The Faith Actors Consortium on Sexual and Gender-Based Violence (SGBV), comprising World Vision, Tearfund, Lutheran World Federation (LWF), International Justice Mission (IJM), Episcopal Relief & Development, and African Leadership and Reconciliation Ministries (ALARM), continues to promote the effective engagement of faith actors in designing and delivering sexual and gender-based violence (SGBV) prevention, protection, and response programming. In this document, the Consortium highlights promising practices that detail essential elements of faith-led SGBV prevention, protection, and/or response programming, alongside examples of innovation used to promote replicability, scalability, and sustainability within SGBV programming. We emphasize how faith actors, starting as early as 2015 and continuing to the present day, unite with various stakeholders to address SGBV.

The Promoting a Unified Response to and Prevention of SGBV in Emergencies (PURPOSE) project, implemented by World Vision, combined global networking and research with place-based practical implementation with the goal to advance the SGBV care continuum of prevention, protection, and response. The global networking and research component included the convening of the SGBV faith actors’ consortium, research and compilation of the faith actors’ assets into a map document, and field-based monitoring, evaluation, learning and adaptation in two pilot countries. The place-based approaches were piloted in Bangladesh and Kenya from 2020 to 2023. In both countries, PURPOSE operated within a human rights framework, emphasizing dignity and equality for all. The project rolled out Channels of Hope for Gender, a behavior change approach that targets faith actors and community leaders to critically examine religious texts, cultural practices, beliefs, mindsets, and behaviors to empower women and girls to live life free from violence. Further, in both Bangladesh and Kenya, PURPOSE supported survivors in achieving economic self-reliance through skills training. By placing survivors at the forefront of decision-making processes, the project documented impacts that could inform future scaling effort. To further establish an enabling environment where SGBV prevention, mitigation, and response is delivered, Bangladesh launched Male Engagement training targeting couples, to challenge harmful gender norms and promote positive masculinity. In Kenya, PURPOSE adopted World Vision’s survivor-centered approach, prioritizing the needs, rights, and perspectives of survivors and this was core to survivors choosing those livelihoods they would pursue as part of their recovery. Insights gleaned from these pilot countries, alongside associated networking, research, and learning endeavors, now serve as a blueprint for globally scaling this initiative to effectively address SGBV across diverse contexts. PURPOSE emerged as a promising practice, generating knowledge and effectively tackling escalated vulnerability to SGBV, notably evident during emergencies such as the COVID-19 pandemic. The project prioritized several key strategies: raising SGBV awareness among community members and key stakeholders including faith leaders; fortifying...
community resources and engaging stakeholders to mitigate SGBV risks and support survivors, including providing comprehensive capacity-building to frontline responders such as health staff & volunteers, police, and health facility personnel; and emphasis of survivor-centered support and accountability through research and adaptive learning to foster networking and collaboration.

Between 2015 and 2017, Tearfund and HEAL Africa implemented Transforming Masculinities (TM), a faith-based, evidence-based approach for preventing SGBV aimed at establishing a robust evidence base for effective prevention approaches at the community level. Implemented in 15 rural villages in the eastern Democratic Republic of Congo, the intervention had three core components. Firstly, it equipped local faith leaders to address the root causes of SGBV. Secondly, it trained community members as ‘Gender Champions’ to engage men and women in the wider community and facilitate small group discussions. Thirdly, these trained Gender Champions facilitated weekly small group discussions called ‘Community Dialogues’ for six weeks, addressing different weekly themes. Over the project period, attitudes towards SGBV shifted as men explored alternative patterns of masculinity. Incidences of intimate partner violence (IPV) decreased by more than half between baseline and end-line. Notably, by end-line, 40% of survivors of past-year IPV had sought assistance from faith leaders, up from just 2% at baseline. Additionally, there was increased community willingness to support a family to accept a survivor of rape, with an overwhelming majority of both men and women believing that rapists should be punished by end-line.

Since January 2023, the Lutheran World Federation (LWF) has been implementing the Uganda Refugee Operation, focusing on addressing sexual and gender-based violence (SGBV) in three refugee camps in Uganda. The project provides a range of services, including protection, legal aid, community engagement, and both prevention and response initiatives. Within the refugee camps and surrounding communities, many forms of GBV are perceived as private matters, relatively unimportant, or a normal part of life, resulting in numerous incidents going unreported. Recognizing this, LWF has prioritized integrated service provision to ensure survivors have access to mental health support, legal remedies, healthcare, and livelihood assistance. The project employs a survivor-centered approach, engaging in prevention through awareness campaigns and education, while also providing protection mechanisms and support services, particularly targeting women, girls, and marginalized groups. Utilizing approaches like the SASA! method and Engaging Men and Boys in Accountable Practices, the project aims to foster community-wide transformation in attitudes towards SGBV, emphasizing collaboration, solidarity, and questioning of societal norms to create a safer, more equitable environment. Additionally, by empowering community activists, male action groups, and cultural leaders, the project ensures the sustainability of efforts to combat SGBV. Notably, the innovative use of electronic tracking platforms like proGres v4 and the GBV Information Management System enhances the quality and impact of interventions by facilitating efficient case management and data tracking while incorporating survivor-centered and human rights-based approaches.

As early as 2012, International Justice Mission (IJM) developed the first version of the Assessment of Survivor Outcomes (ASO) Tool to look at the overarching health and safety of survivors from revictimization. In the past, most assessment tools focused on the functionality and progress in one specific area of restoration rather than the wider picture. In 2015, IJM commenced a two-part validation study to better understand the ASO Tool’s reliability in providing an accurate picture of survivor progress toward restoration. The validation study found that the ASO Tool can be used as both a case management tool and an impact measurement tool. Capturing survivor voice was a critical component of the external validation, and several implementing organizations also conducted focus group discussions or interviews with survivors to assess the completeness and appropriateness of the tool’s domains and subdomains from the survivor’s perspective. The validation exercise also affirmed the sustainability and replicability of the ASO tool, offering compelling evidence of its seamless integration into the case management frameworks of governmental and community-based organizations.

In 2018, Episcopal Relief & Development initiated the Scaling Up Faith Leaders’ Engagement to Prevent and Respond to Violence against Women and Girls (VAWG) project in Liberia, aimed at addressing the issue of VAWG. Spanning from October 2018 to September 2022, the project focused on addressing the underlying knowledge, negative attitudes, and behaviors around the treatment of women and girls at individual, family, and community levels. In collaboration with the Inter-religious Council of Liberia, Episcopal Relief & Development developed a Faith Leader Gender-Based Violence (GBV) Toolkit, providing guidance for Christian and Muslim faith leaders to address GBV within their congregations and communities and to offer improved support to survivors. The project yielded notable positive results, including a decrease in intimate partner violence (IPV) and non-partner sexual violence experienced by women, as well as a reduction in IPV perpetration by men and adolescent boys within the target communities. Additionally, there was an observed increase in awareness regarding rights and available services for survivors. An innovative approach employed within the project was the integration of Facts, Association, Meaning, and Action (FAMA) cards, which assisted individuals with low literacy levels in identifying, reflecting upon, analyzing, and making decisions regarding sexual and gender-based violence (SGBV) issues. The Episcopal Relief & Development project exemplified a successful model of interfaith collaboration in combating VAWG, wherein Christian and Muslim faith leaders collaborated to reflect on scriptures and support one another in leveraging sacred texts to empower women and girls. Furthermore, interfaith preaching initiatives were undertaken, with Muslim faith leaders invited to church and Christian faith leaders invited to the mosque, facilitating the sharing of insights and teachings with congregants of different faiths.

Between 2019 and 2023, the African Leadership and Reconciliation Ministries (ALARM), a Christian non-governmental organization, developed the Gender Equality Partnership and Reconciliation (GEPR) project for implementation across Kenya, Uganda, Rwanda, and Tanzania. The project aimed to produce a manual for faith actors in East and Central Africa, facilitating gender equality in peacebuilding, reconciliation, and community development. This involved enhancing advocacy for women’s rights, challenging existing power structures, understanding the dynamics of church-society relationships, and catalyzing social change. GEPR was initially conceived as a multidisciplinary curriculum development initiative by ALARM staff across Burundi, the Democratic Republic of Congo (DRC), Rwanda, Kenya, South Sudan, Sudan, Tanzania, and Uganda. Implementation began with a pilot phase in Northern Uganda with plans for subsequent scaling across Eastern Africa. Throughout the pilot implementation, various contextual issues emerged that necessitated careful consideration to foster an understanding of SGBV and develop culturally appropriate response interventions. These included disparities in the comprehension of SGBV definitions, the diverse contexts in which SGBV occurs, and the behaviors constituting SGBV.
COMMON CORE PROGRAMMING AND ACTIVITIES ACROSS PROMISING PRACTICES

Enhanced Access to Care
Consortium members prioritized integrating protection measures and improving access to healthcare services for survivors, establishing one-stop centers at select health facilities to offer safe and trauma-informed care.

Capacity Building and Enhancement
Promising practices focused on capacity enhancement through training and awareness activities to challenge harmful gender norms. Faith leaders, community leaders, community members (men, women, boys, and girls), and healthcare providers received training on GBV prevention and response.

Strengthened Partnerships
Consortium partners collaborated with local NGOs, international organizations, and government agencies to ensure a coordinated response to GBV, emphasizing sustained community engagement and understanding local contexts.

Establishment of Safe Spaces
Projects established safe spaces and rescue centers for women and girls to access support services such as medical care and counseling, aiming to enhance resilience and strengthen referral services for survivors.

Advocacy for Policy Change
Initiatives by LWF and WV included advocating for legal and policy frameworks addressing GBV and protecting survivor rights. This involved collaborating with local authorities to integrate GBV prevention and response into broader community development plans.

NOTABLE IMPACTS ACROSS PROMISING PRACTICES
Notable impacts were observed in various areas across the promising practices. Women’s economic empowerment efforts saw significant strides, with increased access to economic opportunities such as cash grants, skills training, leadership roles, and education. These opportunities led to improvements in self-esteem, decision-making, and overall well-being for women. Additionally, projects prioritized community building and cooperation to build stronger, more resilient communities. By ensuring equal access to services, education, and employment opportunities for women and people with disabilities, these projects fostered social cohesion and inclusivity. Moreover, initiatives focusing on women’s agency and resilience provided survivors with vocational training and economic opportunities, enhancing their autonomy and control over their financial well-being. Psychosocial support services also played a crucial role, offering survivors and participants the resources to cope with trauma, build emotional resilience, and regain control over their lives. Furthermore, capacity-building programs targeted stakeholders such as faith leaders, community members, and government institutions, improving project management, governance, and service delivery skills. These efforts facilitated knowledge sharing, dissemination of best practices, and monitoring of evidence-based solutions, contributing to the overall effectiveness and sustainability of interventions.

COMMON CHALLENGES ACROSS PROMISING PRACTICES
• Funding challenges persist, with heavy reliance on volunteers leading to potential misunderstandings about compensation.
• Cross-sectoral referrals are hindered by factors such as lack of prioritization, limited funding, inaccurate data, and service delays.
• Insufficient data on gender-based violence prevalence hampers effective programming.
• Limited resources result in inadequate case-worker ratios and access to survivor-centered SGBV response services, compounded by high turnover rates among trained staff.
• Inadequate facilities for women and girls underscore funding and resource challenges.
• Single women and teenage mothers lack sufficient livelihood assistance, worsening financial insecurities.
• Limited safe spaces for women hinder access to vocational skills and support services.
• In humanitarian settings, competing needs like water, food, and shelter may overshadow SGBV concerns, while seeking justice can risk further violence due to retaliation and ineffective justice systems.
Recommendations

Here are several recommendations drawn from the lessons learned by the Consortium during the implementation of the promising practices.

1. Engage faith leaders as active partners, recognizing their potential role as change agents and collaborating on awareness campaigns to address cultural norms and behavior change. Utilize faith leaders’ influence and platforms to actively support survivors and intervene at the community level.

2. Engaging men and boys is essential in cultivating positive masculinities, which has been recognized as a pivotal strategy in mitigating the perpetration of sexual and gender-based violence (SGBV) and fostering healthier relationships.

3. Enhance offender accountability through social interventions at various levels.

4. Collaborate with governmental actors for sustainability and scalability, integrating interventions into existing structures.

5. Involve diverse stakeholders beyond faith, survivors, and government for comprehensive success in GBV programs.

6. Document lessons learned and best practices continuously to inform future programming and contribute to the broader field of GBV prevention.

7. Emphasize gender-sensitive programming tailored to the specific vulnerabilities and strengths of different genders and marginalized groups.

8. Recognize the role of advocacy in influencing policy change for institutionalizing effective GBV prevention and survivor support strategies.

9. Acknowledge the importance of flexibility and adaptability in program design to respond to evolving community needs.

10. Strengthen monitoring and evaluation mechanisms for data-driven adjustments and continual improvement.

11. Foster sustained roles for faith leaders in couples counselling and public support, highlighting potential long-term sustainability.

12. Challenge faith-based beliefs through critical engagement with sacred texts, promoting gender equality and non-violence.

13. Rely on faith structures for project sustainability, supporting religious institutions, and involving senior leadership in scaling plans.
Promoting a Unified Response to and Prevention of Sexual and Gender-Based Violence (SGBV) in Emergencies (PURPOSE)

Insights from a global SGBV Promising Practice piloted in Bangladesh and Kenya
World Vision is a Christian humanitarian organization dedicated to working with children, families, and their communities worldwide to reach their full potential by tackling the causes of poverty and injustice.

The Promoting a Unified Response to and Prevention of Sexual and Gender-Based Violence (SGBV) in Emergencies (PURPOSE) project was implemented in two pilot countries, Bangladesh and Kenya, between 2020 and 2023. It incorporated onsite and global collaborative networking, research, learning, and adaptation. Insights obtained from these pilot countries, along with related networking, research, and learning, serve as a blueprint for scaling this initiative globally, effectively addressing SGBV in diverse contexts.

PURPOSE, as a promising practice, generated knowledge and addressed escalated vulnerability to SGBV during emergencies which was notably evident during the COVID-19 pandemic.
It emphasized four pillars:

1. Fortifying community resources and engaging stakeholders to minimize SGBV risks and ensure essential support for survivors.
2. Training and capacity-building of healthcare volunteers, camp staff in Bangladesh, fellow implementers, and faith actors on SGBV.
3. Addressing the needs of individuals impacted by SGBV while prioritizing survivor-centered support and accountability through research, adaptive learning, and documenting program impact to guide initiatives effectively.
4. Networking and collaboration to facilitate learning exchanges with global south faith-based actors.

World Vision’s SGBV Continuum of Care embodies a comprehensive three-prong survivor-centered approach to address SGBV.

THE CONTINUUM OF CARE

- Firstly, it prioritizes PREVENTION through community engagement, education, and raising awareness to tackle the root causes of violence and minimize instances of SGBV.
- Secondly, the continuum emphasizes PROTECTION by providing immediate and sustained support for survivors, including safe spaces, access to healthcare, legal aid, and assistance with psychological therapy.
- Lastly, it encompasses a RESPONSIVE approach specifically aimed at addressing the needs of those affected by SGBV while ensuring accountability.

CONTEXT

The Rohingya, a stateless Muslim minority group, is experiencing persecution primarily in Rakhine state in the Republic of Myanmar. Escalating violence and discriminatory policies by Myanmar has triggered a mass exodus of the Rohingya, compelling hundreds of thousands to flee to neighboring countries with most ending up in Bangladesh. This migration has imposed significant challenges on Bangladesh by placing a strain on resources and infrastructure in a border region known as Cox’s Bazar, where refugee camps have been set up. In Bangladesh, the PURPOSE initiative targeted Rohingya refugees residing in Camp 13, Cox’s Bazar. The Rohingya refugees in Bangladesh continue to endure precarious conditions, grappling with food scarcity, health issues, and inadequate shelter, rendering their situation one of the world’s most urgent humanitarian crises. The COVID-19 pandemic exacerbated the living conditions of the Rohingya refugees, intensifying challenges related to SGBV and increasing the vulnerability of women and girls to such incidents. Among the Rohingya refugees and their host communities, exists a notable knowledge gap regarding various dimensions of SGBV, including violations against children, early marriage, intimate partner violence, and emotional abuse. Consequently, instances of SGBV often remain unrecognized within these communities.
Purpose’s Objectives

Baseline indicators were established at the project’s inception to facilitate post-intervention performance measurement. These indicators primarily focused on assessing the existing SGBV awareness within the community and evaluating beneficiary satisfaction with available SGBV facilities and local prevention structures. The integration of community actors was a fundamental component in PURPOSE’s design, pivotal across the SGBV continuum of care, including prevention, protection, and response. A significant emphasis was placed on understanding the role and influence of faith-based actors in these aspects within their communities. Efforts were also directed toward identifying, documenting, and disseminating survivor impact narratives, ensuring that the care provided aligned with their rights, needs, and preferences. Additionally, the project engaged in research and adaptive learning to develop programmatic guidance and document impact to foster networking and collaboration for learning exchanges with faith-based actors globally, particularly those in the global south.

Kenya

In Kenya, PURPOSE focused on women and girls in two distinct locations characterized by an interfaith population which is predominantly Christian with other faiths such as Islam and traditional African spirituality also being represented. The first location was an urban, cosmopolitan informal settlement in Nairobi County known as Kasarani. The second location was Narok County, a rural region with a dominant pastoralist community known as the Maasai. The nature of SGBV varied between these two study locations in Nairobi. In Nairobi, COVID-19-related movement restrictions and curfews limited privacy and intensified household tensions, leading to an upsurge in rape, sodomy, sexual harassment, and physical violence. In Narok, disruptions in the reporting systems for SGBV, caused by the impact of COVID-19, resulted in an escalation of female genital mutilation (FGM) and early marriages, contributing to an increase in girls dropping out of school.

The project implementation in Bangladesh and Kenya was conducted in collaboration with the Faith Actors Consortium to End Sexual and Gender-Based Violence, which comprises globally active yet locally grounded organizations such as World Vision, African Leadership and Reconciliation Ministries, Episcopal Relief and Development, International Justice Mission, Lutheran World Foundation, and Tearfund. Collectively, these organizations focus on innovating and sharing practices for sustainable prevention, protection, and response to SGBV, prioritizing networking, research, and documentation of effective strategies. Their unified objectives encompass convening for shared learning, disseminating best practices, and maintaining an unwavering commitment to eliminating SGBV. Their approach involves addressing the root causes of GBV through diverse initiatives, including economic empowerment, strengthening health systems, male engagement, and survivor-centered interventions, leveraging faith-based resources for evidence-based solutions. Additionally, the consortium emphasizes collaboration with various partners, including governments and civil society to raise awareness, allocate resources, and address the multifaceted causes of SGBV.

Purpose’s Objectives

Objective 1 | Enhance community understanding and readiness to prevent and address SGBV through adapted approaches in the context of COVID-19. PURPOSE sought to conduct SGBV awareness programs for vulnerable youth, employing information, education, and communication (IEC) methods alongside audio-visual aids. The initiative also included specialized educational sessions targeting males, aiming to foster gender-equitable relationships within families and sensitize them to provide support for SGBV survivors.

Objective 2 | Strengthen faith actors and community health systems to deliver SGBV services during emergencies, minimizing social stigmatization and enhancing protection. The project aimed to train local faith and community leaders to advocate for SGBV prevention among vulnerable women and girls. Additionally, it facilitated the coordination of frontline community workers to spread SGBV prevention messages and facilitate referrals to response services.

Objective 3 | Provide responsive support and economic empowerment for women and girl survivors of SGBV, fostering resilience and sustainable livelihoods. This initiative involved several components: training for case management staff to enhance their capacity, distribution of essential items such as masks, soap, and sanitary products for survivors’ recovery, and provision of dignity kits for reproductive-aged women and girls. Additionally, the project aimed to offer remote psychosocial support, case management, and referral services via mobile phones. Messages on GBV prevention and reporting procedures were to be shared with at-risk women and girls. Furthermore, the project intended to provide opportunities for economic empowerment through apprenticeships and microfinance.

Another focus of the program activities was to increase awareness about various forms of SGBV prevalent among the refugee population, highlighting the resulting harm within households. The objective was to shift perspectives on gender roles, encouraging greater male participation in household responsibilities, preventing early marriage, and promoting empowerment among women.
KENYA

OBJECTIVE 1 | Strengthen SGBV prevention and response during COVID-19
PURPOSE focused on strengthening SGBV prevention and response during the COVID-19 pandemic. This included creating COVID-responsive SGBV plans through consultations, disseminating prevention guidelines, and training volunteers, faith actors, and community actors for SGBV awareness and response. The objective also involved providing COVID-19 protective items, mental health services, and engaging local institutions for effective SGBV prevention and response.

OBJECTIVE 2 | Strengthen health systems, workers, and SGBV support services.
PURPOSE aimed to collaborate with the Ministry of Health to fortify health systems by identifying and training health workers to respond appropriately to SGBV during the pandemic and secure safe spaces for women and girls at risk.

