Strengthening Research and Action on Gender-based Violence in Africa

International Center for Research on Women
Gender-based Violence Prevention Network
South African Medical Research Council

ICRW International Center for Research on Women
where insight and action connect

GBV PREVENTION NETWORK

MRC SOUTH AFRICA

Acknowledgments

Part 1: Introduction

Gender-based violence (GBV) and especially violence against women has gained international recognition as a grave social and human rights concern affecting virtually all societies. Progress in addressing GBV can be attributed in large part to groundbreaking studies, such as the World Health Organization (WHO) Multi-Country Study on Domestic Violence and Women's Health,[1] which provide evidence needed to advocate for strong laws and policies and to develop locally relevant programs. Despite the key role of research in developing GBV prevention policies and programs, research capacity to this end is lagging in many parts of the world.

To address this gap, several regional initiatives have taken on the challenge of strengthening local capacity, particularly among activist organizations, to carry out research on violence against women. The international organizations PATH and WHO produced a manual based on the experience of the multi-country study entitled *Researching Violence against Women: A Practical Guide for Researchers and Activists*. Subsequently, PATH, together with South African Medical Research Council (MRC), developed a two-week training course for researchers, activists, practitioners and policymakers. The course has been offered four times in Africa and twice in Latin America and is carried out in partnership with local universities and regional activist networks, such as the GBV Prevention Network in Africa. More than 120 representatives from over 60 organizations have been trained to date.

The course has been very well received, and many partners reported that the training has increased their motivation and capacity to carry out monitoring and evaluation activities. Still, participants highlighted the need for a more integrated training effort that includes practical experience in conducting research combined with ongoing support during all phases of the research process, from protocol design to results dissemination. Moreover, members of the GBV Prevention Network at a 2006 regional meeting identified strengthening the research capacity of activist nongovernmental organizations (NGOs) in Africa as a key priority for the network.

[1] See http://www.who.int/gender/violence/who_multicountry_study/en/

In response, the International Center for Research on Women (ICRW), the GBV Prevention Network, and MRC developed a program to further strengthen local GBV research capacity among community-based organizations in the Horn, East, and Southern Africa. The three-year program paired local community organizations working to combat violence against women and girls with leading research institutions in the region. The local activists and practitioners were trained to carry out action-oriented, qualitative research and to share findings with policy makers and the GBV community at large.

This report presents the findings and insights gained from the program. Part 2 describes the program's process for selecting and training the participants. Part 3 presents the key findings and recommendations from the research conducted by the participating organizations. Part 4 discusses the program's achievements and lessons that emerged from the initiative.

Overall, our experience shows that partnering violence prevention organizations with research institutions has strengthened the formers' skills to carry out relevant, action research and has helped direct information on violence against women into the hands of those who are best positioned to use it, namely social movements and program implementers. Yet the process is time intensive and care must be taken in clarifying roles and expectations and managing communication among partners. Further investment is needed to support the current group of NGOs in honing their research skills through refresher trainings and to foster partnerships and mentoring between other researchers and activists in the region. This will create a stronger and more diverse base of skilled researchers and practitioners to catalyze action needed to combat violence against women.

WILDAF

Table 1: Participating Organizations

Organization and Location	Mission	Study Title	Mentor Institution(s)
Action for Development (ACFODE), Kampala, Uganda www.acfode.org	To promote women's empowerment, gender equality and equity through advocacy, networking and capacity building of both women and men.	Exploring Access to Justice through Traditional Mechanisms and the Formal Justice System for Women who Experience Violence	Liverpool VCT Care and Treatment, Kenya
Center for Human Rights Advancement (CEHURA), Bundibugyo, Uganda cehura_ug@yahoo.com	To strengthen the capacity of communities and other stake holders in human rights issues through information sharing, training, lobbying, advocacy and legal service support to both rural and urban people.	An Exploratory Study of Bride Price and Domestic Violence in Bundibugyo District, Uganda	South African Medical Research Council
Resources Aimed at the Prevention of Child Abuse and Neglect (RAPCAN), Capetown, South Africa www.rapcan.org.za/home	To ensure that the rights of children are realized by working within a preventive framework toward the protection of children. To build effective prevention and responsive measures relating to child victimization and offending through direct service delivery, capacity building, resource development and dissemination, and advocacy.	Service Responses to the Co-victimization of Mother and Child: Missed Opportunities in the Prevention of Domestic Violence	South African Medical Research Council
Rwanda Women's Network (RWN), Kigali, Rwanda http://rwandawomennetwork.org	To work toward improvement of the socio-economic welfare of women in Rwanda through enhancing their efforts to meet their basic needs.	Exploring Community Perceptions and Women's Experiences of Violence against Women and Use of Services in Bugesera District, Eastern Province, Rwanda	South African Medical Research Council
Women in Law and Development in Africa (WiLDAF), Dar es Salaam, Tanzania www.wildaftanzania.org	To equip women with the necessary knowledge and skills to make them equal competitors, active participants and change agents.	From Campaign to Action: The 16 Days of Activism Campaign in the Prevention of Gender-based Violence	TWIFUNDE Centre for Gender and Development Training and Muhimbili University of Health and Allied Sciences (MUHAS), Tanzania
Youth Net and Counselling (YONECO), Zomba, Malawi http://yoneco.org/	To empower the youth, women, and children, combat the spread of HIV infection, mitigate the impact of AIDS, and promote democracy and human rights for socio-economic development.	Understanding Community Perspectives of Child Sexual Abuse in Malawi	Addis Continental Institute of Public Health (ACIPH), Ethiopia

