prevention have rolled out the successful SASA! methodology in 13 African countries.

**Engaging Young Men for Gender Equality**
Program H by Promundo seeks to engage young men and their communities in critical reflections about rigid norms related to manhood. It includes group educational activities, community campaigns, and an evaluation model (the GEM scale) for assessing the programme’s impact on gender-related attitudes. Program H was developed and validated in Latin America and the Caribbean and has later been adapted in other contexts around the world.

- **Incorporate men and boys as perpetrators, as victims/survivors and as agents of change.** Men and boys are often neglected as survivors of GBV. Hence, there is a need to recognise and address men’s and boys’ particular vulnerabilities and needs in relation to GBV, especially in the context of armed conflict. Rather than simply ‘bringing men in’ to work against violence against women, there is a need to work towards transformed norms around gender relations and masculinity. Such an approach acknowledges that men and boys are also restricted by expectations linked to masculinity and can also be victims of violence. A failure to recognise and address this can contribute to the perpetuation of cycles of GBV. When successful, though, such an approach enables men and boys to become agents of change.

- **Transformation of norms and behavior** that underpin GBV. The logic of GBV is based on gender stereotypes, such as ideals linking masculinity to the provider role, macho behaviour and violence as well as ideals linking femininity to chastity, submission and victimhood. Prevention efforts should start early in life and be directed at girls and boys. Both non-formal education and formal education are important sites for normative change and have the potential to address gender inequalities and prevent GBV.
ACCOUNTABILITY FOR GENDER-BASED VIOLENCE: STRENGTHENING LEGAL AND POLICY FRAMEWORKS

The state has the primary responsibility for ending GBV. The obligation of states to prevent violence against women and girls and to provide comprehensive services to survivors of such violence was established as a ‘due diligence’ standard by General Recommendation No. 19 of the UN Committee on the Elimination of Discrimination against Women in 1992.

Strengthening the legal and policy framework forms an important part of both prevention and response to GBV, while enabling provision of justice for survivors, legal frameworks and punishments shape norms in society and might work as deterreents.

- **Improving existing legislation directly linked to GBV.** The present historic number of laws and policies addressing different forms of gender-based violence is to a large extent due to sustained and strategic advocacy from women’s rights organisations across the globe. Research has shown correlation between strong and independent feminist movements and comprehensive laws protecting women from violence.61

- **Improving existing legislation indirectly linked to GBV.** Supporting women’s legal rights to property, land, inheritance, employment and income can increase women’s ability to leave abusive relationships and establish their own households. Improving legislation indirectly linked to GBV also includes laws on, for instance, corporal punishment and alcohol taxation which are related to other risk factors such as child maltreatment and alcohol abuse. Hence, strategies to improve legislation should not have a narrow focus on laws pertaining directly to GBV, but take into account and strive for improved legislation in other areas as well.

- **Bridging the gap between law and practice.** While solid legislation acknowledging the rights of GBV survivors is a prerequisite, a major obstacle often lies in the implementation of such frameworks. For this reason, emphasis should be on bridging the gap between law and practice through the strengthening of accountability mechanisms to follow up and evaluate the implementation of laws addressing prevention and response to GBV.

- **The rule of law and ending impunity for GBV.** Systematic failures of police, justice personnel and armies put women and girls at risk of violence and prevent access to justice. Perpetrators of GBV must be held accountable under national and international law. Yet, attempting to reduce GBV by a simple focus on prosecuting offenders may not lead quickly to the desired outcomes.62 There is a need to recognise the limitations of convictions as prevention (through deterrence) and combine legal actions with so called secondary prevention efforts addressing social and psychological driving forces, particularly in post-conflict settings.

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**Prevention of Gender-Based Violence in Humanitarian Settings**

The Church of Sweden is strengthening local capacity to prevent and respond to GBV and increasing access to protection services for Congolese women, girl and boy refugees in the Rwamwanja Refugee Settlement (RSS). The programme focuses on facilitating processes for GBV survivors to empower themselves to achieve economic independence and sustainable livelihoods, as well as strengthening the capacity of RSS duty bearers to prevent GBV and provide psychosocial support to survivors.
IMPROVING RESPONSE SERVICES FOR SURVIVORS

In the immediate term, the effects of GBV have to be tackled. Survivors have rights to protection and access to services.