OBJECTIVE 3 | Support those at risk for, and survivors of SGBV
PURPOSE endeavored to support vulnerable groups by providing cash transfers for basic needs, offering livelihood support, and empowering women and girls through income-generating activities on alternative livelihoods.

This multifaceted project was designed to combat SGBV through a collaborative strategy involving legal organizations, stakeholder sensitization, and evidence-based recommendations. The primary focus was to strengthen SGBV programs in two specific countries while documenting valuable insights for potential global replicability and scalability.

EVIDENCE OF IMPACT

In Bangladesh, PURPOSE operated under a human rights framework,1 stressing the dignity and equality for all. The project designed Male Engagement training sessions with couples as community dialogues for general SGBV sensitization. Topics covered included protecting household members’ rights, particularly women and girls who are often vulnerable. Employing a participatory gender approach, the project created an inclusive environment for diverse genders, aiming to understand and tackle gender roles and inequalities. A focused male engagement strategy challenged harmful gender norms and encouraged positive masculinity through workshops and couples-based training, allowing men to reflect on their behavior and attitudes, thereby addressing the root causes of SGBV. By engaging diverse viewpoints, this methodology ensured active involvement in decision-making. Integrated into couple training, this male engagement strategy aimed to engage men in preventing SGBV. It amplified marginalized voices, confronted gender biases, and offered insights into community gender dynamics. Post-intervention data showcased its role in promoting family harmony, reducing early marriage, reinforcing support for girls’ education, and subsequently lowering SGBV cases.

In Kenya, PURPOSE adopted World Vision’s survivor-centered approach2 to address SGBV by prioritizing the needs, rights, and perspectives of survivors. Placing survivors at the forefront of decision-making processes ensured their voices guided interventions. By centering survivors, the project was able to document impact that could inform future scaling efforts. Through networking, collaboration, and learning opportunities, survivors of SGBV were able to actively contribute to prevention efforts by serving as advocates against SGBV and educating their communities about the drawbacks of early marriages. This approach empowered survivors by granting them agency and control over their recovery, respecting their dignity and autonomy throughout the process. Additionally, project implementation in Kenya adapted the Empowered Worldview (EWV) core project model;3 to support survivors who were also vulnerable heads of households in their uptake of business startup training. EWV is a mindset change, faith rooted approach that aims to move one from dependency to self-sufficiency grounded in principles in identity, faith, compassion, relationships, and vision. EWV uses faith-based perspective while acknowledging the considerable influence of religion on mindsets and economic well-being. It aimed to harness the resources, capabilities, and skills of the individual in this case, the survivor, while promoting economic empowerment and self-reliance. This approach encouraged a critical examination of beliefs, mindsets, and behaviors in alignment with religious teachings, fostering positive perspectives for lasting economic empowerment and self-reliance. The project designed Male Engagement training sessions with couples as community dialogues for male engagement strategy approach aimed to engage men in preventing SGBV. It amplified marginalized voices, confronted gender biases, and offered insights into community gender dynamics. Post-intervention data showcased its role in promoting family harmony, reducing early marriage, reinforcing support for girls’ education, and subsequently lowering SGBV cases.

In Bangladesh, PURPOSE significantly improved access to care, protection, and justice within targeted communities. It played a pivotal role in providing information on SGBV, effectively raising awareness among communities about the risks associated with SGBV and emphasizing the advantages of women’s empowerment. In Bangladesh, PURPOSE made a substantial impact on both preventing and responding to SGBV by increasing access to knowledge and resources for prevention, mitigation, and care. It distributed 1300 informative materials, empowering community members with crucial knowledge about their rights, reporting mechanisms, and preventive measures. Despite encountering challenges such as difficulties in accessing services due to entrenched social norms, participants became aware of available helpline assistance. For instance, Shona Meher, a Rohingya refugee from Myanmar, faced hardships in a Bangladesh camp after fleeing Myanmar in 2017. Struggling to survive on food rations, she found hope through a World Vision skill development program. Despite setbacks caused by COVID-19, she completed the training and received a sewing machine. Transitioning from making clothes for family to becoming a skilled tailor, she launched her own business, training others and earning income. Through determination and newfound skills, she achieved financial stability, defying skepticism about the program’s effectiveness. She describes the impact of the program in her life as follows:

“I come to this center for the first time, I felt so relieved seeing many women like me who are here to learn some skill. I have received training in making women’s dresses and embroidery work… Now I receive orders from the neighbourhood and other camps also… People love my work. Every month I can make 2000 to 3000 BDT (Bangladeshi Taka) by sewing clothes… Now I can buy any food or anything I wish. Also, give some to my children and grandchildren.”

Samina, a young Rohingya girl, was forced into a child marriage by her family, a situation that left her with significant physical and emotional scars when the marriage eventually ended. Recognizing her plight, a Rohingya volunteer from World Vision took her to the Women and Girls Safe Spaces (WGSS) center for psychosocial support. Alongside therapy, she was introduced to handicrafts as a means to alleviate her mental stress. In this fresh setting, Samina swiftly adjusted and describes her transformed life as follows:

“I enjoy time with other girls while sewing Nakshi Katha in the center. I can chat and laugh with them. Half of my day I can spend here. And I don’t feel stressed anymore.”

“Now I can earn 1,500 to 2000 BDT by sewing clothes monthly. While my husband was still away from home, I could buy food and bear education expenses for my children with that money… Apart from making money, the training helped me to deal with the most crucial time of my life. Working with other women from my community and spending time with them helped me to regain a smile.”

Rehena, female, Bangladesh
The program yielded excellent results, providing a 100% referral service and offering psychosocial support to 516 individuals, primarily focusing on women, girls, and persons with disabilities. Even amidst COVID-19 restrictions, the program effectively extended remote case management services, benefiting 52 individuals, highlighting its adaptability in navigating challenging circumstances.

In Kenya, PURPOSE notably impacted target communities by sensitizing stakeholders to different forms of SGBV, dispelling myths that often lead to victim-blaming and stigma. Faith-based leaders and partnering organizations utilized strategies like public outreaches to educate communities on identifying, addressing, documenting, and reporting abuses related to SGBV, collaborating with relevant institutions for redress. Previously, SGBV survivors in Kenya had to report incidents to the police or local area chiefs to seek justice. Consequently, many incidents remained unreported because of survivors’ reticence to report to these authorities who lacked trauma-informed training to handle such cases thus exacerbating stigmatization. To remedy this, the program trained local appointed or elected leaders in handling SGBV cases, enabling them to act as alternative channels for survivors to access protection and justice. This resulted in increased access to both protection and justice. This impactful scenario was recounted by an FGM survivor from Nairobi, Kenya:

“... Though people don’t prefer to report to the chief nowadays and instead report to our female MP who has been of assistance by offering sponsorship and even protection to those who were about to be violated. She advocates for SGBV Programs.”

In Nairobi, Kenya, the program offered life skills training and established a support group for girls who had survived rape. These initiatives played a crucial role in enhancing their understanding of, promoting personal safety, guiding survivors to seek justice. Consequently, many incidents remained unreported because of survivors’ reticence to report to these authorities who lacked trauma-informed training to handle such cases thus exacerbating stigmatization. To remedy this, the program trained local appointed or elected leaders in handling SGBV cases, enabling them to act as alternative channels for survivors to access protection and justice. This resulted in increased access to both protection and justice. This impactful scenario was recounted by an FGM survivor from Nairobi, Kenya:

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A pivotal component of PURPOSE was aiding at-risk individuals to break away from social situations and relationships where they faced exploitation or victimization. This finding underscores the substantial impact of PURPOSE on the lives of SGBV survivors and their dependents, as expressed by one program participant, from Nairobi, Kenya:

“... It has prevented me because I have stopped sex work because right now, I have a job. I sell clothes. It has helped me a lot. I left the marriage; it was stressing me. Through this business, I can pay my rent. My children go to school. I don’t have stress. There is little stress here and there but at least I can support myself. The job had money, but it had problems. Sometimes, a client would beat you up when you meet or refuse to pay you. Do you get me? (yes.) The World Vision training showed me how to budget and how to save. In the other jobs, I didn’t know I could save. When I got money, I spent all of it. The next day I would lack. So, the WORLD VISION training helped me a lot.”

DECISION-MAKING

In Bangladesh, PURPOSE helped women to make decisions on leadership, use of resources, and income earned through life-enhancing activities. For instance, Minara, a young adolescent girl living in Cox’s Bazar refugee camp narrowly avoided a child marriage thanks to World Vision’s intervention by attending sessions that enlightened her on child protection, hygiene, and preventing gender-based violence. “Learning that girls shouldn’t marry before 18 changed everything. Now my father involves me in family decisions,” she shared, feeling empowered. Discovering solutions to her concerns about hygiene alongside other girls brought her out of her usual shyness. Motivated by her transformation, Minara became an advocate in her community, educating others on these critical issues. Her newfound vision led her to aspire to become a social worker, already planning her path forward with newfound courage and determination.

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Through the program, participants engaged in decision-making that demonstrated their empowerment and capacity to achieve their potential as equal members of society. Decision-making was seen in action when participants made decisions about income-earning activities and managing their earned income.
PARTICIPATION

In Bangladesh, PURPOSE conducted targeted engagement with men to prevent and address SGBV through training sessions for husband-and-wife couples. Male engagement activities aimed to promote gender-equitable relationships within families and sensitize them to support survivors of SGBV. This was due to the realization that without involving men in programs addressing gender-based violence, it would be difficult to prevent and respond to SGBV, considering that most perpetrators are men, and a significant percentage of men hold positions of power in society. These couples were equipped with knowledge on sex, gender, gender values, practices of masculinity, community norms, various types of violence, dispute resolution within the family, and fostering peaceful, nonviolent communication. This approach resulted in positive outcomes, fostering harmony within families and enhancing women's involvement in decision-making regarding livelihoods and other life activities. These transformations were acknowledged by a program participant who stated that:

"We quarreled about doing household chores and taking care of children. If my children did any naughty things, my husband blamed me for that. Then I would blame my husband for not taking care of the children and not solving their problems which shouldn't only be the mother's but also the father's duty. Since we attended the session, he has become another person. Now we do the household chores together. We are very happy now. If there was no center like this, where would we go if we have any problem in the family? How could we solve this and how would we learn all these new things?"

Anuwara, female, couples education participant, Bangladesh

PURPOSE identified a strong correlation between poverty and SGBV. Impoverished families were more likely to arrange marriages for their underage girls to acquire essential wealth in the form of dowries and other gifts. Financial vulnerability often made women and girls susceptible to sexual exploitation, leading them to engage in transactional sex to meet urgent financial needs. To address this issue, the program ensured participants received support in taking control of their livelihoods through income-generating activities and skills-building initiatives. This approach was emphasized by a female faith-based leader who asserted that:

"Poverty in our society leads to this mindset... when you encounter someone, you think of home and the financial struggles there. Perhaps your mom is unemployed, your dad is absent or deceased, or it's just you and your family. As the eldest, you're not just a sibling but also like a parent, responsible for supporting the family. This pressure can push you to consider compromising, thinking, 'Maybe if I just agree once, I can earn money and support my family.'"

Female faith leader, Nairobi, Kenya

Parvin, from Cox's Bazar, Bangladesh, married at 15, divorced during pregnancy, and now living with her daughter at her aunt's house, discovered World Vision's Women and Girls Support Space (WGSS). Initially withdrawn and upset, she received individual counseling and skill training. Learning to create masks and clothes, she now supports her family by selling these items. The support transformed her, enabling her to connect with others and become self-reliant through sewing. Parvin's story highlights how World Vision's Psychological Support Space (WGSS) and skill development programs empower women like her in similar situations.

SYSTEMS

PURPOSE aimed to establish inclusive systems that promote equity for various vulnerable populations and foster enabling environments for their engagement. This included coordinating with the various county or sub-county technical working groups in Kenya and refugee camp authorities such as the Chief-in-Camp in Bangladesh. To that end, the project embraced an inclusive and participatory approach in Kenya, involving officials from the National and County Governments, NGO and CBO representatives, parents, children, teachers, religious leaders, police units, and local community members in its design and execution. Faith-based actors played a significant role in community development related to SGBV, driven by their commitment to alleviate suffering and advance human welfare. These actors provided human rights education and practical skills to help vulnerable individuals recognize and address abuse. One male faith leader in Nairobi emphasized their efforts:

"We educate youth on life skills, organizing camps where they learn about various abuses, including SGBV. Empowered with self-protection methods, they also learn to safeguard others.

In response to attacks on elderly women, we introduced Karate training, empowering them with self-defense skills, a unique initiative in our community."

Additionally, the program contributed to creating equal and inclusive systems, empowering participants to become advocates for SGBV protection. One participant, who had experienced FGM at a young age, became dedicated to preventing the practice within her community. She stated:

"I underwent FGM in 2011, but through the program, I'm now trained to educate girls and women on FGM issues. I represent women in this area and report any suspected SGBV incidents for immediate response."

In Cox's Bazar, Bangladesh, after receiving training through PURPOSE, Momtaz and other similar-minded women initiated efforts to motivate the women in the refugee camps to assert their needs and rights. Momtaz advocates against early marriages and highlights the health risks and social consequences, emphasizing the formation of a group of nine members working to mitigate violence and societal issues like child marriage:

"I also convince people in the community to stop violence in their families. People marry off their daughters before 18. I also explain to them the disadvantage of early marriage. I also tell them that a girl who gets married before the age of 18 is mostly [to experience] a health risk and won't keep up with [her] husband."

Under the SGBV project, World Vision Bangladesh Rohingya Crisis Response (WVBRCR) formed community watch groups aimed at increasing protection and reducing social stigma against women and girls. Abu Tayeb, trained by WVBRCR in 2021, received extensive sessions on various forms of violence, including SGBV, domestic violence, child marriages, among others. Inspired by the training, he actively raises awareness on violence against women. Abu Tayeb and his group have been consistently visiting neighbors' homes, addressing issues like child marriage and domestic violence. He intervenes in disputes between couples, providing counseling, successfully mediating conflicts, and conducting awareness sessions for adolescents. Abu Tayeb's commitment to this cause is unwavering as he continues his efforts in community education and mediation.
WELL-BEING

At the heart of PURPOSE was the objective of fostering a sense of worth, capability, confidence, dignity, safety, and holistic well-being encompassing physical, emotional, psychological, and spiritual health. This encompassed living free from gender-based violence and eradicating stigma and discrimination.

The program provided a continuum of care for survivors, crucial in their healing, rebuilding, and empowerment following the trauma of SGBV. A participant from Narok, Kenya, who was a survivor of physical abuse, recounted undergoing therapeutic sessions focused on emotional healing, self-care, and letting go of pain:

“I was able to go through therapy sessions for letting go, which were about emotional well-being, self-care, time out, breath in breath out, taking a walk or sleep, and speaking it when you can. If you can’t write it on paper, burn it and let it go and that’s what you have been doing. I see myself doing better now and maybe but am not yet ready though with time I may forgive my dad sometimes even though he has not taken any initiative of forgiving me because he is so proud. The purpose of the project was to make me get back my peace, build my confidence and talk to people to release the pain. Check on people and that is also a way of healing for me. As part of the sessions dialogue the project was for a short period but when it stopped at least I had gone through the psychological healing process.”

The implementation of PURPOSE in Kenya yielded remarkable results, particularly in empowering survivors to take on active roles as change agents and pillars of support. Through these interventions, numerous survivors have emerged as influential figures within their communities, offering invaluable guidance and assistance to others. Notably, in Nairobi, one participant now dedicates efforts to empowering mothers with disabled children, fostering a supportive environment by encouraging shared experiences and mutual support.

Moreover, PURPOSE adopted a multifaceted approach that encompassed both economic empowerment and inclusion strategies. This concerted effort was designed to equip survivors with the tools necessary for achieving sustainable, long-term financial independence. As a result, their self-esteem, confidence, and sense of self-efficacy have been significantly bolstered, laying a strong foundation for their continued empowerment and growth.

In Bangladesh, the program’s comprehensive efforts in SGBV prevention, protection, and response yielded impactful outcomes across various dimensions of well-being. Hasina, an intersex individual who identifies as female, faced rejection in her community due to being considered as “different.” People teased her whenever she went around the camp. She could not attend the learning center like other children because of it. But the Women and Girls Safe Center by World Vision changed everything, she expressed joyfully. She found acceptance and support there, contrasting her unwelcoming home environment. “Here, the trainer and other girls treat me so well, making me feel comfortable,” she added, expressing gratitude for the newfound acceptance. Despite facing neglect earlier, Hasina now receives recognition for her work as a tailor, even surpassing others in receiving orders. She beams, “They once overlooked me for being different, but now they seek my support.” Her aspiration for independence and her journey symbolizes her resilience and determination, showcasing her unwavering path toward empowerment despite the obstacles she faced.

The SGBV response team delivered essential psychological support, aiding survivors in recovering from social stigmatization and fostering feelings of safety, calmness, efficacy, connectedness, and hope.

“Now I can earn 1,500 to 2,000 BDT (Bangladeshi Taka) by sewing clothes monthly. While my husband was still away from home, I could buy food and bear education expenses for my children with that money. Apart from making money, the training helped me to deal with the most crucial time of my life. Working with other women from my community and spending time with them helped me to regain a smile.”

Rehena, female, Bangladesh

“Afas and World Vision International engage survivors in many pieces of training and talk to them to teach the girls a lot of topics including the dangers of SGBV and making them aware of their rights. They offered me a job to help me financially and also gave me the opportunity to talk to other girls about my experience. … They gave me a chance to be a champion and survivor of FGM because you get to talk to other people who are undergoing the same and help them open up and heal their traumas as well. They also gave me a chance to follow my career path because they offered me a job at their organization. They gave me a status as an SGBV survivor and through that, I got to develop my self-esteem and confidence.”

Female participant, Narok

“Previously in my family, quarreling and physical abuse used to happen a lot but we had no idea about it. Then from World Vision we learned about the different types of violence like physical, psychological, domestic and economic violence. Returning home, I discussed these types of violence with my husband and we decided to prevent violence in my family.”

Momtaz, female, Bangladesh
The comprehensive implementation involved a spectrum of strategies, spanning from awareness campaigns and community engagement aimed at altering behaviors to providing targeted protection for vulnerable groups through safe spaces and essential services. Strengthening response mechanisms, such as helplines and training for healthcare and law enforcement personnel, significantly supported survivors. Networking and collaborating with faith actors welded significant influence in shaping norms, thereby enhancing overall protection against SGBV. Capacity building efforts empowered communities and institutions for more effective recognition and response to SGBV by addressing the needs of individuals impacted by SGBV while prioritizing survivor-centred support and accountability through research, adaptive learning, and documenting program impact to guide initiatives effectively. Continuous research and learning initiatives remain ongoing, indicating the importance of refining interventions, networking and collaboration to facilitate learning exchange with southern and global faith-based actors. Collectively, these efforts have contributed to establishing a resilient, supportive, and responsive environment against SGBV within the communities and regions where World Vision operates, highlighting valuable lessons learned in combating such a complex challenge.

DISTINCTIVE FEATURES OF THIS PROMISING PRACTICE
This Promising Practice distinguishes itself through a comprehensive approach encompassing prevention, protection, and response. It places a strong emphasis on agency, empowerment, and transformation. World Vision’s GESI Approach regards development participants not as passive recipients but as active catalysts for change. By challenging entrenched inequalities and exclusionary structures, it aims to fortify human rights, empowerment, and agency among vulnerable groups. Our mission and core values revolve around human transformation, specifically targeting the most vulnerable individuals to effect substantial change in their circumstances. This transformative strategy endeavors to reshape social norms, rebuild gender and social relations, instigate structural and systemic changes across economic, social, and political spheres, fostering an environment conducive to greater equality and inclusion.

LESSONS LEARNED & RECOMMENDATIONS

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LESSONS LEARNED & RECOMMENDATIONS
Moreover, this practice distinguishes itself by involving faith actors in program design and implementation. This collaboration directly tackles how conflicts, socio-political issues, and health-related fragilities, exemplified by disruptions like those caused by COVID-19, undermine systems addressing SGBV. These disruptions critically compromise the infrastructure and mechanisms typically engaged in preventing and responding to such violence.

**GLOBAL IMPLEMENTATION CHALLENGES**

SGBV presents a complex challenge in environments where women, girls, and persons with disabilities (PWD), migrants, refugees and other vulnerable groups encounter exclusion from decision-making processes or face coercion to participate in activities against their will. Their absence from societal structures and limited presence in public and private spheres perpetuate a system where incidents of SGBV might remain unaddressed or underreported due to prevailing power imbalances. The exclusion of their voices from pivotal discussions also obstructs the effective implementation of policies and interventions, resulting in a lack of tailored support and preventive measures. Furthermore, when faith-based actors and community-based organizations lack the necessary understanding and tools to aid survivors, a significant gap emerges in the response to SGBV.

SGBV thrives in communities disproportionately affected by poverty, where economic hardships exacerbate vulnerabilities. This circumstance renders individuals, particularly women and girls, more susceptible to exploitation and abuse. This reality became starkly evident during the pandemic, with women globally reporting experiences of financial violence alongside other forms of SGBV. Poverty limits access to essential resources and services crucial for preventing and addressing SGBV incidents. Economic constraints often force underprivileged children into labor and prompt early marriages for girls due to financial limitations. In such communities, the scarcity of resources impedes education on rights and support mechanisms, making it arduous to break the cycle of violence. Economic strain may also compel survivors to endure abusive situations due to financial dependence, creating formidable barriers to seeking help or escaping harmful environments.

**IMPLEMENTING IN FRAGILE CONTEXTS: Insights from Bangladesh**

In conflict, disasters, or post-displacement scenarios, crises disproportionately affect groups vulnerable to SGBV. Conflict and subsequent displacement erode governance structures, law enforcement, and community support networks, creating a challenging environment for reporting and addressing SGBV. Women, girls, and marginalized communities face heightened risks during these periods. Conflict and displacement often lead to overcrowded living conditions, limited resource access, breakdown of social structures, and weakened rule of law, fostering an environment prone to exploitation and violence.

Refugee camps generally operate within strict environments governed by rules of cooperation. These regulations significantly influence the type and level of infrastructure available. For example, female refugees in Cox’s Bazar reported experiencing sexual abuse, rape, and child marriage. Despite these occurrences, numerous survivors lacked sufficient care or avenues for seeking recourse because essential services such as healthcare and social support within the camps were limited.

Displacement and the chaos of conflict disperse communities, impeding the implementation of coordinated strategies and interventions to effectively prevent and respond to SGBV. This disruption amplifies the risks and incidents of SGBV, isolating survivors and reducing their likelihood of accessing necessary support and protection. Women and girls are particularly vulnerable to sexual violence, trafficking, and early or forced marriage during such circumstances. LGBTQ+ individuals may face heightened persecution and targeted violence due to exacerbated societal biases. Additionally, entrenched traditional gender norms reinforce inequalities, limiting access to assistance and decision-making for women and marginalized groups, thereby exposing them to increased SGBV risks.

The gender and inclusion approach offers a crucial strategy in mitigating SGBV risks and managing crises. Recognizing marginalized groups’ unique vulnerabilities through comprehensive risk assessments guides tailored interventions. These interventions include establishing safe spaces and offering trauma-informed, culturally sensitive support systems. Prioritizing diverse voices in decision-making ensures inclusive and responsive responses, fostering community ownership and agency. Moreover, this approach challenges harmful gender norms and power dynamics perpetuating SGBV, aiming to transform attitudes and behaviors. It also empowers women and marginalized communities by facilitating economic, social, and political participation, thereby reducing their vulnerability to SGBV during crises and enhancing their resilience.

ENHANCING PROTECTION AND RESPONSE:
Lessons from Kenya’s Law Enforcement and Judicial Systems

CHALLENGES IN REPORTING SGBV INCIDENTS

THREATS, BLACKMAIL, AND IMPARTIALITY CONCERNS
The study data revealed that despite increased awareness, some community members continued to perpetuate SGBV by concealing these practices to avoid public scrutiny, a practice that severely undermines the justice and well-being of the victims. Survivors may have opted not to report incidences of SGBV for various reasons, including apprehensions about impartiality, potential criticism from community members, fear of retaliation by the perpetrator, and the acknowledged presence of corruption. Raising community awareness is crucial in addressing the reluctance to report cases. Collaborating with various stakeholders, such as those tasked with combating corruption in these instances, was found to facilitate fairness and impartiality in handling cases.

In certain cases, survivors’ limited understanding hindered their ability to recognize instances of abuse, resulting in underreporting. Additionally, some individuals encountered threats and blackmail, dissuading them from reporting the abuse. A lack of knowledge or awareness often acted as a barrier to reporting SGBV cases. However, addressing this challenge involved community sensitization and education initiatives. These programs were designed to equip individuals with information on where to seek help and report incidents, effectively mitigating the issue.

DELAYS IN THE REFERRAL SYSTEM, INADEQUATE INFRASTRUCTURAL SUPPORT AND INSUFFICIENT LEGAL SUPPORT
The referral system experienced significant delays impeding the entire process and resulted in either lost cases or delayed justice. Corruption, victims’ disappearance, or the failure to obtain necessary prerequisites for the case to advance to the next referral level were among the causes of these delays.

Inadequate or limited infrastructural support was also frequently highlighted as a barrier within the referral system. For instance, the lack of a swift ambulance service, police vehicles, trained personnel, to effectively handle SGBV cases in a victim-sensitive manner affected the preservation of evidence required for the legal proceedings. It was also apparent that there the knowledge or awareness gaps exacerbated access to care and protection. In instances where the infrastructure for reporting existed, some individuals lacked awareness of these facilities.

Insufficient legal support emerged as a notable issue, with data indicating that while some survivors received help from legal aid organizations, many lacked the necessary support when needed. The complexity of the judicial system made accessing services challenging, often requiring expertise or legal counsel. This lack of legal assistance led to frustration among survivors and likely contributed to case abandonment, emphasizing the urgent need for accessible and affordable legal aid.

Witnesses frequently withdrew or declined to testify due to intimidation or community pressure, significantly weakening cases and resulting in their abandonment. Protecting witnesses became imperative, requiring organizations to strengthen both institutional and community support. Non-judicial resolutions were prevalent in SGBV cases, particularly in certain communities where cases were settled outside court, risking delayed or denied justice. These settlements often led to minimal fines, and if perpetrators failed to pay, victims had the option to re-report the case to the police as a new crime.

All of these factors underscore the critical need for increased community sensitization to educate people about the availability, accessibility, and effective utilization of these facilities. Strengthening this awareness could significantly improve access to necessary support within the referral and legal systems. Future interventions should also focus on supporting these police stations and rescue centers to create an enabling environment conducive to handling SGBV cases effectively.

DIVERSE PERSPECTIVES ON SGBV SERVICES AMONG SURVIVORS AND THEIR FAMILIES
Study data revealed diverse perceptions among survivors and their families regarding their satisfaction with the SGBV services provided. While some expressed contentment with the range of services, others conveyed dissatisfaction. A majority of survivors and their families reported satisfaction, especially when perpetrators faced legal consequences like fines or imprisonment. However, not all cases led to satisfaction. For survivors, the prompt attainment of justice appeared to be pivotal for satisfaction.

A crucial takeaway and lesson learned from this is that delays within the justice system significantly reduce satisfaction levels.
CIVIL SOCIETY AND COMMUNITY PARTNERS

Alongside faith-based actors, numerous like-minded organizations such as Community-Based Organizations (CBOs), and Non-Governmental Organizations (NGOs) have emerged or are active in addressing SGBV within the study locations. In Kenya and Bangladesh, Civil Society offers a wide range of services, including survivor counseling and community education programs on SGBV. Local administrators, such as chiefs, who are non-faith actors, have played a pivotal role in establishing connections within the referral system. They receive reports, provide psychosocial support, document evidence, ensure survivors receive counseling, offer legal aid, and promote socioeconomic empowerment. Mentorship programs organized by partner organizations serve as platforms to raise awareness about SGBV. These initiatives offer counseling and support to vulnerable individuals such as empowering girls to lead independent and dignified lives while educating them about SGBV matters. Additionally, NGOs arrange outreach programs and one-on-one discussions, emphasizing the importance of continual awareness and mentorship, particularly within schools. Addressing the family or household’s role in preventing SGBV, strengthening this foundational social unit involves capacity building in effective parenting skills and promoting girls’ education. It is crucial to elevate awareness about the family’s influence in nurturing values and serving as role models to prevent SGBV. Collaborating with community role models, especially successful girls in education, can encourage and mentor others, highlighting the benefits of education. Parental sensitization plays a vital role in instilling confidence in girls, affirming their equal intellectual potential and empowering them to confront SGBV incidents, advocating for transformative social norms.

SUSTAINABILITY

PARTNERSHIPS

FAITH ACTORS CONSORTIUM TO END SGBV

World Vision’s collaboration with faith-based actors stands as an exemplary demonstration of how networking, research, and collaborative learning foster adaptive learning and resource sharing, central to sustainability. As an active and founding member of the Faith Actors Consortium to End Sexual and Gender Based Violence, World Vision actively promotes meaningful engagement with faith actors in designing and implementing prevention, protection, and response initiatives for SGBV. Together, the consortium focuses on developing and sharing promising practices, outlining critical elements of faith-led SGBV programming and innovative approaches that foster sustainability within these efforts. Operating globally yet deeply rooted in diverse local contexts, the network prioritizes networking, research, learning, and documentation of asset mapping and effective practices. Their objectives encompass co-convening for learning and collaboration, documenting and disseminating best practices, and an unwavering commitment to combating SGBV.

The Consortium collectively addresses the underlying causes of GBV, with partners dedicating efforts to areas such as economic empowerment, strengthening health and protection systems, enhancing male involvement, and implementing survivor-centred interventions. By uniting like-minded entities, leveraging faith-based resources, and integrating evidence-based practices, the consortium serves as a catalyst for practical education, care, and support. Moreover, recognizing the significance of collaboration beyond faith-based circles, the consortium emphasizes partnerships with multisectoral entities, including governments, donors, and secular civil service organizations, to raise awareness, allocate resources, and comprehensively address the root causes of SGBV.

The engagement of faith-based actors in community mobilization has been proven to be crucial in fostering responsive and resilient communities. Collaborations with these actors have significantly raised awareness about SGBV, stimulated demand for SGBV services, mitigated its drivers, and fortified reporting, referral, and case management systems. Sustained engagement yields better outcomes, emphasizing the need to consider faith-based actors not merely as a means to an end but as integral partners in the entire process. Their involvement should commence at the project’s inception and be maintained throughout the program cycle.

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REPLICABILITY AND SCALABILITY: SUCCESS FACTORS

PURPOSE implemented several innovative strategies that can be adapted and implemented across diverse settings to address the root causes of violence, safeguard those affected by SGBV from further harm, and respond to their needs while ensuring accountability. Among these strategies, male engagement to transform inequitable social norms was pivotal. Collaboration with faith-based actors facilitated learning exchange and documenting program impact. Survivor-centered educational programs effectively raised awareness among vulnerable girls and women about SGBV, sexual harassment, and decision-making skills, presenting opportunities for expansion to serve a broader population of women and girls.

Another successful approach adopted by this Promising Practice involved connecting survivors with youth mentors and role models for ongoing psychosocial support. This tactic has potential for expanding the continuum of care to facilitate access to more SGBV survivors. The Women and Girls Safe Spaces (WGSS) provided a secure environment for those affected by violence or exploitation to access counseling, protection, resources, and training. These strategies not only fostered survivors’ independence but also served as long-term solutions to reduce vulnerabilities, prevent abuse, and offer care to those affected.

Scaling up these promising practices requires adequate funding and support from stakeholders. Financial support is essential to cover survivors’ needs, including medical expenses and legal fees, ensuring equitable access to justice. Providing non-monetary support, such as psychosocial assistance, and involving parents in the process, is critical for long-term sustainability. Additionally, community outreach and education, sponsoring survivors’ education, and increasing access to income-generating opportunities contribute to the sustainable empowerment of SGBV survivors. Overall, bringing services closer to affected communities and investing in widespread sensitization campaigns is vital to reaching more individuals and effecting lasting change.

CONTACT FOR INQUIRIES

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Transforming Masculinities
A FAITH-BASED, EVIDENCE-BASED APPROACH FOR PREVENTING SEXUAL AND GENDER-BASED VIOLENCE
ACKNOWLEDGEMENTS

This evidence based and promising practice of Transforming Masculinities was developed by Tearfund, and piloted between 2015 and 2017 in the Democratic Republic of Congo with Tearfund’s partner HEAL Africa. This intervention was part of the UKAid funded What Works to Prevent Violence against Women and Girls Global research programme. This intervention has since been developed, refined and adapted to different contexts. The content of this document is specific to the results and impact of the pilot project between 2015 and 2017.

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The content of this Promising Practice has been compiled from the following Tearfund’s resources
Quick guide to Transforming Masculinities
Quick guide to Journey to Healing
Suggested citation: Palm, S., Le Roux, E., Bezzolato, E., Deepan, P., Corboz, J., Lele, U., & O’Sullivan, V.; Rethinking relationships: from violence to equality in the DRC

Tearfund is a Christian charity that partners with churches in more than 50 of the world’s poorest countries. We tackle poverty through sustainable development, responding to disasters and challenging injustice. We believe an end to extreme poverty is possible.

TRANSFORMING MASCULINITIES
A FAITH-BASED, EVIDENCE-BASED APPROACH FOR PREVENTING SEXUAL AND GENDER-BASED VIOLENCE

One in three women and girls will experience sexual and gender-based violence (SGBV) in the course of their lifetime. SGBV deprives women of their dignity and has a substantial impact on social and economic development.

TEARFUND’S WORK ON SGBV CONSIST OF TWO MAIN PILLARS

PREVENTION

Transforming Masculinities (T.M) is a gender-transformative approach for faith communities to promote positive masculinities and gender equality, as a means of preventing sexual and gender-based violence (SGBV). Transforming Masculinities uses participatory activities and critical self-reflection, together with scriptural reflections, within faith communities to create and embrace new understandings of gender, masculinities, and gender equality through the lens of faith. This process challenges unequal power, hierarchies, harmful norms, and systems that perpetuate gender inequality to co-create a more equal society.

RESPONSE

Journey to Healing (J2H), is a survivor-centred approach which was co-developed with survivors in South Africa. It is a peer-to-peer support group model and creates a supportive environment for healing which acknowledges and respects survivors’ agency, autonomy and decision-making potential. It creates safe spaces for survivors to speak out and overcome trauma: a journey from fear to courage, from self-doubt to confidence about their future. The approach primarily supports female survivors but can be adapted for use with male survivors, who may face additional stigma.

A significant majority of the global population are affiliated to a religious tradition or faith beliefs. Belief systems influence and shape social norms, including gender norms on roles and values, and can have a negative or positive impact on achieving gender equality. Faith leaders (who, globally, are predominantly male) and certain interpretations of scriptural texts can play an influential role in reinforcing patriarchal norms, dominant forms of masculinity and rigid gender roles and responsibilities that are harmful to both men and women, boys and girls. These interpretations perpetuate and sustain gender inequality, and are often even used to justify violence, and shame survivors of SGBV.

World Health Organization, Department of Reproductive Health and Research, London School of Hygiene and Tropical Medicine, and South African Medical Research Council (2018) Global and regional estimates of violence against women.

Cover Photo: Deepan/Tearfund
Tearfund as a faith-based organisation believes that faith leaders and faith traditions can be equally powerful agents for positive change in addressing SGBV. While it is important to challenge existing gender roles directly, our approach is to question the values that underpin those gender ascribed roles, and the values, power and status assigned based on people’s gender identities. Our approach promotes positive models for being men and women, for leadership, for restoring relationships and for promoting gender equality in every sphere of society. Transforming Masculinities aims to promote change in individual behaviours and social norms on gender, masculinities and SGBV.

TRANSFORMING MASCULINITIES INTERVENTION IN ITURI PROVINCE, DRC

From 2015 to 2017, Tearfund and HEAL Africa implemented a project in 15 villages across three rural health zones in eastern DRC. Intervention activities ran for 24 months focusing on primary prevention of VAWG, particularly sexual violence (SV). It addressed the underlying root causes of VAWG within social norms (values, beliefs, attitudes, behaviours and practices) that support male dominance, enable VAWG and contribute to impunity for perpetrators. This was accomplished through the innovative approach of engaging and equipping faith leaders to speak out against VAWG and as catalysts to address root causes and risk factors within their local communities and at national level.

It engaged men and boys, women and girls within faith groups and in the wider community to address and remodel harmful concepts of masculinity, through contextualized trainings and ongoing community discussions facilitated by Gender Champions. Encouraging meaningful engagement of survivors was a priority throughout to shape activities and advocacy, and in assessing impact.

Tearfund worked with academic research partners to measure the effectiveness of this innovative approach and developed an evidence base to evaluate the impact of faith groups’ engagement in prevention of VAWG within a humanitarian context. As co-chair of the SGBV Hub of the Joint Learning Initiative, Tearfund documented, published and shared learning from this project with the wider community of practice, to enable evidence-based replication and scale up.

GOAL AND OBJECTIVE

The ultimate goal of the project was to contribute to the prevention of VAWG, particularly sexual violence, by mobilizing and equipping faith leaders as catalysts, and working with men and boys, women and girls within communities, to tackle the root causes of VAWG, by addressing gender inequality and transforming harmful social norms.

Through research and evaluation, it aimed to build a robust evidence base for effective prevention approaches at community level, which can then be documented and shared to improve prevention of VAWG in humanitarian contexts globally.

TRANSFORMING MASCULINITIES KEY PRINCIPLES

PERSONAL TRANSFORMATION

The entire process is based fundamentally on the personal journey of individuals committed to the work, a journey of self-discovery and personal growth. Everyone involved in the project, from Tearfund and partner staff to facilitators and participants, must be willing and able to model the attitudes and behaviours that this approach promotes. Therefore, through this entire process, personal reflections, relational reflections and accountability to oneself and others are core principles.

ENGAGEMENT

Engaging men and women in various capacities, and with varied social standing and levels of influence, to understand, acknowledge and commit to the work as a key contribution to a multi-intervention response to end SGBV and promote gender justice.

DIALOGUE

A dialogue between various stakeholders, men and women, boys and girls, to encourage them to reflect critically on the social realities around them, and to educate them so they learn, unlearn and commit to a process of personal behavioural change and social norm change. The process of dialogue promotes positive masculinities and gender equality with a view to improving lives and contributing to the prevention of and effective response to SGBV. Safe spaces need to be created for dialogue to happen in an open and non-harmful way.

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2 Funded by the UK government, under the What Works to Prevent Violence Against Women and Girls Global Programme.
3 aires de santé, sub-divisions of DRC administrative provinces, which comprise one reference hospital and a chief doctor.
4 Social norms are the rules that a group use for appropriate and inappropriate values, beliefs, attitudes and behaviours. They include what I think others ‘should’ do and also what I think others actually do.
Seventy-five local faith leaders from Christian and Muslim faith groups (both men and women) were trained and encouraged to incorporate what they had learned into their existing activities such as sermons, prayer groups, youth groups, and counselling. The selection process and workshop design encouraged equal participation of men and women in the faith leaders’ workshops. Fifteen men and fifteen women (including lay leaders of youth, women’s or men’s groups) were trained as ‘Gender Champions’ to engage men and women in the wider community through a series of Community Dialogues for six weeks per cycle. Each Gender Champion recruited and facilitated dialogues for eight to ten men and women respectively, addressing different weekly themes as illustrated below.

**ACCOUNTABILITY**

With awareness and education, men, leaders and those who have power become aware of and take responsibility for how they use this power in relationships and interactions with others and in demonstrating leadership. They committed to a process of accountability to each other and addressed the misuse of power, which could lead to discrimination, inequality and violence.

**COMMUNITY OWNERSHIP**

This is a community-led and community-owned initiative, rooted in the potential of individuals, cultures, traditions and faiths to promote a life of dignity and happiness so all members are free from harm, discrimination and violence. The interventions are evidence-based and shaped by the participation, input and leadership of the respective communities where they are implemented. The aim is to educate, empower and support this process with the hope that these communities will continue this work beyond a project cycle or lifetime.

**INTERVENTION OVERVIEW**

The intervention had three core components:

- **First,** it equipped local faith leaders and other selected community members as change agents to speak out and mobilise communities to prevent VAWG through tackling its root causes.
- **Secondly,** 15 men and 15 women (including lay leaders of youth, women’s or men’s groups) were trained as ‘Gender Champions’ to engage men and women in the wider community and facilitate small group discussions.

Trained Gender Champions facilitated weekly small group discussions called ‘Community Dialogues’ for six weeks addressing different weekly themes.

In addition, local Community Action Groups (CAGs) were set up, to facilitate a safe environment and access to services for survivors. A Healing of Memories workshop was conducted with 24 survivors and nine community members. Faith leaders, Gender Champions and CAGs engaged in their respective spaces of change within their communities, mutually reinforcing their messaging to reshape men’s and women’s attitudes towards rejecting and acting against VAWG, and to reduce stigma faced by survivors, enabling them to seek support. All these actors have been supported and mentored throughout the implementation period by project staff, to reinforce and monitor their understanding and internalisation of the process, and oversee dissemination activities. The project also strengthened referrals and other supportive measures at health clinics, such as paying transport fees for survivors to the clinic, when possible, find a family close to the clinic to host the survivor, and while at the clinic follow up with the clinic and the survivor.

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5 Since this project, Tearfund has further developed its approach to working with survivors called Journey to Healing and features parts of Healing Memories.

6 The Healing of Memories (HoM) process, basics of Trauma Counselling and ethics of working with survivors. There are five steps facilitating the HoM process, these can be adjusted according to the context.