• **Strengthening and enhancing multi-sectorial services at all levels.** Services must be based upon survivors’ needs and safety. Although the state is responsible for the safety of survivors, it is important that not only the state but also women’s organisations are provided with resources to give support. Women’s organisations often have a deep knowledge and long experience of support and service to survivors of gender-based violence. Services must be effectively coordinated in development and humanitarian contexts and include:
  - Health sector response to GBV including reproductive health, medical and psychosocial support;
  - State run shelters and counselling centers in order to provide safe place to survivors of GBV;
  - Shelters and counselling centers run by independent actors such as women’s and LGBTI organisations;
  - Adequate police and justice response including legal aid to survivors;
  - Economic services.

• **Recognising strong and important links between prevention and response.** Multi-sectorial services (e.g. medical and psychosocial support) can help both survivors and perpetrators of GBV to avoid further violence. If a survivor does not have the personal strength because of traumas and stress caused by GBV, he or she may not have the strength to pursue justice. Services must also reach out to perpetrators of violence, the so called secondary prevention in order to decrease future perpetration.

The UN Joint Program (JP) to Prevent and Respond to Gender-Based Violence in Liberia

This contribution uses a multi-sectoral and multi-agency approach to tackle the issue of sexual gender-based violence in Liberia. It is a joint effort by six UN agencies, administratively led by The United Nations Development Assistance Framework (UNDAF), in partnership with the government of Liberia.

The program has five key pillars: [1] psychosocial; [2] legal; [3] health; [4] protection; and [5] coordination. The GBV JP efforts have focused on ensuring the availability of trained personnel, medical kits, confidentiality in courts, monitoring and GBV referral services for survivors as well as on campaigns and nationwide dissemination of information on GBV. Four “One-stop facilities” for handling cases of GBV were established by 2013, in cooperation with the Liberian Health Ministry, Justice Department and National Police. These four facilities received 1175 cases as of November 2013.

During 2013 a national strategy was developed to improve and strengthen work on GBV prevention with a focus on girls and boys, as they make up the majority of reported cases of gender-based violence in Liberia. This strategy includes spreading information and raising awareness among parents, teachers, religious and traditional leaders with the help of, among other things, male role models and statistics.
6. Endnotes

1. This thematic overview has been written by Sida staff.


Lesbian, Gay, Bisexual, Transgender/Transexual and Intersexed


http://www.unwomen.org/~media/headquarters/attachments/sections/library/publications/2013/12/un%20women-evaw-safecities-brief_us-web%20pdf.ashx


6. ENDNOTES

40 Ibid.
41 http://www.tostan.org/female-genital-cutting
42 http://www.unesco.org/uil/litbase/?menu=4&programme=86
44 Ibid.
47 http://www.rescue.org/sites/default/files/page_wrappers/assets/syria/pdf/IRC_WomenInSyria_Report_WEB.pdf
49 https://www.allout.org/en/about
50 This definition of hate crime can be attributed to all gender-based violence, and even though it is not often labelled as such in this way it shows the connections.
52 The Yogyakarta Principles on the application of international human rights law in relation to sexual orientation and gender identity focus on the primary obligation of states to implement human rights for LGBT people.
53 United Nations (2006) “In-depth study on all forms of violence against women, report from the Secretary-General”, p. 22.
57 For related information see CSW 57 (2013) “Agreed conclusions on the elimination and prevention of all forms of violence against women and girls” E/2013/27.
58 Statistics on peace processes illustrate this very clearly – 92.4 percent of participants in peace negotiations and 97.5 percent of signatories to peace agreements are men (Women’s Participation in Peace Negotiations: Connections between Presence and Influence, UNIFEM 2010).
59 Currently Raising Voices do not receive funding from Sida, but is included in this Overview because of its good practice in preventing GBV.
Problems with low quality trials have for instance been observed in the DRC. Between 2008 and 2012, mobile courts in South Kivu were able to carry out 900 rape trials, with 60 per cent of the accused convicted. However, research on sexual violence cases found that only half the convictions in the sample analysed had sufficient evidentiary backing, leading to the conclusion that ‘suspects are likely to be convicted, regardless of the evidence presented to sustain the case’. Nynke Douma and Dorothea Hilhorst, (2012) ‘Fonds de commerce? Sexual Violence Assistance in the Democratic Republic of Congo’, Université de Wageningen, *Occasional paper* n° 2.
Sida works according to directives of the Swedish Parliament and Government to reduce poverty in the world, a task that requires cooperation and persistence. Through development cooperation, Sweden assists countries in Africa, Asia, Europe and Latin America. Each country is responsible for its own development. Sida provides resources and develops knowledge, skills and expertise. This increases the world’s prosperity.