1. **Begin with a contextual concern of people, allow it to formulate themes that would engage with questions targeting social analysis**.
2. **Find a biblical/other faith scripture theme that speaks to the context**.
3. **Begin and end with a contextual question drawn from a lived experience**.
4. Once a question is created the Contextual scripture study would have a life of its own. Allow participants to engage with the text in this process where the text becomes alive and can have more meaning for the participants as each person draws from it according to their needs. In this way local theologies may emerge as providing alternative responses towards a particular theme and context.
5. This question encourages people to reflect on their context and look at acting towards making a difference in their lives and that of others, here the communities are encouraged to be part of the solution to any given situation that would enable them to carry on with their lives again.

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Community dialogues run for six weeks and follow key themes in the order described below.
EVIDENCE OF IMPACT

To assess the Transforming Masculinities intervention’s impact, two household surveys were carried out across the 15 villages at the start and end of the project (at 24 months). In 2015 at baseline, 769 household members were interviewed (369 men, 400 women). In 2017, at end-line, 1218 people (599 men, 619 women) were interviewed—an increase of nearly 50%. In both surveys 95% identified as religious, overwhelmingly as Christian, with just over 10% identifying as Muslim. Over the intervention period, qualitative data were also captured at eight-monthly intervals through a smaller sample of faith leaders, Gender Champions and community members with key informant interviews and focus groups. Where appropriate, learning was fed back into the programme in real time.

FROM TOLERANCE TO RESILIENCE

Over the project period, attitudes to IPV reversed. At baseline, some violence-supportive attitudes were strongly held, with roughly half of both male and female respondents agreeing that physical violence towards a woman could be justified. At times, faith beliefs underpinned these. By end-line, promising shifts were seen and some attitudes had reversed. For example, at baseline, 66% of respondents actively engaged with faith agreed that a wife should tolerate violence for the sake of marriage. By project end, this had halved to 33.6%. By end-line, a much greater proportion of men recognised a woman’s right to refuse sex and rejected most justifications for physical violence. The shift in attitudes was most pronounced among men, with a drop from 71% to 55% of men who justified physical violence and from 80% to 55% who agreed that wives should not be allowed to refuse sex. Women’s attitudes also shifted significantly, for example, there was a drop from 53% to 38% of women agreeing that disobedience by wives justified violence.

FROM MALE SUPERIORITY TOWARDS GENDER EQUALITY

Men’s attitudes and behaviours shifted over the 24-month period, as men started to explore alternative patterns of masculinity. At baseline, 90% of male respondents believed that men were superior to women. This dropped to 70% by project end-line. The belief that God created men and women equal also increased by 20%. Beliefs that a wife should always be obedient to her husband also dropped, from 81% to 61% for men and from 73% to 61% for women. Nearly 90% of both men and women at baseline saw a woman’s primary role as taking care of/cooking for her family. By end line this had reduced to 63% for men and 75% for women. Women reported more actual involvement in household decision-making and both men and women noted more sharing of gendered household tasks by end-line, with a 24% drop in men’s beliefs that childcare is only the mother’s responsibility. Beliefs that the man should have the final word in the household also dropped from 90% to 63% among men themselves.

1 Gender equality sends us straight to the Bible, because God created man and woman in His image and the two of them are therefore the same and are equal. If the husband demeans himself higher than the woman, in that case, it is already violence. Because everyone is equal.” Male Gender Champion

FROM VIOLENCE TO NON-VIOLENCE RESPONSES

Rates of VAWG reported as experienced or perpetrated in the past 12 months reduced by more than half between baseline and end-line. IPV (in all forms, emotional, physical and/or sexual) reported by women more than halved from 69% at baseline to 29% at end-line. Likewise, the proportion of men reporting perpetrating any past-year IPV saw a significant decline from 68% at baseline to 24% at end-line. The prevalence of non-partner sexual violence (NPSV) reported by women reduced from 24% at baseline to just 4% at end-line—a more than five-fold reduction.

FROM SILENCE WITNESSES TO VOCAL CHAMPIONS

Faith leaders have been effective disseminators and change agents in these remote communities and have also become the primary group members who reported having been reached by the intervention and involved in its activities. By end-line, 83% of all respondents had attended a public talk or discussion related to VAWG. The majority of these happened in places of worship and/or were conducted by faith leaders. Religious spaces are a recognised local authority regardless of the level of adherence and belonging to faith, and their use has proven to be a highly effective dissemination model to reach out to the wider community. At end-line, 64% of respondents had also accessed couples counselling, mainly through faith leaders. This messaging is changing people’s attitudes and behaviours, even those who are passively engaged with faith. While baseline findings showed that 66% of those more engaged with faith did hold some violence-supportive attitudes, especially around wives tolerating marital violence, these reversed to 33% by project end.

1 The thing is, before they were in darkness, but today things have changed because we have received the training. […] Yes, people are always happy when they see us. And they like it because we go to them in their places to discuss the issues of violence in our village. It brings change, a lot of changes.” Female faith leader

FROM STIGMA TO SUPPORT FOR SURVIVORS

By end-line, survivors were more willing to seek out help and were less likely to feel guilty for the violence they experienced. Partners and parents were also less likely to stigmatise or reject survivors and there was a reduction in rape-myth beliefs, particularly among men. A particularly significant change was that by end-line, 40% of survivors of past-year IPV had talked to or sought assistance from faith leaders, up from just 2% at baseline. There was also increased community willingness to support a family to accept a survivor of rape. By end-line, an overwhelming majority of both men and women believed that rapists should be punished.

1 I have advised her… (a)s she was raped, she shouldn’t isolate herself from people when she will recover. “You need to be coming to church, fearless. Even to the market.” Female faith leader


1 Before, we could see men could not help their wives. No matter how the latter are tired. But since we have started to teach and sensitise people, men have started to help their wives. Others are even going to look for water, for firewood and even carrying it from the field in order to help their wives. They help each other in order to cook fast. There are changes.” Female

Female

Female
**CHALLENGES**

Some of the challenges faced included retaining some key project actors, especially the faith leaders and gender champions. These key actors were volunteers, some dropped out halfway through the project and others had unmet expectations around compensation. The absence of relevant services to support survivors, in a rural context was a challenge the project faced, as the lack of such services also put survivors at risk.

SGBV is often heightened in times of crisis, however in humanitarian settings, community members may not prioritize SGBV as other primary needs such as water, food, shelter, and medical care take precedence. Additionally, when survivors pursued justice, it can increase the risk of violence due to retaliation by perpetrators and inefficient justice systems.

**LESSONS LEARNT AND SUSTAINABILITY**

The programme’s starting assumption was that faith actors, particularly those in leadership roles, could be effective in disseminating information and mobilising change around VAWG at community level, if equipped through a faith-based approach. While quantitative data demonstrates that change took place, the qualitative findings provided context and expounded on why the intervention had success in working with faith leaders to reduce violence.

8 At the onset of the project, it was clarified that no payment would be provided apart from the stipend/transport for community actors. However, a few individuals attended under the assumption that additional funds might be available beyond the initially explained terms. Some speculated that this condition was a means to exclude certain participants. Nonetheless, it is worth noting that the number of participants who withdrew from the project was relatively small.

9 The pertinent services encompass those addressing the needs of survivors, including medical, psychological, economic, legal, etc. If these services were already available within the community prior to the commencement of the project, it would have facilitated the seamless transfer of identified survivors to these resources, thereby granting them access to the support they require.

These included the following:

- Faith leaders used their influence and faith platforms to teach, preach and show active support through sacred texts and sermons, and in places of worship. They also used their moral authority to intervene and begin to hold perpetrators to account at community level, as well as mobilising a critical mass of others to also intervene and help.
- Faith leaders were engaged as active partners in the process, helping to ensure the model is compatible with the local context and promoting an understanding of gender equality and VAWG from within the cultural framework.
- Faith leaders were engaged in the selection of, and support provided to, the Gender Champions in rolling out the Community Dialogues and as members of the CAGs, which created a coordinated set of activities that were able to work at different levels and reinforce each other.
- Faith actors’ own attitudes and behaviours shifted over the course of the project, from speaking up against VAWG to role modelling behaviour change. The study found reduced violence in faith leaders’ own relationships.
- Faith leaders played an increased and sustained role in couples counselling around VAWG and became a visible source of public support that was increasingly accessed by survivors. This underlines the potential sustainability of this model, providing a stable support modality in the communities that can continue after the intervention has ended.
- Through this model, faith actors and community experienced that entrenched faith-based beliefs about marriage, sex and scripture can be changed by critically engaging with sacred texts and offering different interpretations to become more gender-equal and non-violent.
- They were able to go beyond gender equality as an abstract concept discussed in the workshops to live out the values in their own day-to-day life and relationships, and also reached out to intervene to resolve conflict among men and women in their local communities.
- Relying on faith structures to implement a project is key for project sustainability especially when these structures are well equipped with the right tools and knowledge. Additionally, they offer opportunities for to scale up.
- While implementing a project within a faith community, supporting the religious institution’s senior leadership to develop a scale up plan can be extend to other congregations.
- Developing or updating of teachings or preaching materials with topics related to addressing SGBV can also contribute the sustainability of the impact beyond the funding period.
- Support for Key Actors: Continual mentoring was provided to key figures such as Gender Champions and Faith Leaders. Project staff conducted fortnightly group meetings with Gender Champions, consisting of five individuals, to foster personal growth, review action plans, tackle challenges, and monitor community progress.
SGBV INNOVATION, REPLICABILITY OR SCALABILITY

The Transforming Masculinities intervention offers the following opportunities for innovation, replication and scalability

Engaging faith leaders: Faith communities are often perceived by the humanitarian community as a barrier to addressing VAWG, because discussing faith concepts around gender and gender equality is sensitive, challenging and complex. However, this project has provided sufficient proof of concept that with proper training faith leaders can be a critical resource and a support system in SGBV prevention and response.

Engaging men and women in the community, including faith communities, in promoting positive masculinities: The focus on engaging with men and boys as well as women and girls, to understand and transform harmful understandings of masculinity and gender norms as key to prevention of VAWG is an essential innovation to tackle root causes of SV, stigma and the facilitating social environment. Transforming Masculinities as an approach has been adapted and replicated in other contexts to address other issues such as family planning and girls’ education.

Integrating primary prevention of VAWG into humanitarian response: Conflict contexts, such as the target areas in DRC, are often characterised by increased SV and other forms of VAWG, mass displacement and the breakdown in state service provision and access, increasing needs. Yet, current humanitarian emergency responses, usually focused on service provision, struggle to respond adequately to SV, particularly in terms of primary prevention. External actors alone cannot address gender inequalities and facilitate the vital change in attitudes and social norms within affected communities. The project demonstrated and documented how faith leaders can play a key role as catalysts (i.e., relaying messages to church and community members) within conflict-affected communities. The hope is that this model could be replicated by other agencies in these and other humanitarian contexts.

Recognise the role of faith practices and faith leaders in mobilising the community to shape social norms at different levels: Transforming Masculinities deliberately incorporates religious beliefs and texts, and works within faith communities. Faith leaders are engaged at all levels – national, regional and local – to foster commitment to the programme aims. Local faith leaders and Gender Champions enable community-level reflection and transformation. Religious teachings can contribute to both gender equitable and inequitable practices, and faith leaders wield significant influence in teaching and modelling change to combat SGBV.

Facilitates participatory and reflective dialogue: Reflective community dialogues are essential for challenging existing harmful social and gender norms which devalue women. By combining scriptural reflection and participatory reflection, these dialogue sessions enable participants to examine their own beliefs and practices. This innovative approach engages and equips faith leaders to speak out against VAWG and act as catalysts to address root causes and risk factors within their local communities and at the national level. It engages men and boys, women and girls within faith groups and in the wider community, promoting the examination and transformation of harmful concepts of masculinity, through contextualised training and ongoing community conversations. Faith and community leaders who are trained and equipped are encouraged to share their knowledge and practices with their churches, shaping activities and advocacy, and assessing impact in their neighbourhoods.

To be effective, Transforming Masculinities needs to be contextualized to each specific context. In adapting and contextualizing Transforming Masculinities it is important to maintain fidelity to the core principles in order to be effective. Since 2017, the approach has been refined and adapted to include other issues as family planning, social cohesion, women economic empowerment and FGM/C. These contextualisation and adaptation provide avenues for scalability.
Conclusion and Recommendations

Various changes were observed across the communities over the project period. The data shows a considerable decline in all forms of IPV and NPSV, and more equitable gender attitudes and less tolerance for VAWG. Internal and external stigma for survivors had declined.

In some cases, we observed that changes in attitudes were more significant than corresponding changes in behaviour. For example, in relation to gendered roles in the household, there were larger changes in attitudes towards men’s and women’s equal participation in chores than changes in the practice of shared tasks. In other cases, the change in behaviour was greater or clearer than the underlying attitudes, such as violence perpetuation and its justification in particular scenarios. Survivors received more support from project actors and family, and internal stigma reduced; however, some worrying beliefs and myths related to sexual violence remain rooted. Survivors of sexual violence almost always know the perpetrators and therefore community-based interventions combining response and prevention are vital in all contexts and particularly in those affected by crisis. Based on the lessons learnt over the project period, the following recommendations were made to donors and policy makers:

- **Recognise that even in conflict-affected communities, IPV is the most common form of VAWG.** Recognise also that the primary forms of sexual violence encountered by women and girls in conflict affected settings are typically by known persons rather than soldiers or militia, and design VAWG prevention interventions to reflect this.

- **Engage faith leaders as active stakeholders in social norms approaches to address VAWG where faith is an important factor in society.** Working with faith leaders can help ensure that religious messaging challenges, rather than reinforces, entrenched harmful gender norms.

- **Develop and support norm change interventions of sufficient duration and intensity.** Our intervention achieved norm change within 24 months. Invest in holistic, multi-sectoral responses for survivors. VAWG prevention interventions can help to promote supportive and non-stigmatising attitudes towards survivors among communities, but comprehensive support services for survivors are also essential and remain a significant challenge in resource-limited fragile settings.

- **Engage whole communities, including men and boys as well as women and girls, and address harmful masculinities as part of VAWG prevention interventions.** This should include targeting young men whose attitudes are forming. Further research is needed on how to change women’s internalised attitudes that justify violence and gender inequality.

- **Use evidence-based approaches** in the process of adapting interventions to ensure that they are context specific and relevant.

- **Consider replicating, adapting and scaling up** this methodology in other settings where faith is influential in shaping attitudes, behaviours and gender norms.
ACKNOWLEDGEMENTS

The promising practice LWF Uganda Refugee Operation has been made possible through substantial contributions from the dedicated staff of the Lutheran World Federation (LWF), both at the field office level in Uganda and the Communion Office in Geneva.

LWF appreciates the generous support of our donor the United Nations High Commissioner for Refugees (UNHCR) and in-country partners, including the Office of the Prime Minister (OPM) who are dedicated to empowering communities and dismantling the chains of sexual and gender-based violence.

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Lutheran World Federation (LWF) Uganda is implementing the Uganda Refugee Operation in Adjumani, Palorinya and Lamwo Refugee camps in Uganda, with support from the UN High Commissioner for Refugees. The project provides protection, legal and community services, prevention, and response to sexual and gender-based violence (SGBV). The project, which commenced in January 2023 is still ongoing at the time of the publication of this promising practice and is benefitting both refugees and the host community.

The LWF Uganda Refugee Operation is responding to a protracted refugee situation resulting from conflicts within the region. Since 2016, Uganda has faced three parallel refugee emergencies from South Sudan, the Democratic Republic of Congo (DRC), and Burundi. As of December 2020, Uganda was hosting about 1.5 million refugees, comprising: 815,831 from South Sudan; 339,476 from DRC; 39,647 from Burundi; 29,170 from Somalia; and 32,605 from other countries. About 82% of the total refugee population comprises women and children, with women and girls accounting for about 52% of this demographic. An estimated 95% of the refugees reside in refugee settlements spread across 12 refugee-hosting districts. The Government of Uganda has the primary responsibility for the security and protection of refugees and asylum seekers and as such, United Nations High Commissioner for Refugees (UNHCR) collaborates with the Office of the Prime Minister (OPM), other United Nations agencies and International Non-Governmental Organisations to deliver Protection and Assistance to the refugees.

Sexual and gender-based violence (SGBV) is widespread in Uganda among both the refugee as well as the national population and calls for special attention. Between 2018 and 2020, an average of 5,000 new incidents of SGBV were reported annually. Between January and September 2023, LWF responded to 560 SGBV cases of rape, sexual assault, physical violence by intimate partners, emotional violence, teenage pregnancy, child marriages, and forced marriages among others. All these are in addition to many other incidences in the community that have not been identified and responded to. The SGBV situation was heightened by the COVID-19 pandemic which saw a significant increase in SGBV incidents. While stakeholders agree that the statistics are not truly representative of the actual situation on the ground, they provide insights into the prevalence of SGBV. The most prevalent forms and types are intimate partner violence, domestic violence, physical violence, early/child marriage, economic violence, rape, defilement, and other types of sexual violence affecting about 90% of women and girls.
The 2022 SGBV Information Management System (SGBVIMS) statistics reported only 740 (21 male, 719 female) SGBV incidents in Palorinya, Adjumani and Lamwo. This did not capture many other incidents in the community that have not been identified and responded to. Many forms of SGBV are perceived to be private and unimportant, or a normal part of life that goes unreported in some communities. This project has also strengthened referral mechanisms and monitors them for effectiveness. Enhancing male engagement for effective SGBV prevention and response is another critical area that the project seeks to address.

Addressing Sexual and Gender-Based Violence (SGBV) is a critical component in both the challenge of sexual and gender-based violence (SGBV) and the implementation of this promising practice. LWF is committed to promoting safety, equality, and the well-being of individuals, particularly women and marginalized populations.

In this promising practice, we are implementing programs specifically designed to prevent SGBV through awareness campaigns, education, and community engagement. There is the integration of protection mechanisms and support services for survivors, including medical care, psychosocial support, and legal assistance. We make great efforts to ensure that our programs are inclusive, addressing the specific vulnerabilities of women, girls, boys, and men, and other marginalized groups who may be disproportionately affected by SGBV.

Our program also focuses on the following aspects of SGBV to holistically foster safer, more inclusive, and resilient communities:

- Enhancement of capacity by providing training for community members, leaders, and service providers to recognize, prevent, and respond to SGBV effectively.
- Establishment of confidential reporting mechanisms to encourage survivors to come forward and seek help without fear of reprisal.
- Advocacy for and integration of legal and policy frameworks that address SGBV, promoting accountability and justice for survivors.
- Challenging harmful gender norms and promoting gender equality as a fundamental aspect of preventing and addressing SGBV.
- Regular monitoring and evaluation to assess the effectiveness of interventions in addressing SGBV with a commitment to making necessary adjustments based on evidence.
- Collaborating with local authorities, Non-Governmental Organisations (NGOs), and community leaders to create a comprehensive and coordinated response to SGBV.

Currently, support services are inadequate to aid full recovery suggesting the need for better targeting and availability. Strengthening survivor safety including maintaining safehouses remains a priority as some people can no longer stay in their community safely once they report SGBV because of fear of retaliation in some communities.

In some communities, SGBV survivors believed that aid agencies did not offer assistance appropriate and relevant to their needs. Support services are often inadequate to aid full recovery, suggesting the need for better targeting and availability. Strengthening survivor safety including maintaining safehouses remains a priority as some people cannot stay in their community safely once they report SGBV because of fear of retaliation in some communities.

There are a pressing need to enhance integrated service provision to ensure that survivors have access to mental health and psychosocial support, legal remedies, healthcare, and livelihood assistance. An LWF client feedback survey report of 2022 revealed that 54.2% of respondents, who are SGBV survivors, believed that aid agencies did not offer assistance appropriate and relevant to their needs.

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Objectives

Objectives

The project, Uganda Refugee Operation, aims to reduce the risk of SGBV incidences among forcibly displaced persons in Palorinya, Adjumani, and Palabek refugee settlements by 2028, provide support to survivors as well as strengthen community prevention and response mechanisms. LWF Uganda continuously strives to achieve its objectives through the three outputs below.

1. Refugee women, girls, boys, and men are engaged and empowered to address the root causes of sexual and gender-based violence (SGBV)

   LWF is continuously building the capacity of refugees, and community-based structures including male action groups, community activists, child protection committees, parasocial actors, and SGBV responders, among others on various issues. These include root causes, consequences, and impact of SGBV; how to handle disclosure, making referrals, and survivor-centered principles. This knowledge and skills will transform attitudes and create a supportive environment for survivors. Through a localized approach, community-based structures identify key problems and propose solutions. Through this approach, women, girls, boys, and men are inspired to initiate sustainable and suitable solutions. These community structures lead in identifying and linking survivors to available services and raise awareness to positively influence community perceptions.

   LWF continuously attends SGBV coordination meetings and fosters conversations to transform harmful attitudes, beliefs, and norms driving SGBV and gender inequality. Strengthening referral systems is known to improve service coordination and accountability. Nevertheless, cross-sectoral referrals continue to be affected by a lack of prioritization by some sectors, limited funding, inaccurate data, and delays in service provision. Through the National and settlement SGBV sector working group, LWF promotes continuous review and update of the referral pathway to increase services to SGBV survivors. Partners are requested to confirm their specific SGBV interventions within the project locations. The referral pathways are continuously being updated and popularized with posters, community radio, and awareness sessions at schools, market areas, protection desks, churches, and related community gatherings.

2. Community attitudes and behaviors are transformed with enhanced community engagement and awareness

   Sexual and gender-based violence is deeply rooted in societal norms and attitudes that condone and normalize violence. Transformation requires a long-term commitment to dismantling these attitudes and behaviors. Through this project, LWF continues to remind the community that SGBV affects the community as a whole and thus ending it is not just the responsibility of women and girls but the entire community, including men and boys and male and female community leaders. LWF uses the tested and approved SASA! approach to engage the community to shift from individual to collective actions to end SGBV. SASA! which translates to "NOW!" in Kiswahili, reflects the urgency of preventing
violence against women. The "Together" aspect underscores the transformative power of collaboration, support, and solidarity in creating change. SASA! Together is dedicated to challenging and changing norms, prompting individuals, communities, and institutions to question what is deemed normal or acceptable behavior. This methodology encourages a reflection on how achieving a balance of power between women and men can enhance overall safety, happiness, and health. The mobilization strategies employed include local activism, leveraging the power of community leaders, and strengthening institutions. By emphasizing these elements, SASA! Together strives to foster a collective effort for positive and sustainable change in attitudes and behaviors related to gender dynamics and violence prevention.

Engaging Men and Boys in Accountable Practices (EMAP) is also used to work with men constructively, examining the gendered impact of conflict and socialization. These are crucial steps in creating a world where women and girls are valued, equal, and free from violence. Community activists, Male Action Groups, Refugee Welfare Councils, and cultural and religious leaders are empowered to take the lead in these conversations to ensure the sustainability of these efforts to end sexual and gender-based violence.

3 Improved access to and documentation of quality and timely gender-based multi-sectoral services for SGBV survivors

Lack of representative statistics and data on the prevalence of sexual and gender-based violence impedes effective SGBV programming. Project implementers use ProGres v4 and SGBVIMS, the approved platforms for case management services, to appreciate data requirements and the need for information. ProGres V4 is a case management tool utilized in humanitarian and development settings to assist organizations in handling individual cases, particularly those concerning protection issues like sexual and gender-based violence, child protection, and other vulnerable groups. It enables the documentation, tracking, and management of cases from identification to resolution or ongoing support. Key features include case registration, data collection, assessment, service tracking, referrals, and reporting functionalities. The tool aims to boost the efficiency, coordination, and quality of case management services, ensuring timely and effective support for vulnerable individuals. Additionally, ProGres V4 may incorporate features for monitoring and evaluating interventions to enhance service impact and response effectiveness over time.

Due to the complex nature of SGBV, the project collaborates with other partners to identify and sustain risk mitigation interventions in child protection, education, health, WASH, shelter, energy and environment, livelihood, and cash-based interventions. Multi-partner collaboration on key activities includes joint assessments and safety audits so that data is readily available to inform intersectoral programming. Through national and settlement level working group meetings, the project advocates with the Ministry of Gender, Labour and Social Development (MGLSD) for refugee SGBV information and data to be inclusive of age, gender, and diversity breakdown and reflected in national development plans and systems. Additionally, LWF facilitates survivors' access to services while adhering to ethical data collection principles. LWF is committed to generating compelling evidence and fostering a culture of continuous learning, so humanitarian partners may work more effectively, efficiently, and responsively.

Increased Awareness and Advocacy

LWF anticipates that there would be an increased awareness drive on SGBV at the settlement level, district, national, and global levels resulting in increased advocacy and efforts to address this issue at international, national, and local levels. Advocacy campaigns challenge societal norms, stereotypes, and stigma that perpetuate SGBV. Prevention strategies include educational programs to promote gender equality, challenge harmful attitudes and behaviors, and empower individuals to resist and report incidents of SGBV. Moreover, legal reforms seek to provide better protection for survivors, hold perpetrators accountable, and eliminate legal loopholes that may enable impunity.

Protection Mechanisms

LWF expects that the various protection mechanisms being implemented will ensure the safety of individuals at risk of or affected by SGBV, including the establishment of protection houses, safe spaces, shelters, and toll-free lines. Efforts are made to integrate protection measures into broader humanitarian responses and recognize the vulnerability of displaced populations to SGBV. Access to healthcare services, including medical treatment and psychosocial support, is a crucial aspect of the response to SGBV. One-stop centers have been established at some health facilities to facilitate safe and dignified services to survivors with limited exposure.

LWF hopes that routine SGBV safety audits, asset mapping, transect walks, and assessments will help in enhancing understanding of the prevalence and nature of SGBV, contributing to evidence-based policymaking and program development. Additionally, assessments and surveys are conducted to identify risk factors, effective interventions, and gaps in existing responses. It is important to note that progress in addressing SGBV is an ongoing activity and evolving process, and challenges persist. For that reason, local context, cultural factors, and political will are all critical considerations in the success of prevention, protection, and response initiatives.
CORE ACTIVITIES

Capacity enhancement

Over time LWF has built the capacity of staff and community structures to implement community-based programs to raise awareness about SGBV, its consequences, and available support services. Community structures like SASA! Activists and faith leaders spearhead the community-led awareness sessions and community dialogues to challenge harmful gender norms and promote positive behavior. Community leaders, staff, law enforcement personnel, and healthcare providers have been trained on how to prevent and respond to SGBV and offer medical and psychosocial support to survivors.

Establishment of safe spaces

LWF has established safe spaces for women and girls where they can access support services, like medical care, legal assistance counseling, and participate in empowerment activities to enhance resilience, share experiences, and strengthen referral services for survivors. Collaborating with local authorities to address legal aspects and ensure justice for survivors is key as it has contributed to a more accurate understanding of the prevalence of SGBV and allows for targeted interventions.

Advocating for policy change

Advocating for and supporting the development and enforcement of legal and policy frameworks that address SGBV and protect the rights of survivors is a key part of this project. Collaborating with local authorities to integrate SGBV prevention and response into broader community development plans, as well as engaging men and boys in SGBV prevention efforts, challenging traditional gender norms, and promoting positive masculinities, respectful relationships, and highlighting the role of men as allies in creating safer communities and reducing SGBV has been essential. LWF, being a multi-sectoral organization, offers a range of support services, psychosocial support, legal assistance for survivors of SGBV, and needs-based support. These services contribute to the overall well-being and recovery of survivors.

Strengthened partnerships

This includes collaborating with local NGOs, international organizations, and government agencies to ensure a coordinated and comprehensive response to SGBV. Improved coordination among diverse institutions, including government bodies, NGOs, and community organizations, fosters enhanced collaboration and a more integrated and effective approach to community development. The success of these initiatives hinges on factors like local context, community engagement, sustainability, and ongoing monitoring and evaluation, ensuring that positive changes are enduring and contribute to the overall well-being of the community.

Monitoring, Evaluation, and Learning

LWF conducts regular monitoring and evaluation of SGBV prevention and response activities that help assess the effectiveness of the interventions. This data-driven approach enables the organization to make adjustments and improvements over time. Efforts to address SGBV are often integrated into broader humanitarian projects, such as health, education, or livelihood programs. This integration ensures a holistic approach to addressing the needs of the population and contributes to the overall success of the project.

APPROACHES TO PROGRAM IMPLEMENTATION

Effectively addressing SGBV requires a dual approach of changing social norms and behaviors, and building gender-responsive institutions, particularly justice systems, which support survivors and end impunity for perpetrators. LWF adopted the following approaches for this promising practice:

Survivor-centered approach

This is an approach where survivor’s rights, needs, wishes, safety and interest are prioritized above all other considerations whilst observing the 4 key principles of confidentiality, safety, respect, and non-discrimination. The focus is on doing no further harm and empowering survivors to be in control of the helping process so that they develop the resilience to positively cope and implement the decisions reached. All programs take into account the specific needs and intersecting vulnerabilities of women and girls, and men and boys and tailor interventions accordingly. LWF promotes programming design based on priorities set by women and girls as well as other groups at heightened risk of SGBV. Women and girls’ leadership as well as gender equity are central to this approach.

The Human Rights-Based Approach (HRBA)

Serves as a foundational methodology for LWF interventions, centering efforts on international human rights standards and principles. This approach is enacted through methods and processes such as legal advocacy, which involves championing legal reforms and policies aligned with human rights frameworks. Additionally, awareness campaigns on human rights aim to educate communities about their fundamental rights and freedoms. A crucial aspect involves promoting survivors’ access to justice, and ensuring their legal rights are upheld. Tools integral to the HRBA include human rights impact assessments to evaluate the effects of interventions on rights, the development and application of legal frameworks aligned with human rights principles, and the implementation of human rights training programs to enhance awareness and understanding within communities. This comprehensive approach strives to create a foundation where interventions are not only effective in addressing immediate concerns but also contribute to the broader goal of fostering a rights-based and just society.

The Participatory Gender and Social Inclusive Approach

Processes embody a methodology focused on involving communities and diverse stakeholders in decision-making processes to challenge prevailing gender norms. The project ensures active participation from diverse community members, including women, men, and marginalized groups, in decision-making processes and project activities. By incorporating their perspectives and voices, LWF tailors interventions that address the specific needs and priorities of all community members, fostering inclusivity and gender equality throughout the implementation process.

Essential tools in this process include gender analysis tools, which help assess the impact of interventions on different genders, community mapping to identify key influencers and resources, and participatory action research to engage communities in active problem-solving and decision-making. By emphasizing inclusivity and participation, this approach seeks to dismantle gender stereotypes, promote equitable decision-making, and ensure the diverse voices of communities are heard and considered in the development and implementation of interventions.
As part of the project, SASA! Faith principles are integrated to promote gender equality and prevent violence against women and girls within faith-based communities. For instance, workshops and training sessions are conducted with religious leaders to raise awareness about sexual and gender-based violence (SGBV) and challenge harmful social norms and attitudes. This promising practice fosters community building and social cohesion by promoting inclusivity and cooperation leading to stronger and more resilient communities. Practices that prioritize the inclusion of women and persons with disabilities aim to reduce barriers to participation and ensure equal access to services, education, and employment.

Beneficiaries’ agency and resilience is improved. Empowerment initiatives, including vocational training and economic opportunities, play a crucial role in enhancing the agency of individuals, particularly in spaces dedicated to women and girls. By equipping them with basic vocational skills for income-generating activities, these initiatives contribute to improved economic prospects, fostering a sense of autonomy and control over their financial well-being. Additionally, the provision of psychosocial support post-crisis aided individuals in coping with trauma, building emotional resilience, and regaining a sense of control, fostering a more resilient and empowered mindset. Involving beneficiaries in project planning and implementation ensures their voices are heard, increasing community participation and empowering individuals to actively contribute to decision-making processes. Moreover, LWF initiatives have focused on improving access to resources, such as land, credit, and healthcare, empowering individuals and communities to withstand shocks and stressors, and establishing a foundation for economic stability and resilience while reducing vulnerabilities to external challenges.

However, the success of these efforts is always contingent on factors such as local context, community engagement, sustainability of interventions, and ongoing monitoring and evaluation. Assessing long-term impacts on agency, resilience, and institutional capacity requires sustained efforts and periodic evaluations to ensure that positive changes are durable and contribute to the overall well-being of the community.

**COMMUNITY AND GOVERNMENT INSTITUTIONS’ ENHANCED CAPACITY**

Capacity-building programs for community leaders and government officials that focus on enhancing skills in project management, governance, and service delivery continue to yield impactful results. Strengthened skills enable effective community leadership and governance, enhancing the capacity to address diverse community needs. Additionally, institutional strengthening through support for the development and fortification of local institutions has positioned them to respond effectively to challenges and provide essential services, thereby improving overall resilience and responsiveness. Knowledge sharing and best practices is facilitated through coordination and feedback meetings enhancing the capacity of institutions to implement evidence-based solutions, thereby leading to more effective interventions.

The human interest stories below highlight the impact that program is already having within the communities served by Uganda Refugee Operation.
One critical consideration is the potential reinforcement of gender stereotypes or the inadvertent exclusion of certain groups, both of which can have adverse effects. For example, economic programs, if not designed with sensitivity, could perpetuate existing gender norms or exclude specific demographics, such as widows. However, on a negative note, unintended consequences might include reinforcing gender stereotypes if not adequately addressed in educational or economic empowerment programs. Economic interventions, if not carefully designed, may inadvertently exacerbate existing inequalities, emphasizing the importance of a nuanced and context-specific approach to avoid unintentional negative outcomes. It is crucial for interventions to consistently evaluate and adapt their strategies to minimize unintended consequences and ensure that positive impacts are maximized.

Addressing marginalized populations requires a thoughtful and nuanced approach to avoid inadvertently reinforcing social stigma because there is some targeted support for survivors and PWD. Initiatives that single out specific groups, such as survivors of gender-based violence (SGBV) and persons with disabilities (PWD), may unintentionally perpetuate discrimination if not designed and implemented carefully.

The community misunderstood the support offered to survivors of SGBV resulting in a troubling perception that it may encourage more instances of SGBV. In this context, the misconception arose from the fact that approximately 95% of survivors were women. Consequently, some men in the community interpreted this support as a reason to continue inflicting harm on women, believing that they, too, would benefit from the assistance provided to survivors. This situation underscored the importance of carefully designing and monitoring promising practices to mitigate unintended negative consequences.

Cultural sensitivity was paramount in designing programs to address sensitive issues such as sexual and gender-based violence (SGBV). Failure to take cultural context into account resulted in negative impacts on traditional norms and values, potentially leading to resistance or backlash within the community. An illustrative example comes from some South Sudanese tribes where it is not culturally acceptable to conduct open dialogue meetings on SGBV that involve both men and women. In these contexts, cultural norms dictate that discussing such issues openly is not appropriate, and women as such may feel uncomfortable or shy away from participating due to societal restrictions.

The dependency on humanitarian workers/staff for the implementation of community-led initiatives on awareness creation highlights a dynamic that warrants careful consideration. While it’s positive that there is support for community structures to carry out awareness activities, during program implementation, there seemed to be an overreliance on external assistance for the actual implementation. This impacted the sustainability and true “community-led” nature of the initiatives.

CHALLENGES IN IMPLEMENTATION

- Case worker ratio and access to survivor-centered case SGBV response services, remain inadequate due to limited resources.
- A limited number of trained case workers attending to SGBV survivors due to high turnover.
- Inadequate women and girls centers that allow for confidential counseling and women empowerment.
- Limited funding is the main impediment to roll-out and implementing comprehensive prevention programs in all settlements, including SASAI Together. Additional programmatic gaps include inadequate resources for menstrual hygiene kits, a limited number of specialized mental health and psychosocial support partners to address advanced psychological needs, as well as late reporting of cases arising from negative cultural beliefs.
- Limited livelihood assistance for single women and teenage mothers.
- Security concerns among some isolated tribes who are negative about reporting and follow-up of SGBV cases because they feel that SGBV is a private matter. Oftentimes, community members who report the case and caseworkers managing the cases are threatened by the perpetrators.
- Limited women and girls’ safe spaces for women to get vocational skills, share experiences, and get counseling services.
- Proximity of some settlements to the border and cross-border movement making it challenging to maintain consistent engagement with beneficiaries.
Mitigating challenges faced by women and men, boys and girls in crisis situations

Women and girls are often disproportionately affected by SGBV during crises. Crises can disrupt education, particularly affecting girls. Strategies include establishing temporary learning spaces, providing catch-up classes, and addressing barriers like safety concerns. Women and children face barriers to accessing healthcare. Mitigation involves mobile health clinics, community health workers, and awareness campaigns. Men’s and women’s livelihoods have been severely affected. Livelihood support programs and vocational training can help mitigate economic challenges. Boys and girls face increased risks, including child labor, forced marriage, and teenage pregnancy. Child protection programs and community-based child protection committees are vital.

Risk reduction and crisis management for resilience

Implementing gender-sensitive early warning systems ensures that the specific needs and vulnerabilities of women, men, boys, and girls are considered in crisis preparedness. The inclusion of diverse voices, including those of women, in decision-making processes enhances community resilience and ensures that interventions are contextually relevant. Designing assistance programs that consider the distinct needs of different groups, such as providing specific support for pregnant women or single-headed households, contributes to effective crisis response. Empowering women to take on leadership roles in crisis management enhances the effectiveness of response efforts and contributes to community resilience. Implementing protection measures, such as ensuring the safety of women and girls in the settlement is essential for risk reduction and promoting resilience. Addressing the psychosocial needs of all groups, particularly children, contributes to resilience by strengthening coping mechanisms and mental well-being. Providing legal support to address gender-based violence and protect the rights of marginalized groups contributes to reducing risks and building resilience. Ensuring continued access to education for boys and girls during crises promotes resilience by providing a sense of normalcy, stability, and hope for the future. In summary, a gender and inclusion approach in crisis contexts recognizes and addresses the unique challenges faced by different groups, contributing to more effective risk reduction, crisis management, and community resilience.

LESSONS LEARNED

Holistic Interventions

Recognition that addressing SGBV requires a multifaceted, holistic approach that encompasses community awareness, legal advocacy, and psychosocial support to comprehensively tackle the complex issue.

Reaching and Engaging Survivors

LWF Uganda incorporates survivor-centered approaches to reach and engage survivors effectively. Additionally, confidentiality and dedicated support services are prioritized. Establishing safe spaces that prioritize the well-being and privacy of survivors is key to fostering an environment conducive to trust and healing. Involving survivors directly in the design and planning of programs not only ensures that interventions align with their needs but also empowers them by acknowledging their agency and perspectives. This approach recognizes the unique experiences of survivors and seeks to build partnerships that prioritize their autonomy and well-being throughout the engagement process.

Faith Actors as Change Agents

Effectively engaging faith actors in the prevention and response to gender-based violence involves recognizing the influential role of faith leaders and leveraging their impact on community attitudes and behaviors. Implementing awareness campaigns and fostering community dialogues in collaboration with faith leaders is a powerful strategy to address cultural norms and promote positive behavior change. In the realm of community-based protection, faith-based institutions serve as crucial gatekeepers, offering avenues to prevent and respond to SGBV cases within communities. The organized networks of people within religious institutions, spanning both urban and rural areas, present valuable opportunities for intervention. Faith-based activities such as homilies or sermons, prayer groups, and regular gatherings within religious institutions, spanning both urban and rural areas, present valuable opportunities for intervention. Faith-based activities such as homilies or sermons, prayer groups, and regular gatherings provide consistent platforms to shape people’s attitudes and behaviors over time.

Community Engagement is Key

Engaging the community in all stages of program design and implementation, ensures cultural relevance, ownership, and sustainability. Hence community buy-in is crucial for success.

Governmental Actors

Collaborating with governmental actors is a pivotal strategy for ensuring the sustainability and scalability of interventions aimed at addressing gender-based violence. By forging partnerships with government agencies, interventions can be integrated into existing structures and systems, enhancing the potential for long-term impact. Engaging government actors in training and capacity-building programs is crucial to bolstering their ability to address SGBV effectively. This not only contributes to the development of a skilled and informed workforce within government agencies but also facilitates the institutionalization of SGBV prevention and response measures. Through collaboration with governmental actors, interventions can align with national policies and frameworks, fostering a more comprehensive and coordinated approach to combating SGBV at both local and systemic levels.
Other Stakeholders
Engaging with various stakeholders beyond faith, survivors, and governmental actors is crucial for the comprehensive success of programs addressing gender-based violence (SGBV). Building partnerships with local non-governmental organizations (NGOs), community-based organizations, and international agencies significantly enhances the reach and impact of interventions. These collaborations tap into diverse expertise, resources, and networks, enriching the program’s effectiveness. Inclusive and participatory approaches, emphasizing the involvement of all stakeholders, ensure that interventions reflect the needs and perspectives of the communities they serve. By fostering collaboration among a wide array of stakeholders, programs can leverage collective strengths, promote knowledge exchange, and create a more holistic and sustainable response to SGBV that addresses the complexities of this pervasive issue.

Documentation and Learning
Encouraging continuous documentation of lessons learned and best practices to inform future programming and contribute to the broader field of SGBV prevention and response is key to fostering a culture of learning and improvement.

Gender Sensitivity
Emphasizing the need for gender-sensitive programming that considers the specific vulnerabilities and strengths of different genders and marginalized groups, recognizing the importance of tailored approaches is vital.

Advocacy and Policy Change
Recognizing the role of advocacy in influencing policy change and institutionalizing effective strategies for SGBV prevention and survivor support, emphasizing the importance of systemic change for long-term impact.

Adaptability
Acknowledging the importance of flexibility and adaptability in program design to respond to the evolving needs of the community and address unintended consequences, ensuring interventions remain effective and contextually relevant.

Monitoring and Evaluation and Learning
Stressing the significance of robust monitoring and evaluation mechanisms to assess the effectiveness of interventions, identify challenges, and make data-driven adjustments for continual improvement.

SUSTAINABILITY
Through the integration of these components and successful strategies, this promising approach can bolster its longevity, guaranteeing that the positive impacts benefit survivors, faith and governmental entities, and the wider community well beyond the initial funding phase

Community Ownership and Engagement
Ensuring that the community actively participates in and takes ownership of the program by establishing community committees or groups to oversee and contribute to program activities.

Building local capacities
To continue the initiative independently by developing strong partnerships with local organizations and building their capacity to sustain program activities. This can further be achieved by collaborating with local NGOs and community-based organizations, and providing training and resources to enhance the skills of local partners.

Government Integration and Institutionalization
Through integrating the promising practice into existing government structures and policies by advocating for the adoption of effective strategies at the government level and collaborating with relevant government departments to ensure institutionalization.

Financial Sustainability
Developing financial mechanisms to ensure ongoing funding beyond the initial project period exploring alternative funding sources, such as partnerships, grants, or revenue-generating activities, and building income-generating components within the program.

Capacity Development for Faith Actors
Building the capacity of faith actors to continue and expand program activities by providing training on SGBV prevention and response to faith leaders and incorporating faith-based perspectives into community-based initiatives.

Empowering Survivors for Long-Term Resilience
Ensuring survivors are empowered to sustain positive outcomes beyond the program period by providing vocational training and economic opportunities for survivors and establishing survivor-led support networks for ongoing mutual assistance.

Advocacy for Policy Change
Advocating for policy changes to support and sustain program initiatives by engaging in policy dialogues at local, regional, and national levels and providing evidence-based recommendations for effective SGBV prevention and response policies.

Monitoring and Evaluation for Continuous Improvement
Establishing robust monitoring and evaluation systems to assess program impact and inform ongoing improvements by regularly collecting and analyzing data on program outcomes and utilizing feedback mechanisms to adapt strategies based on lessons learned.

Documentation and Knowledge Management
Systematically documenting best practices and lessons learned for future reference by creating a knowledge repository to store program documentation and sharing experiences and insights within the organization and with other stakeholders.

Cultural Sensitivity and Contextual Adaptation
Ensuring the program is culturally sensitive and adaptable to the local context for sustained relevance by regularly engaging with the community to understand evolving needs and adapting program strategies based on cultural insights and changing circumstances.

Education and Awareness for Behavioral Change
Embedding education and awareness components that contribute to long-term behavioral change by conducting continuous awareness campaigns on gender equality and SGBV prevention and integrating educational modules into school curricula to promote a culture of respect.
Partnerships

Partners and Collaborators play a crucial role in the success and impact of a project or activity. Their contributions span various areas, including financial support, expertise, resources, and networks. Here’s how partners and collaborators, including private-sector engagement, contributed to the impact of a project:

Expertise and Skills | Non-governmental organizations and civil society groups bring specialized knowledge and skills related to sexual and gender-based violence (SGBV) prevention, survivor support, and community engagement. Private Sector Companies can contribute expertise in areas such as marketing, technology, or supply chain management, enhancing the project’s efficiency and effectiveness.

Networking and Outreach | Collaboration with government agencies has helped in accessing broader networks, reaching a larger audience, and ensuring alignment with national policies and strategies. Private companies like media often have extensive networks that can be leveraged for outreach, awareness campaigns, and community engagement, maximizing the impact of the project.

Resource Mobilization | Collaborative efforts with non-profit organizations lead to joint resource mobilization efforts, tapping into a wider pool of resources for project implementation. Private-sector partners can mobilize resources and services including in-kind donations during advocacy events, or facilities, contributing to the project’s overall sustainability.

Advocacy and Policy Influence | Non-governmental partners often play a crucial role in advocacy, influencing policies, and promoting systemic change for the prevention and response to SGBV. Private companies are engaged in advocacy efforts, using their influence to promote policies and practices that align with the goals of the project.

Monitoring and Evaluation | Collaborating with research institutions enhances the project’s monitoring and evaluation processes, ensuring a robust assessment of impact and effectiveness. Private companies with expertise in data analytics and evaluation methodologies can contribute to refining monitoring and evaluation strategies.

SGBV INNOVATION, REPLICABILITY, VALIDATION AND ADAPTATION

INNOVATION

Community-Centered Design | The approach involves a community-centered design, ensuring that interventions are tailored to the specific needs, cultural context, and aspirations of the community. This approach fosters a sense of ownership and active participation, contributing to increased agency and resilience among individuals.

Intersectionality and Inclusivity | The approach recognizes and addresses the intersectionality of identities, considering the unique challenges faced by men, women, girls, boys, persons with disabilities (PwDs), and other marginalized groups. By being inclusive, the approach promotes social norm change and challenges discriminatory practices, fostering a more equitable and resilient community.

Multi-Stakeholder Collaboration | The approach involves collaboration with diverse stakeholders, including government institutions, NGOs, faith actors, and private-sector partners. This collaboration contributes to system change by creating a network of support, influencing policies, and enhancing the sustainability of interventions.

Technology Integration | Integration of new technologies, such as online case management using ProGres V4, mobile applications for reporting or data analytics for monitoring and evaluation. Technological innovations enhance the efficiency of interventions, improve data-driven decision-making, and contribute to the scalability of the approach.

Behavioral Change Communication | The approach employs innovative behavioral change communication strategies tailored to the local context, utilizing culturally sensitive messaging. Effective communication contributes to social norm change by challenging harmful behaviors and promoting positive attitudes toward gender equality and the prevention of violence.

Capacity Building and Training | The approach includes capacity-building components for various stakeholders, including community members, government officials, and faith leaders. Building capacities contribute to system change by creating a cadre of individuals who can sustain and replicate successful practices.

Adaptive Management | The approach incorporates adaptive management principles, allowing for continuous learning and adjustments based on monitoring and evaluation data. Adaptive management ensures that interventions remain relevant, effective, and responsive to evolving community needs, contributing to long-term success.
Validation of impact

The impact of the Promising Practice approach is consistently validated through regular data collection, analysis, and evaluation processes to ensure that the approach’s impact is measured against predefined indicators and goals. Establishing feedback mechanisms allows for continuous engagement with the community, beneficiaries, and other stakeholders, ensuring that their experiences and perspectives contribute to ongoing improvements. Rigorous assessments of program outcomes, such as changes in behavior, attitudes, and community dynamics, provide tangible evidence of the approach’s impact. The approach’s focus on sustainability, including community ownership, capacity building, and integration into existing systems, reinforces its long-term impact beyond the initial project period.

Possibilities for replication

**Contextual Adaptation** | Successful replication requires an understanding of the local context, including social, cultural, economic, and environmental factors. Therefore, identifying and adapting the intervention to suit the specific conditions and needs of the new context is crucial.

**Community Engagement and Ownership** | The presence of a strong community engagement model and mechanisms for community ownership by ensuring that the community actively participates in the design and implementation of the intervention fosters sustainability.

**Government and Institutional Support** | Support and collaboration from government institutions and local authorities by encouraging alignment with existing policies and government priorities enhance the likelihood of successful replication and scaling.

**Financial Sustainability** | Identification of sustainable funding mechanisms beyond initial project funding by exploring avenues for financial support, including partnerships, grants, and income-generating activities.

**Monitoring and Evaluation Capacity** | Availability of monitoring and evaluation capacities, including data collection and analysis by building local capacities for effective monitoring and evaluation ensures ongoing learning and improvement.

**Adaptation**

**Digital Solutions** | Exploring new technologies or digital platforms to enhance the reach and impact of interventions by ensuring accessibility, inclusivity, and data privacy in the adoption of digital solutions.

**Economic Empowerment Variations** | Adapting economic empowerment components to suit the local economic landscape by identifying viable income-generating opportunities and ensuring they align with the skills and aspirations of the target population.

**Mobile Applications for Reporting** | Implementing or enhancing mobile applications for reporting incidents of gender-based violence by ensuring user-friendly interfaces, confidentiality, and accessibility for diverse user groups.

**Data Analytics for Decision-Making** | Leveraging data analytics tools for evidence-based decision-making and program optimization by building organizational capacities for data analysis and interpretation.

**Online Platforms for Education and Support** | Utilizing online platforms for educational campaigns, support services, and community engagement by addressing digital literacy, connectivity, and inclusivity issues to ensure broad accessibility.

In summary, the innovation and success factors of the approach lie in its adaptability, community-centered design, multi-stakeholder collaboration, and incorporation of technology. The possibilities of extending the promising practice depend on contextual adaptation, strong community engagement, government support, financial sustainability, and the integration of new models or technological solutions.
Conclusion

The Promising Practice approach has demonstrated significant impact and usefulness in addressing sexual and gender-based violence (SGBV) and fostering community resilience. Its community-centered design, multi-stakeholder collaboration, and adaptability contribute to its effectiveness. The approach not only addresses immediate challenges but also seeks to create sustainable, positive changes in individual agency, community dynamics, and institutional systems. The approach has positively impacted the agency and resilience of individuals, including men, women, girls, boys, and persons with disabilities. Through targeted interventions such as education, economic empowerment, and psychosocial support, individuals have gained the skills and confidence to navigate and overcome challenges.

By incorporating behavioural change communication strategies, the approach has contributed to positive shifts in social norms. It challenges harmful stereotypes, promotes gender equality, and fosters a community culture that rejects violence. Collaborative efforts with various stakeholders, including government bodies, NGOs, faith actors, and the private sector, have contributed to systemic change. Advocacy, policy influence, and capacity-building initiatives aim to create an environment that supports SGBV prevention and survivor support.

The integration of new technologies, such as mobile applications and data analytics, has enhanced the scalability of the approach. These innovations improve data-driven decision-making, reporting mechanisms, and the overall efficiency of program delivery. The approach’s emphasis on community engagement and ownership ensures that interventions are culturally relevant and sustainable. Communities actively participate in the design, implementation, and monitoring of programs, fostering a sense of ownership and commitment.

Ongoing monitoring and evaluation mechanisms have consistently validated the impact of the approach. Data-driven insights, feedback loops, and adaptive management principles ensure that interventions remain effective and responsive to evolving community needs.

Tools and Related Resources

What training manuals, guidelines, technical write-ups, posters, pictures, video and audio documents, have been created and developed that are relevant for this Promising Practice?

- Inter-Agency Minimum Standards for GBV in Emergencies
- WHO Guidance on Ethical and Safety
- GBV Information Management System
- IASC Guidelines for Integrating GBV Interventions in Humanitarian
- GBV Case Management
- GBV AoR Media Guidelines

Additional Information

Include URL of the practice: Add where one can find the Promising practice online or elsewhere

- Also link to Communications URLs with videos and human interest stories.
- Include contact details of project manager/directors/ backstops for more information on the Promising practice.

UN Women’s Frameworks and implementation package for preventing violence against women and girls

- Preventing violence against women implementation package
- A Framework to underpin action to prevent violence against women
ASSESSMENT OF SURVIVOR OUTCOMES TOOL

PROTECTING AND EMPOWERING SURVIVORS OF SEXUAL AND GENDER-BASED VIOLENCE
ACKNOWLEDGEMENTS

This promising practice publication is based on years of effort to consolidate and learn from our staff and partners working to provide safety for and empower survivors of violence to reach a point where they can thrive, function in their communities, and are less likely to experience re-victimization.

A core team of aftercare experts and associates created the Assessment of Survivor Outcomes Tool and Guidance Manual:

Ann Knapp, Janelle Milazzo Lau, Michele Lee, Meredith Menhennett, Andee Cooper Parks, Christa Hayden Sharpe, Ana Sierra, Lisa Slavovskiy, Kathy Stout-LaBauve, Esther Whang with assistance from the IJM Global Aftercare staff, Rachael Jackson, Julie Snicker, Gabby Hanners, Madeline Monson, Stephanie Arcordt, Jessica Kyle, Holly Burdhalter, Tammy Williams, Stephanie Riddell, Gerson Morales, Dave Wilkes, and the IJM Aftercare interns.

This work was made possible through the willingness of subject-matter experts and implementing organizations across the world. Most importantly, IJM is thankful to the survivors of traumatic violence, abuse, or exploitation who were courageous enough to take part in this effort. We believe that all of your contributions have made this measurement tool and its implementation environment more accurate to the survivor’s circumstance, honoring future survivors, and helpful to organizations in providing an evidenced-based service.

For this publication, IJM would like to thank:
• Emily Brown, Global Programs, Center for Excellence Intern.
• Cara Groene, Lead, Operations and Portfolio Management, Global Programs Operations.
• Luigi Camilot, Trauma Informed Care and Survivor Empowerment Lead, El Salvador.
• Jocelyn Penner Hall, Principal Advisor, Violence against Women and Children.

Special thanks to Evalyne K. Orwenyo for review and Stephanie Pierce-Conway for graphic design.

At International Justice Mission (IJM), we collaborate with local authorities to build communities where all people can expect to be safe and protected. Together, IJM and our partners strengthen justice systems to:
• Respond effectively to violence
• Identify situations of violence and assist victims to seek formal help and restoration
• Work alongside justice actors to assist and build capacity in investigation and prosecution, and
• Scale the demand for people-centered justice in partnership with survivors. Since its inception, IJM has served over 85,300 people in direct support, introduced capacity development to over 136,100 justice actors, and aims to protect 500 million people from violence in partnership with local authorities over the next decade.

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INCREASING ACCESS TO JUSTICE

The Assessment of Survivor Outcomes tool was developed to help service providers across a variety of disciplines contribute to access to justice through the necessary work to holistically address the reasons that survivors do not formally report violence and often drop out of judicial processes before completion. The tool works to strengthen service providers’ capacity to conduct thorough assessments of survivor needs to improve case management processes and to measure survivor progress along six key domains of care namely:

1 SAFETY | Survivors are free from the threat or experience of victimization and are motivated and able to remain safe.

2 LEGAL PROTECTION | Survivors know their rights and protections under the law and can exercise agency to pursue justice and protection if these rights are violated.

3 MENTAL WELLBEING | Survivors demonstrate stability, positive coping skills, and reduced harmful behaviors that affect their long-term recovery.

4 ECONOMIC EMPOWERMENT AND EDUCATION | Survivors’ households can maintain adequate income from a safe source to meet their needs, and are engaged in school, training, or work.

5 SOCIAL SUPPORT | Survivors have supportive relationships and are accepted in their communities.

6 PHYSICAL WELLBEING | Survivors take care of their health, and can access basic medical services and safe, stable housing.
The tool is also used to collect data on survivor restoration outcomes so that access to justice can be realized.

**Sustainable Development Goal 16** defines a commitment by duty bearers and agents of change to provide access to justice that leaves no one behind and builds effective, accountable, and inclusive institutions at all levels. For victims of sexual and gender-based violence (SGBV), access to justice must ensure a clear pathway for achieving rights. Building the “right” pathway is as important as the resulting rights and remedy because a decision to report abuse and participate in justice processes requires a constant willingness to exert agency into institutions that have historically disempowered survivors of SGBV.

The pathway towards justice begins long before a decision to report abuse is taken. It requires a wider enabling environment whereby taking action to report violence and rely on justice systems is encouraged and socially accepted and where the outcome of reporting ensures that victims can become survivors; in other words, they are protected from threats of future violence or other coercive actions in the process of seeking justice and afterward.

Reporting violence and participating in processes of justice are acts of agency that, without proper accompaniment and trauma-informed practices embedded directly into community services and public justice system processes, can cause more harm than good. This promising practice exemplifies one such intervention to track progress and inform service providers on a survivor’s journey toward restoration. The validated tool, the Assessment of Survivor Outcomes (ASO), generates a baseline assessment of survivors’ vulnerabilities and strengths, sets goals with survivors for their individual care plans, and then, assesses progress in six key domains of restoration. The tool leverages evidence-based stages of restoration to assist aftercare service providers including justice system actors to implement trauma-informed services effectively and with care to the specific needs and dignity of individual survivors and to confront intersecting forms of discrimination that may hamper their restorative journey.

**Sustainable Development Goal 16: Peace, Justice, and Strong Institutions, Target 16.3**

Promote the rule of law at the national and international levels and ensure equal access to justice for all.

The tool is also used to collect data on survivor restoration outcomes so that access to justice can be realized.

Tackling SGBV requires a diverse array of strategies and collaborative efforts involving multiple stakeholders to advance the movement for gender equality. Efforts to prevent violence from a public health lens have generated new tools, methods, and interventions contributing to new determination and advancements. In addition to violence prevention, these efforts also address factors that constrain access to justice for women and children; for example, changes in rights awareness, social norms, and bias in service provision. Response services, and specifically access to justice, also support violence prevention. Impunity for violence against women and children reinforces harmful gender norms and diminishes a stable environment needed to prevent violence through a series of political and economic means. Access to justice gives rights effect.

In other words, when women and children seek justice, they can secure their rights to maintain bodily autonomy and protection from violence and this protection is a vehicle for other social, economic, and political rights.

However, women and children have not received enough access to public justice to give their rights effect because there is such a high cost to report violence. The very act of intimate partner violence is a coercive means to impart power and control. Few women overcome their partner’s coercive control, the economic and care challenges associated with reporting violence, the disbelief or disinterest from the community, and a chilly reception by justice entities to seek agency, voice, and protection through justice. It is IJM’s experience that justice systems cannot adequately serve women and children until they believe victims, understand the complexity of the relationship with the abuser, and ensure the protection of the survivor from the moment violence is reported.

Although many local organizations are providing legal aid and assistance for women and children to seek justice, there are also many organizations and subject matter experts focused on addressing gender-based violence that have given up on supporting public justice systems as a key element of prevention and response to SGBV for the very reasons stated above. The ASO tool was developed to help service providers across a variety of disciplines contribute to access to justice through the necessary work to holistically address the reasons that survivors do not formally report violence and often drop out of judicial processes before completion.

In the validation of this tool, multiple subject-matter experts highlighted that what a victim needs to see or experience the most is their ability to stand for their own justice process and participate in it, or that they have such inherent value that someone else is fighting for them. Furthermore, knowing one’s rights can create a sense of empowerment and self-worth. These outcomes are just as significant as the judicial outcomes that are pursued.

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**Percentage of Women Reporting Violence**

A review of data across 24 countries and seven years found that only 7% of women reported violence against their person to any formal source (legal, medical, or social) (Palermo et al 2013).

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1. www.ijm.org/aso
OBJECTIVES

The ASO Tool supports IJM’s vision of protection where public justice systems contribute to a wider prevention and response system so that survivors are protected and empowered to grow roots of safety and stability.

The objectives of “safety and stability” can be defined in more detail:

**SURVIVORS ARE BETTER PROTECTED**

Response (also referred to as “aftercare”) services ensure that all interactions with survivors are addressed within secure environments that guarantee both physical and emotional safety, justice entities work to promptly restrain abusers, and justice system actors are careful not to unintentionally frighten or cause additional harm to survivors.

**SURVIVORS ARE EMPOWERED TO REACH RESTORATION**

Over time, survivors reach a point where they can thrive and function in their communities and are less likely to be re-victimized.

Restoration is a journey and a core component of response services. IJM defines “restoration” as a point when a survivor can function in society with low vulnerability to revictimization. For survivors of sexual and gender-based violence, the journey to restoration can be long. Well after reporting and securing protection from violence, this same threat can jeopardize a survivor’s mental and physical health and leave them disconnected from the solid foundation of a safe home, community support, and education.

IJM’s Aftercare and Trauma-informed Care Specialists have been serving survivors of violence for over a decade and have accompanied more than 6,800 survivors on their journey to pursue their goals for restoration, a process that includes elements such as:

- Immediate and short-term crisis care within the scope of crisis intervention.
- Ongoing counseling.
- Support (legal and accompaniment) for the duration of the legal process.
- Job training and education.

This work makes it possible for survivors to live in their communities with a lower likelihood of experiencing violence again.

Because IJM’s Aftercare and Trauma-informed Care Specialists (and partners) cannot directly walk alongside every survivor of violence, IJM staff have developed a series of validated tools that work together across community services and public justice systems that help to ensure a pathway to justice and restoration.
HOW IT WORKS

The Assessment of Survivor Outcomes (ASO) tool is instrumental in measuring the progress made by survivors as they rehabilitate from various forms of violence and exploitation. The ASO Tool assesses survivor progress across six critical domains: safety, legal protection, mental well-being, economic empowerment and education, social support, and physical wellbeing. These areas highlighted in the introductory section of this promising practice, are essential to a survivor’s restoration.

SAFETY

LEGAL PROTECTION

MENTAL WELL-BEING

SOCIAL SUPPORT

PHYSICAL WELL-BEING

ECONOMIC EMPOWERMENT & EDUCATION

Through an intake process, an assessor scores each domain (and sub-domains) to provide a baseline understanding of the survivor’s strengths and vulnerabilities. From the baseline assessment, the care provider and survivor design and agree to a care plan that outlines the services and support towards restoration.

The assessor will monitor and evaluate a survivor’s progress through indicators that align with the ASO domains and sub-domains. ASO data also helps to verify a program’s effectiveness, provide feedback for continued improvement, and inform programming to care for survivors.

THE ASO SHOULD BE USED TO:

• Evaluate the survivor’s progress toward restoration.
• Inform and prioritize individual areas of strength and vulnerability.
• Assess the survivor’s level of functioning and vulnerability to revictimization.
• Direct case management planning and program evaluation.
• Measure the survivor’s restoration from initial assessment to case closure.
• Inform programming to care for survivors.

THE ASO SHOULD NOT BE USED AS:

• A tool to assess mental health conditions. The ASO may highlight risks for the survivor but does not diagnose disorders.
• A targeting tool to identify children and households to include in programs, as it is intended for survivors already receiving services.
• A performance evaluation to measure success for a case manager.

How can the ASO Tool add trauma-informed insights and specific recommendations to justice entities?

The tool initiated by a trained professional can add trauma-informed insights and specific recommendations to make a pathway to justice possible without re-traumatizing survivors in the process. Trauma-informed care enables professionals to better communicate with survivors, respond to their needs, and help them obtain justice. A trauma-informed system integrates this approach as critical to all multidisciplinary providers responding to survivors of violence and trauma – from police officers, to prosecutors, to judges, and to social service providers.

For example, an untrained judge might require a child survivor of sexual violence to testify in court face-to-face with the abuser, unknowingly requiring the child to re-live their trauma in the presence of the abuser.
Since its initial design and implementation in 2012, internal and external validation processes (including mixed-method validation exercises, field testing, and alignment with academic research findings within each domain and sub-domain) have continued to shape and strengthen the tool’s design and implementation.

Capturing survivor voice was a critical component of the external validation, and several implementing organizations also conducted focus group discussions or interviews with survivors to assess the completeness and appropriateness of the tool’s domains and subdomains from the survivor’s perspective. All participating survivors were adults and went through an informed consent process before their participation. These discussions helped IJM incorporate a series of qualitative questions into the ASO Tool aimed at understanding the survivor’s perspective on what contributes to restoration, what is most important for their restoration, the challenges to restoration, and what helps sustain restoration. The qualitative questions were added in 2021 and findings from these questions continue to inform individual plans and wider programs.

The ASO internal validation process revealed that the tool has good reliability and internal consistency, indicating the measurement tool as sound in accurately demonstrating progress towards restoration for survivors of violence and exploitation (across different forms of violence). The tool has additional benefits in identifying key areas of survivor vulnerabilities and strengths, thus enabling a tailored plan of service provision.

Importantly, the tool relies on the “Addressing Model” that facilitates recognition and understanding of the complexities of individual identity. According to the Addressing Model’s creator, Pamela Hays (1996, 2008), “consideration of age, developmental disabilities, acquired disabilities, religion, ethnicity, sexual orientation, socioeconomic status, indigenous group membership, nationality, and gender contributes to a complete understanding of cultural identity. Each factor can help researchers understand underrepresented groups and oppressive forces through an intersectional lens to strengthen assessment outcomes and individualized plans.

Recognizing the Complexities of Individual Identity using the Addressing Model

<table>
<thead>
<tr>
<th>CULTURAL FACTOR</th>
<th>MINORITY GROUP</th>
<th>BIASES WITH POWER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>Older adults</td>
<td>Ageism</td>
</tr>
<tr>
<td>Disability (congenital or developmental)</td>
<td>People with disabilities</td>
<td>Exclusion of access</td>
</tr>
<tr>
<td>Disability (acquired)</td>
<td>People with disabilities</td>
<td>Exclusion of access</td>
</tr>
<tr>
<td>Religion (spirituality or no affiliation)</td>
<td>Religious minorities</td>
<td>Intolerance</td>
</tr>
<tr>
<td>Ethnicity (and race)</td>
<td>Ethnic or racial minorities</td>
<td>Racism</td>
</tr>
<tr>
<td>Social Status</td>
<td>Low socio-economic status</td>
<td>Classism</td>
</tr>
<tr>
<td>Sexual Orientation</td>
<td>Sexual minorities</td>
<td>Heterosexism</td>
</tr>
<tr>
<td>Indigenous Heritage</td>
<td>Native peoples</td>
<td>Racism and colonialism</td>
</tr>
<tr>
<td>National Origin</td>
<td>Refugees or immigrants</td>
<td>Racism</td>
</tr>
<tr>
<td>Gender</td>
<td>Women</td>
<td>Sexism</td>
</tr>
</tbody>
</table>

5 See ‘The ADDRESSING Model’ | Ohio University, found at: www.ohio.edu/cas/psychology/diversity/addressing-model
ETHICAL CONSIDERATIONS

When using the ASO tool, the assessor must always take into consideration both global and local ethical standards and laws. Ethical considerations should ensure that:

• Survivors are always treated with dignity and respect throughout the assessment.
• Survivors provide informed consent on how their information will be used and are instructed on how their identity and information will remain confidential.
• The assessor is trained on the ASO before conducting assessments.
• The assessor seeks supervision in cases where assessment can be difficult.
• The assessor considers the survivor’s socio-cultural context.
• The assessor always maintains a professional relationship with survivors.
• The assessor must not force or adapt responses based on their views or perceptions of the survivor.
• The assessor refers a survivor to appropriate emergency services if significant vulnerabilities are identified.

SUSTAINABILITY

To make the ASO tool sustainable, it should be incorporated directly into government case management tools and introduced to community-based organizations that also work with justice entities, social protection, and public health services. Often, this pathway will require an advocacy strategy that responds to the current policy landscape to adjust, reform, or implement current policies and laws to adopt the tool and coordinate actors and actions. A strong government partnership that includes implementing ministries and dedication to creating quality standards and budgets are also important elements to sustain policy implementation. Finally, early and targeted engagement in ASO-related training ensures that quality standards and necessary skill sets are in place to implement effectively.

Likely any tool or model tested and validated, there is continual work to update, learn from, and adjust methodology to respond to new needs or situations. However, sustaining a continuous learning cycle poses a challenge when trying to retain authority and leadership over a tool distributed among numerous partners. Furthermore, systematically capturing partner-led ASO data for learning purposes requires significant communication and engagement with a variety of partners in a cyclical manner.

Despite the challenges, IJM has been able to successfully scale the ASO through direct partnerships with government stakeholders. The Government of Guatemala’s Institute for Victim Care and Assistance incorporated the ASO tool within its wider Model for Holistic Assistance to Victims where it was able to support 4,647 survivors of violence in its first 6 months of operation (starting in 2021).

IJM Philippines and the Philippines’ Department of Social Welfare and Development

IJM Philippines has been a pioneer in implementing and training partners to utilize the ASO. Collaborative relationships with NGO partners are central to scaling the ASO and are often a good starting point in recruiting ASO champions who aide in advocating to the local government.

In mid-2021, our Philippines team developed a multi-dimensional case management training product. With established respect and trust amongst partners, this training gave the team leverage to target key players in the local government to participate as guest speakers and mentors in the training which in turn led to them suggesting that we pursue institutionalization of the ASO. Currently, the ASO is in the process of being fully institutionalized with the Philippines’ Department of Social Welfare and Development (DSWD) and will be a tool used by all social workers in the country to better assess survivor needs, improve case management and track survivor restoration outcomes.

See Instituto de la Víctima – Guatemala, found at: www.institutodelavictima.gob.gt
7 Guatemalan Institute Supports Over 4,000 Survivors with New Trauma Informed Model; see www.ijm.org/news/guatemala-over-4-600-survivors-received-holistic-care-in-the-past-six-months.
CONTACT
FOR INQUIRIES
If you have any questions about the ASO tool or if you would like to use the tool, please contact Global Aftercare (aftercare@ijm.org). For more information, please visit www.ijm.org/aso.

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SCALING UP FAITH LEADERS’ ENGAGEMENT TO PREVENT AND RESPOND TO VIOLENCE AGAINST WOMEN AND GIRLS (VAWG)
ACKNOWLEDGEMENTS

This promising practice on the Interfaith engagement to prevent and respond to violence against women and girls was developed and implemented by Episcopal Relief & Development and its local partner in Liberia, the Episcopal Church of Liberia, Relief and Development (ECLRD).

Special thanks and deep gratitude go to all of the faith leaders that have been sharing the gift of their time to speak out against violence against women and girls, to provide support to victims and survivors and to mentor future leaders.

To Jonah Boykai, Fr. Charles E. Boyce, Sheik Habib Sherriff who have left us in this journey. We are continued to be inspired by their drive and determination to see women and girls have a better future in Liberia.

To all of the colleagues at Episcopal Relief & Development and ECLRD who contributed to this effort.

The Scaling Up Faith Leaders Engagement to Prevent and Respond to VAWG Program in Liberia (2018-2022) was supported by funding from the UN Trust Fund to End Violence Against Women. However, the views expressed, and content included does not imply official endorsement or acceptance by the United Nations. The program was also implemented with the generous support of the Islamic Relief USA. The views expressed herein are those of Episcopal Relief & Development and shall not, in any way whatsoever, be construed to reflect the official opinion of IRUSA, its Islamic Relief affiliates, or its donors.

CONTEXT

Episcopal Relief & Development is an international relief and development agency that seeks to provide compassionate response to human suffering around the world. The organization’s focus areas include climate, children, humanitarian response and women. Episcopal Relief & Development has been partnering with the Episcopal Church of Liberia Relief and Development (ECLRD), the humanitarian arm of The Episcopal Church of Liberia for many years, and working with Christian and Muslim religious leaders and communities in Liberia to prevent and respond to violence against women and girls (VAWG).

Between 2015 and 2017, the United Nations (UN) Women’s UN Trust Fund to End Violence against Women (UN Trust Fund) and Islamic Relief USA (IRUSA) contributed to this partnership by supporting a three-year project aimed at improving gender-based violence (GBV) prevention and response by engaging faith leaders. Based on the promising results of Phase 1 of the project and its endline evaluation affirming the potential of religious leaders as an entry point into communities, the UN Trust Fund and IRUSA awarded the project a second round of funding, contributing to a 4-year Phase 2 initiative that ran through 2022.

In Liberia, where the state’s resources and infrastructure are limited, religious leaders and communities play a significant role in community cohesion and support. Over 98% (85.6% Christians, 12.2% Muslims) of Liberia’s citizens identify as religious, and the country’s religious community has a history of interfaith activism. During Liberia’s civil war, religious leaders mobilized extensively to promote peace.
PROJECT DESCRIPTION

Episcopal Relief & Development has implemented the Scaling Up Faith Leaders’ Engagement to Prevent and Respond to VAWG project to address the issue of violence against women and girls (VAWG) in Liberia. The project aims to tackle the underlying knowledge, attitudes, and behaviors surrounding the treatment of women and girls at the individual, family, and community levels. The Inter-religious Council of Liberia provided consistent input to ensure that the transformative messaging would be contextualized and piloted with strong leadership and theological guidance from senior religious leaders within the country.

To prevent and respond to VAWG, we developed a Faith Leader GBV Toolkit. The toolkit was designed to empower religious leaders from Christian and Muslim faiths to speak out against GBV in their congregations and communities and to offer better support to survivors. The toolkit uses experiential learning to guide religious leaders on a journey of self-discovery, helping them change their attitudes and feel more empowered to address violence against women and girls. It also engages with sacred texts that have been used to justify the mistreatment of women and girls and encourages a more equitable messaging that emphasizes respect, responsibility, and dignity. Following reflection on Qur’anic and Biblical texts, Muslim and Christian faith leaders bonded and developed a sense of common purpose.

The project was implemented in two out of fifteen counties of Liberia, Grand Cape Mount and Rivercess during the first phase, with two additional counties, Bong and Grand Gedeh, added during the second phase. Religious leaders were invited to a five-day workshop, where they were introduced to the Toolkit. The Toolkit was utilized to sensitize, enlighten, transform, and mobilize religious leaders to address GBV. After the workshop, ECLRD staff provided support and mentoring to religious leaders. Refresher workshops were included in the second phase of the project.

The Toolkit comprises extensive materials to assist religious leaders in addressing GBV within their congregations and communities. The FAMA (Facts, Association, Meaning, and Action) cards are among the additional tools and materials available, which aid in fostering deeper reflection, identification, analysis, and decision-making. The FAMA cards have proven to be highly effective in Liberian communities with low levels of education and high levels of illiteracy.

OBJECTIVES AND OUTCOMES

The goals of this project were two-fold
1. Reduce the incidences of IPV and NPSV for women and girls, and
2. Increase SGBV survivors’ access to services.

The three project outcomes
1. Encourage church and mosque leaders to speak out more against VAWG, aiming to change cultural norms in their communities.
2. Empower youth leaders of Christian and Muslim groups, along with school leaders (including staff, students, and parents), to speak out against violence towards women and girls and offer support to survivors.
3. Promote increased support from Muslim and Christian faith communities for survivors of violence, advocating for their rights and access to services.

A community meeting where members are identifying available resources to sustain the project

1 FAMA (Facts, Association, Meaning, and Action) cards are pictorial codes that present different practices and behaviors and are used by facilitators to guide participants through a process of self-discovery, moving them from reflection to action.
The project mobilized collective action to reduce violence against women and girls and ensure survivors’ access to appropriate support and services. An independent endline evaluation of the project titled “Ending Violence Against Women and Girls (EVAWG) in Liberia” was conducted independently by Dr. Elisabet le Roux of Stellenbosch University and Dr. Julienne Corbox in 2022 to measure phase 2 of the project achievements and capture key project learnings for further interventions. The study validated our approach and found our VAWG project had a significant impact on the participants and communities.

The study identified several positive impacts from the project implementation, including:

- **EVIDENCE OF IMPACT**

  Moreover, the project played a significant role in changing societal attitudes towards gender roles and responsibilities. Community members became more conscious of gender equality and the negative effects of patriarchal attitudes and behaviors. The project facilitated these changes by raising awareness and providing support to faith and community leaders as they speak out against harmful norms and promote gender equality in their communities and congregations.

  The project successfully implemented innovative and imaginative methods to combat sexual and gender-based violence in Liberia. This evidence of impact was captured in selected scenarios and impact narratives as highlighted in this report.

- **WOMEN FAITH LEADERS AS CHANGE AGENTS**

  While the majority of faith leaders in the communities our project serves were male, over time, we increasingly engaged women faith leaders as community agents and influencers, using their own self-reflection and discovery process as demonstrative evidence of change. We saw this, in turn, empower other women and girls to reflect on their own personal experiences as they built trust and solidarity in the safe spaces that were made available to them.

  These observations and experiences are articulated in the expressed sentiments below:

  * “I was married to a man who, himself, was married to 6 other women. That situation created a very stressful, toxic environment for me. Fortunately, 24 years ago my eyes were opened and I decided to leave the relationship to focus more on my faith and became a pastor. At the beginning it was very difficult for me. I was told that I could not lead a church; I should not exercise any leadership roles, overseeing men. I used to feel discouraged and despised; but when I went through the training on the Faith Leader Toolkit, I gained new knowledge that helped me to reflect on ways to stand my ground and to help my community to recognize the need to work towards a community free of violence towards women and girls. Today, I continue to use the FAMA cards, the Faith leader toolkit to empower other women and girls in my community. Thanks to the trainings, I now realized, as a leader, that I am a role model and it is important for me to create spaces for all women and girls to learn, grow, and thrive in their community.”
  
  Mother Susannah Lumei, Women Faith Leader- Grand Cape Mount County

  * “I was one, we are united now, the Muslim and the Christian, the Imam and the Pastor, we can host meeting, one time we can host meeting in the town hall, so we can invite all the people and we can be educating them what to do, what not to do, so they can follow us.”
  
  (FGD, adolescent male congregants, Grand Cape Mount, 29 October 2022)

  * “One important thing under this particular program, it had been very difficult to see Muslim and Christian coming together to work. Even for my first time going to the mosque I was so scared because it had never happened in my life before for the idea for Christian and Muslim to work together. The Imam will join the pastor during the 16 days of activism in the church and then the pastor joins the Imam (and) they go to the Mosque. It brought togetherness in the community.”
  
  (KII, staff, Bong, 1 November 2022)
STORYTELLING AS A DIGNIFIED AND AUTHENTIC WAY TO LIFT UP THE EXPERIENCES OF WOMEN

As part of the Spotlight grant, the project engaged StoryCenter3 and facilitated a digital storytelling exercise for Episcopal Relief & Development, ECLRD staff, and members of the NFLAC to creatively construct their personal narratives of strength and resilience and equip them to train others, particularly women within Savings with Education (SwE) Groups. The ethical storytelling process gave voice to women and a platform to share their personal stories, enabling the project to effectively capture qualitative information and subjective experiences on VAWG in a way that honors the dignity of the individual. Using stories helped participants discuss difficult topics more powerfully and authentically articulate their experiences. Storytelling often reveals hidden insights through the sharing of richer data. Storytelling allowed female faith leaders to hear and give voice to the lives and experiences of other women and to tell their stories as only they can.

INTERVENTIONS SHOULD ACCOMMODATE VARIED LITERACY LEVELS

EVAWG, used FAMA cards extensively and found that the picture cards facilitated discussion process and were highly effective in fostering attitude and behavior change. For example, a boy that was in a session with the FAMA card of a man not supporting his family said: “this is what my uncle is doing to my auntie.” The boy could directly relate to what was happening in the picture and he felt remorseful about the negative behavior towards a female relative.

The study associated with this project determined that exposure to FAMA cards was significantly associated with lower endline prevalence of intimate partner violence (IPV). Moreover, male congregants were significantly less likely to have engaged in the various types of past year IPV perpetration at endline, if they had seen FAMA cards about physical, emotional or any kind of IPV.

* Because of the picture [it works]. We did not go to school, so these (pictures) tells us how to do it. Because when you did not go to school you can't read. (But with) this picture we are seeing the way it can help us. We are not educated… the picture can help us to learn”

Female Adult Congregant, Grand Cape Mount county, Liberia, October 2022.

INCREASED AWARENESS AND ADVANCING COLLECTIVE ACTIVISM

Through various initiatives, such as such as sermons, scripture studies, counseling, community events, and small group discussions, community members and congregants gained a more in-depth understanding of the impact of gender-based violence on women’s lives. They recognized how GBV can limit women and girls’ potential, undermine their self-esteem, and prevent them from achieving their goals. The project provided a platform for people to voice their concerns and led to the establishment of structures in the communities that work towards promoting gender equality and combating gender-based violence.

Following these efforts, more and more people are taking a stand against gender-based discrimination. The project empowered faith leaders and congregants to advocate for equal opportunities and treatment for women and girls and also provided an opportunity for faith leaders and congregants to speak out against harmful norms and promote gender equality in their communities.

These changes in attitudes are reflected in the following quotes from faith leaders and congregants:

* Before then the men used to beat on their wives but from this awareness we have carried out; soon people get to know now that it is not good that the one you called your wife, to harm her, because you people are no longer two but you are one.”

Male Faith Leader, Rivercess, 17 October 2022

* In our community before men use to beat on their wife or spouse but with help of ECLRD it’s not happening again. The town chief also put law down that no man should beat their wife in the town”

(Female Congregant, Bong, 1 November 2022)

SHIFT IN SOCIETAL GENDER NORMS

The project proved to be effective in equipping faith leaders to use their platforms to promote gender equality and positive masculinity. This was evident from the experiences of several faith leaders who have participated in the project. The project has helped these leaders develop a more gender-equitable attitude, which, in turn, contributed to building a more harmonious and inclusive community. The positive changes that resulted from the project were widely recognized by the participants as well as the larger community:

* In our Liberian traditions, boys are taught not to show their emotions. We learned very early that boys are supposed to be tough. We also believed that crying is a sign of weakness; boys don’t cry; boys do. This project has changed my view on this. Men can cry. Men should cry. No wonder, violence is so present in our lives in Liberia. During the various trainings that I participated in I realize that I can be a better husband to my wife, father to my children and better leader to my community. The Trauma training that I participated in opened my eyes on so many things. As a matter of fact, I found myself releasing some tears during the training as I was reflecting on my life. I felt so much lighter afterwards. I felt free from many things in my past. That is one little thing, among many things, that I learnt through this project and that I think can make a difference in the lives of men and women in our country.”

Faith Leader, Grand Gedeh County

* The dynamic on gender has been changed; for instance, I didn’t used to wash my wife’s clothes but presently now, “I’m washing my wife’s clothes, when she brings the clothes and says please help me, I wash it and carry my baby to the hospital and sometimes when she is not able I cook and we eat. So, the dynamics have changed. When she is not able, I cook and we all eat together and they will not call me Ma-Mary no. People used to call us, when a man cooks, they will say you Ma-Mary now or you sister Annie or sister this. But actually, everything is going on the same path so the dynamic is been changed.”

Male Faith Leader, Rivercess, 14 October 2022

* Not only women are responsible to cook in the home; not only woman are responsible to take care of the children in the home. We (are) getting to know all that…but we did not know it at first. I did not know it, only woman can send child to school, only woman have the responsibility, only woman must wash, only woman must clean up the house. But for now we get to understand that it is not woman that is responsible for all that. (We) want the man too to get to help.”

Female Youth Leader, Bong, 2 November 2022
CHALLENGES IN IMPLEMENTATION

The COVID-19 pandemic had a significant impact on various aspects of the project, including community engagement. The closure of churches, mosques, and schools, as well as the imposition of significant restrictions on movement and assembly during the national lockdown period, meant that in-person activities had to be suspended. Moreover, community members were reluctant to engage with project volunteers due to the uncertainty surrounding COVID-19 and the memories of the impact of Ebola outbreaks in Liberia. Many were afraid of contracting the virus and were hesitant to interact with others, especially strangers.

One faith leader from Rivercess explained the issues in this manner, “Sometimes when we go to various houses to talk to people, they don’t want to come closer to us to listen. Those were some of the hardest times.” The fear and uncertainty surrounding the pandemic and its potential impact on their health and well-being made it difficult for community members to engage with the project volunteers fully. However, despite these challenges, the project continued to work towards achieving its goals, adapting to the changing circumstances and finding new ways to engage with the community.

LESSONS LEARNED

The project generated a variety of lessons on prevention and response to VAWG. Some key learnings that emerged across the life of the project include:

Attitude and behavior change starts with faith leaders and is an iterative process of self-discovery

Providing the space and structure for faith leaders to reflect on their role in preventing and responding to VAWG, as well as confront their own views on gender roles, relationships and power led to faith leaders feeling more empowered to speak out against, and address VAWG, as a critical issue in their communities. The National Faith Leaders’ Advisory Coalition (NFLAC) members and faith leaders from the county coalitions recognized the experiential learning model of self-reflection and discovery, facilitated by the Faith Leader Toolkit, as being central to successfully challenging harmful attitudes and behaviors, their own and their congregants. Actions by Muslim and Christian leaders to create and facilitate safe spaces that foster dialogue are a departure from the historic instructive approach that is superficial and does not effectively lead to change. In particular, women faith leaders are increasingly coming to the forefront as community agents and influencers to other women and girls, using their own self-reflection and discovery process as demonstrative evidence of change. As empowered women and girls reflect on their own personal experiences, they build trust and solidarity in the safe spaces that are made available to them.

FAMA cards are highly effective in fostering attitude and behavior change

Faith leaders, volunteers and those who participated in FAMA card sessions felt they were highly effective and appropriate in their context. The picture-based FAMA cards can support faith leaders and volunteers to become facilitators rather than trainers by encouraging community members speak about and generate their own ideas and solutions to community issues. This proved to be a critical engagement approach considering the low levels of education and literacy across the communities. Further, the approach taken to inspire communities to generate their own ideas helped solidify local engagement and inform adult learning practices.

The importance of intergenerational collaboration

During the second year of implementation, the project staff recognized that they had not created enough space for mentoring, sharing and learning among women faith leaders, other women in the community and young girls. This realization stemmed out of the recognition of the fact that VAWG is a complex and cross-generational issue that needs more purposeful engagement across stakeholder groups to achieve meaningful change. Subsequently, project staff spearheaded the creation of peer-to-peer exchanges among older faith leaders and the youth-led awareness raising activities (drama performances, radio talk shows, etc.) which opened a space for the project team to facilitate women faith leaders and youth leaders collaborating and sharing learnings to spur collective action to achieve a common goal. The project staff made greater efforts to invest in activities that unlock the self-agency of girls to serve as leaders in their schools and communities. As a result, support groups comprising women and girls met regularly to openly discuss abuse and women’s inclusion in the community. These efforts significantly increased solidarity among women and girls in the community.

4 A coalition of men and women faith leaders, who are championing efforts to end VAWG in Liberia.
Incorporating VAWG awareness in faith-based activities decreased the IPV and NPSV prevalence

The survey data from the endline evaluation shows some important associations between violence reduction and congregants’ exposure to faith-based activities. When examining endline prevalence of the previous year experience of IPV and NPSV in the intervention group, the prevalence of all forms of IPV and NPSV reduced from 41% to 33% among female congregants who participated in faith-based activities where VAWG was addressed (such as marriage preparation, retreats, counseling or community dialogues) compared with those who did not. Furthermore, the survey data also found significant associations between hearing faith leaders speak out against gender-based and sexual violence in the previous year and lower past year’s prevalence of physical and sexual IPV, and NPSV.

Attitudinal and behavioral change within faith communities starts with faith leaders

The project facilitated faith leaders’ efforts to examine their contextual understanding of doctrine and traditions in order to understand and challenge barriers. The project staff used behavior science and trauma-informed tools to support reflection, point out cognitive dissonance, challenge long-held beliefs and attitudes. For many faith leaders, was an experiential learning process with scriptures to change their own beliefs and attitudes to affirm their commitment to speaking out against GBV.

Effective partnerships and collaborations

Achieving gender equality and addressing gender-based violence necessitates the formation or partnerships and collaborations across all sectors. It is crucial to engage all stakeholders, including religious leaders, community members, civil society organizations, and government agencies. Through working together in a coordinated and collaborative manner, we can achieve sustainable and lasting change. Effective partnerships are particularly important in resource-limited settings to avoid redundancy and maximize resource utilization. Long-term collaboration helps establish trust between stakeholders, leading to better coordination and less duplication of efforts, ultimately supporting the project’s success.

Social and behavior change communication (SBCC) shapes behaviors and norms

SBCC is a communication strategy that uses simple and easily accessible tools grounded in behavior science. Faith leaders were seen as having a unique influence in maintaining the status quo or changing norms and individual behaviors. As such, they were provided with interactive communication channels and tools tailored to their spheres of influence. These tools include FAMA cards, sermons, radio programs, and drama performances, which were successful in their local contexts.

Controversial issues require a comprehensive strategy

Addressing such sensitive issues such as female genital cutting (FGMC) requires the development of targeted strategies that engage community and traditional leaders who act as guardians of tradition and culture. Although faith leaders and communities can play a vital role in raising awareness and changing attitudes toward VAWG, it is important to recognize that a broader approach is necessary to achieve lasting change. While faith-based organizations can provide safe and supportive spaces for survivors of VAWG to seek help and healing, a comprehensive strategy is needed to address the root causes of pervasive issues such as FGM. Through the project’s next iteration, Episcopal Relief & Development seeks to engage a broader range of stakeholders, including traditional leaders and policymakers, to solidify its multisectoral approach to create and ensure a comprehensive and effective response to VAWG.

SUSTAINABILITY

Encouraging sustainability within a community is a complex and multifaceted process that involves a range of different actions and strategies. Below are some of the key components that need to be considered and implemented in a thoughtful and thorough manner.

1 Engage and unify community members at all levels

   This component entails bringing together all community members, irrespective of their religious affiliations, social status, age, or interests, to work towards a common goal of sustainability from the inception of the project. Achieving this requires creating awareness and educating community members about the importance of sustainability and its benefits, promoting collaborative initiatives and decision-making processes that involve community members, as this fosters a sense of ownership, commitment and shared responsibility.

2 Tap into local resources as much as possible

   One of the most effective ways to promote sustainability is by leveraging local human and cultural resources such as skills and knowledge, local traditions and practices in a responsible, respectful and sustainable manner. By doing so, communities can start reducing their reliance on external sources, promote self-sufficiency, and look inwardly for assets and resources.

3 Coordinate and leverage organizations and institutions

   To ensure that sustainability efforts are maximized and not duplicated, it is important to coordinate and leverage the resources of organizations and institutions within the community. This includes identifying areas of overlap and potential collaboration, as well as fostering partnerships and networks that can support sustainability initiatives over the long term. It also involves building capacity within organizations and institutions to effectively implement sustainability practices and integrate them into their operations and decision-making processes.

The success of the project is largely attributed to the collaborative efforts of various partners involved at every level. Episcopal Relief & Development and ECLRD have been long-term partners, working closely with international and national actors, including the Liberian Ministry of Gender, Children and Social Protection, the Interreligious Council of Liberia, The Lutheran Women Organization, the Faith and Justice Network, and the March for Justice. These partnerships have been instrumental in the project’s design and implementation. At the local level, partnerships with the police, teachers, traditional leaders, and local government officials in each county have played a significant role in providing support for survivors. By collaborating with these partners, community-specific support structures have been developed, which are crucial for ensuring that survivors receive the necessary support. There is growing evidence that appropriately engaging faith leaders, scripture, and faith-based activities in social and behavior change interventions can reduce GBV incidences. The independent study of our EVAWG Liberia program corroborates this and determined significant associations between violence reduction and congregants’ exposure to faith-based activities. The study found that the prevalence of all forms of IPV and NPSV was significantly lower among female congregants who heard their faith leader speak out against violence (at sermons, marriage preparation, retreats, counseling, and community dialogues) compared to those who had not.
Tools and Related Resources
Liberia Violence against Women and Girls Program Poster

Additional Information
Liberia VAWG Impact Summary Report
The role of Faith in ending violence against women and girls
Liberia Project spotlight

UN Women’s Frameworks and implementation package for preventing violence against women and girls
Preventing violence against women implementation package
A framework to underpin action to prevent violence against women

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Gender Equality Partnership and Reconciliation (GEPR)

Promote gender equality in peace building, reconciliation, and community development.
ACKNOWLEDGEMENTS

The development of Gender Equality, Partnership and Reconciliation (GERP) was a participatory process involving all the stakeholders that were drawn from among all the eight countries in the East and Central Africa where ALARM operates namely; Uganda, Kenya, Tanzania, Rwanda, Burundi, Democratic Republic of Congo, South Sudan and Sudan.

ALARM acknowledges with gratitude the contribution made by the number of institutions and personalities for the financial support which indeed funded the entire process of developing the GERP curriculum:

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Reverend Liberty Muherea, Interim President/CEO ALARM Africa and Country Director ALARM Uganda for his unflinching and unwavering support in ensuring that ALARM’s ambition of having GERP curriculum was achieved.

In a special way, we are indebted to recognize and thank the following personalities for their technical input to GERP curriculum at different stages of co-creating the GERP Curriculum:

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Gender Equality Partnership and Reconciliation (GEPR)

The project aims to develop a curriculum for faith actors in Eastern Africa to promote gender equality and equity in the Church and communities. Global gender inequality is a complex human rights issue, with mechanisms of coercion subordinating women’s strengths, knowledge, experiences, and needs to men’s. Religion plays a crucial role in cultural life, influencing socioeconomic and political directions. The relationship between religion and gender equality is influenced by the interpretation of religious texts and the cultural and institutional setup of religious communities.

Gender has evolved over time, defining love, voice, violence, and collective action. It has been used to establish power and honor based on a structure and preference assigned to men, leading to the establishment of patriarchy and the division of labor, income, power, dominance, role characteristics, and organization of power. Gender has also been experienced as violence and centered warfare practices of male power and privilege, with rape, brutality, and exploitation becoming justifiable tools of intimidation and dominance for acquiring land, natural resources, labor, and sexual favors.

Faith-based organizations (FBOs) are not exempt from unequal treatment of women, and African Leadership and Reconciliation Ministries (ALARM), a Christian organization, is committed to facing this reality head-on. ALARM recognizes the need to mainstream gender equity and equality in its focus areas of Servant Leadership Development (SLD), Peacebuilding, Justice and Reconciliation (PJR), and Community Development. Based on its over 10 years of experience in implementing SLD and PJR curricular, the best approach to gender equity and equality mainstreaming is to develop a curriculum geared toward promoting gender equality and equity within the countries where ALARM operates.
**GERP Objective**

The GEPR curriculum aims to provide a guide for faith actors in East and Central Africa to promote gender equality in peace building, reconciliation, and community development. It focuses on improving the gender equality skills and abilities of women, youth, and church leaders in Kenya, Uganda, Tanzania, and Rwanda, boosting women’s rights advocacy, challenging power structures, understanding church-society relationships, and inspiring social change. The curriculum also promotes meaningful participation, stakeholder involvement, and strengthening churches and faith institutions in promoting exclusivity for women and marginalized groups in leadership and decision-making platforms.

The ALARM GBV prevention and response approach involves understanding gender equality and equity programming concepts, understanding how gender and sex shape societal behaviors, and utilizing gendered concepts in social work practice. It also explores gender-based violence (GBV) and its various forms, causes, predisposing factors, and preventive measures for individuals and society. The curriculum also explores the convergence of gender equality and biblical teachings, highlighting the importance of incorporating gendered concepts in social work practice.

**Context**

Women in northern Uganda have lived complicated, exquisite, and occasionally difficult lives. For a majority of women in northern Uganda, injustice and violence are everyday occurrences. Between the subsequent forced relocation into internally displaced peoples’ (IDP) camps and the bloody, multi-decade guerrilla war commanded by the Lord’s Resistance Army (LRA), where women were raped and young girls were kidnapped as sex slaves. GBV against women persists; in northern Uganda, women have endured horrendous abuse to their bodies and souls. They scream for justice for themselves and an end to the violence.

It is crucial to remember that women in northern Uganda are considerably more than just victims. However, the harsh truth is that women in Uganda have suffered greatly both during and after the conflict. Camp life was harsh and centered mostly on survival. The daily chore of fetching water was feared by women and girls residing in the IDP camps in Uganda, as it carried a risk of sexual assault. The camps were dangerous locations. Peace builders at the international, national, and local levels have failed to adequately protect the most vulnerable members of the society and consider the complex gender dynamics at play in these circumstances.

Violence against women in Uganda was widespread, particularly in internally displaced persons (IDP) camps in the North. Originally established to safeguard the populace of northern Uganda from the LRA, these camps have, instead, become sites of violence many of the women who live in these camps do not feel any more protected from GBV and always feel at risk of such violence. A study by UNFPA Uganda 2021 found that 1 in 2 women experienced some form of GBV with over 4 out of 10 women reporting domestic violence, 3 out of 10 experiencing forced sex with intimate partners, and 1 out of 20 being raped by someone outside their household.

The conflict and mass relocation in northern Uganda have reinforced cultural and social norms that perpetuate violence against women and disrupted traditional mechanisms that contributed to the prevalence of gender-based violence. This dual reinforcement and breakdown of norms has significantly contributed to the prevalence of gender-based violence. Gender-based violence is largely under reported in Uganda, with survivors often facing significant community stigma. Furthermore, Uganda’s culture of impunity and the corrupt police and legal systems limited access to justice for women who choose to report their abuse.

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Achievements/Results

DEVELOPING OF GEPR CURRICULUM

The GEPR project, a multidisciplinary curriculum development initiative by ALARM staff in Burundi, the Democratic Republic of Congo (DRC), Rwanda, Kenya, South Sudan, Sudan, Tanzania, and Uganda developed a gender curriculum for ALARM to guide faith institutions in East and Central Africa. The project began in January 2020 and was completed in phases I and II, with an annual evaluation currently pending. The plan included establishing a Technical Team, mobilizing resources, and identifying a Gender consultant to prepare the Technical Committee for Information Gathering and the writing of the GEPR guide.

During a 5-day workshop, the technical team focused on various aspects of GBV. The technical team recognized that over the past two decades, significant efforts were made to improve women’s and children’s protection, promote gender equality, and prevent GBV. Therefore, the team endeavored to analyze and present best practices, facilitating and planning, implementation, and reprogramming of initiatives, projects, and programs aimed at GBV prevention within the church and faith based institutions. The goal was for the GEPR guide to enhance efficiency and ensure suitability within the implementation context, while also emphasizing the ongoing efforts and resources dedicated to this area. The team analyzed various frameworks, including the Harvard Analytical Framework, Moser Framework, Gender Analysis Matrix, Capacity and Vulnerabilities Analysis Framework, and Women’s Empowerment. Importantly, there was an emphasis on Gender Legal Framework, including the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), which defines gender-based violence as any act that causes physical, sexual, or psychological harm to individuals or groups based on their gender. These include acts like rape, torture, mutilation, sexual slavery, forced impregnation, and murder. The Declaration on the Elimination of Violence against Women (DEVAW) provides a more comprehensive framework on violence against women, covering community, family, and state violence. All these frameworks emphasize that GBV includes threats, coercion, or arbitrary deprivation of liberty, occurring in public or private life.

GEPR PRETEST – PADER DISTRICT NORTH UGANDA CONTEXT

The GEPR curriculum, designed for church leaders and followers in various Christian Ministries, underwent pretests in Uganda to evaluate its applicability and comparability. The diverse age, gender, education level, and occupations of participants impacted the pace, medium of instruction, and inclusive learning strategies.

GBV ISSUES IN PADER

We encountered various issues as we were pretesting the ALARM GEPR Curriculum in Pader district, Northern Uganda. These included diverse understandings of:

- The definitions of SGBV?
- The various contexts under which SGBV occurs?
- The actions that constitutes SGBV?

A number of contextual issues that needed to be taken into consideration to facilitate understanding of SGBV in the community setting are enshrined in the cultural framework of the Pader community and are used by men and some women to frame SGBV. Hence, if programs meant to eradicate SGBV are to have any success at all, they need to make a distinction between popular and scholarly conceptions of sexual assault.

The framework of differentiation was adopted from the works of Mahmoud Mamdani (2018) who emphasized the importance of this dichotomy. He argued that, each development concept such as SGBV, should always be seen from double perspective that can be illustrated using an analogy of a coin with two sides i.e., the way the concept is understood and practiced by the community and the way the scholars, academicians, and development practitioners operationalize the concept pragmatically at community level – searching for the nexus should always be the starting point. This scenario illustrates the controversies that we encountered in Pader.

For example, there was spirited argument put up by men on the notion of marital rape, arguing that, “there is nothing like marital rape in the matrimonial setting since the couple already consented to marriage… Besides the man already owns the woman after paying the bride price, so he has right to sex anytime he wants.”

In relation to physical violence, silencing among men was reported as a common phenomenon. A middle-aged male pastor said, Men said other women beat their husbands but men suffer in silence because they fear being called weak. Culturally the man is viewed as strong and capable of defeating the woman in fights. On the other hand the women argued that they are beaten more compared to men who are beaten by their wives.

Regarding economic violence, it was reported that, most men didn’t want to work but they controlled the family resources. For instance, a woman could be the one taking care of the chicken, goats, pigs and cows by grazing, giving water and food. However, at any time, a man (usually husband) could decide to sell a crop without consulting the woman and use all the money as he likes. In the same manner, a man could be less engaged in farm work, but when crops are harvested, he could take the proceeds from the same of crops and use the money to buy alcohol to consume.

Concerning psychological violence, Women reported being verbally insulted by their husbands. Verbal insults included statements like: “you have bad behaviour like for your mother” These statements were hurtful regardless of whether a woman’s mother was alive or deceased. Additionally, women reported that during clan meetings, they were treated like children, not being allowed to voice their opinions during the proceedings.
Challenges/Constraints

The commencement of the Gender Equality, Partnership and Reconciliation and (GEPR) project, initiated in January 2020, was delayed due to the COVID-19 pandemic. The start of the project was rescheduled hence pushing the completion date to the end of 2023. The end-of-project report was shared with partners. Creating a Technical Team, raising funds, and gathering data to completion were among the challenges faced. To assist the remaining team in developing the curriculum and completing the project, a consultant with expertise in gender equality was hired. The team did not anticipate that certain internal experts would leave during the grant writing process, so they did not budget for the cost of hiring an outside consultant. This made it difficult to fit the consultant into the budget, ultimately resulting in compromises on certain budget items, particularly the curriculum pretesting that was supposed to occur in four countries but only took place in two.

Lessons Learned

The pretest conducted in Pader District, Northern Uganda, brought to light current gender issues and sparked intergenerational discussions on various topics concerning GBV. Subsequently the following valuable lessons were gleaned that could guide future interventions:

• Uganda continues to struggle with gender-based violence, which impedes progress and peace. A multifaceted approach involving the community’s peace builders and faith actors is needed to address this issue.

• To stop discrimination and impunity, gender equity and equality must become normative values. To that end, progressive laws remain necessary.

• Long-term solutions require a deeper comprehension of the violence’s context. In order to address the underlying causes of conflict and deeply ingrained gender stereotypes that support violence, peace builders must examine gender before, during, and after conflict.

• Raising the bar for offenders’ accountability is crucial, but halting this trend will require social interventions at all levels. To promote gender equality, impose severe penalties for interpersonal violence, and maintain peace; gender should be included into leadership roles at all levels and in peacebuilding initiatives as well as community social support systems for victims. Furthermore, a deeper understanding of structural elements of gender discrimination is also necessary.
Conclusion

Women in northern Uganda, as well as globally, are far more than mere victims, and it is crucial that our leadership and peace-building strategies refrain from treating them as such. This should happen against the background of recognizing that the persistent violence that women face hinders their personal advancement, weakens the family and prevents societal progress. To better understand the complex power dynamics and collaborate with communities and our development partners in achieving lasting peace, it is essential for peacebuilders to adopt a gender-sensitive perspective.

TOOLS AND RELATED RESOURCES
Gender Equality, Partnership and Reconciliation training manual

ADDITIONAL INFORMATION
UN Women’s Frameworks and implementation package for preventing violence against women and girls
World Vision’s SGBV Continuum of Care