Part 2: Process and Participants

The program sent out a request for concept papers for GBV-related research via the GBV Prevention Network website and listserves of member organizations. Organizations that participated in the PATH/MRC two-week training course were invited to apply, although all members of the GBV Prevention Network were eligible to submit concept papers. The program's steering committee[2] chose six studies to be funded and implemented from more than 30 submissions. The studies were selected according to pre-determined criteria, including relevance of the subject, institutional capacity and commitment and a plan for dissemination and use of the study results, among others. Each implementation partner was matched with a research institution in the region, depending on the particular skills needed and research topic. The research institutions provided technical assistance and oversight, mentoring, and any additional training needed to implement the research.

Table 1 (left) lists key information about each of the six activist organizations and its study. The organizations are diverse in terms of size, mission, and capacity, focusing on issues ranging from child sexual abuse to bride price, legal rights, and advocacy campaigns. What they all shared was a desire to improve their capacity to engage in research and to use evidence to strengthen their programs and advocacy.

Members of the selected community organizations and their mentors participated in three research training workshops that were held over the course of three years. The workshops took place in Uganda and South Africa, and each one emphasized a particular component of the research process (study design, data analysis and presentation of research findings). The last workshop, held in Cape Town, South Africa in December 2011, provided the organizations the opportunity to present their findings at an international forum, namely the Sexual Violence Research Initiative (SVRI).

Part 3: Study Findings

The six studies address a range of critical topics, including violence survivors' access to justice, the delivery and utilization of services by violence survivors, the relationship between bride price and domestic violence, child sexual abuse, and the outcomes of the 16 Days Campaign to Prevent Gender-based Violence. This information greatly enhances the evidence base that activists and programmers can draw on for the purposes of advocacy and program development.

The following pages present the key findings from each of the six studies and the recommendations that emerged from the research. To access the full reports visit the organizations' website or contact them directly.

[2] The steering committee comprised representatives from ICRW, GBV Prevention Network, South African Medical Research Council, Liverpool VCT Care and Treatment, Addis Continental Institute of Public Health and Muhimbili University.

Exploring Access to Justice through Traditional Mechanisms and the Formal Justice System for Women who Experience Violence

Action for Development (ACFODE)
Liverpool VCT Care and Treatment (LVCT)

Violence against women (VAW) is a serious problem in Uganda: nearly 60 percent of women there report having been subject to physical or sexual violence by an intimate partner. While several studies have examined the prevalence, causes, effects and forms of violence, little is known about how survivors pursue justice and whether their needs are served.

To address this knowledge gap, ACFODE conducted a qualitative study between August 2010 and August 2011 to explore women's access to justice through traditional mechanisms and the formal justice system. A total of 61 individual interviews were conducted with police officers, magistrates, local council leaders, health personnel, clan leaders, religious leaders and aunts. In addition, eight focus group discussions were conducted: three with male community members, three with female community members and two with female survivors of violence. The study took place in two sub counties in two districts in western and northern Uganda.

Two Systems of Justice

There are two systems of justice used by women who experience violence: traditional justice mechanisms and the formal justice system. Traditional justice mechanisms are governed by traditional law. Rather than following formal statutes, traditional mechanisms operate on the principle of "natural justice" and do not systematically follow set procedures. Though not formally recognized by the country's legal system, the decision makers in the traditional system—such as clan leaders, religious leaders, parents and paternal aunts—are highly respected.

The formal justice system includes all mechanisms for redress that have been established under Ugandan law. This system has established procedures for adjudication and appeal.

Key Findings

Overall, the traditional justice system is respected, accessible and emphasizes mediation for addressing violence. However, the system may be biased against women survivors.

Within the traditional justice system, the tendency in VAW cases is to give the survivor and perpetrator an opportunity to be heard, to consider their mistakes and to reconcile. This system emphasizes mediation and reconciliation, even when a survivor's life may be at risk.

Clan leaders:
Clan leaders are social cultural leaders who are united by actual or perceived kinship. They make decisions, settle disputes and help the people they lead to have a sense of belonging and ownership. Study participants agree that they are highly respected members of the community who are rarely corrupt and generally transparent. However, when questioned, some women complained of bias when adjudicating a case. One 43-year-old survivor recounts:

"Sometimes the services are not good especially if it's the clan leaders who have resolved the case. Clan elders are biased; they always support their son. Judgments are in favor of the man not the woman; they cover up for the man and then the woman ends up leaving for her parent's home if she is lucky, if not she is forced to go back to the abusive relationship."

Another woman points out a clear conflict of interest that worked against her case:

"I went once to the clan elders to report my case but when I realized that what they said was of no help to me, I gave up and never sought help from anywhere else. They were supporting my husband because he's their son."

Religious leaders:

The religious leaders were not referred to as often as a justice mechanism used by women as the clan leaders, aunts and parents. Many women note that religious leaders tend to promote reconciliation regardless of the danger this poses to women in violent relationships.

Parents:

Parents are easily accessible, friendly and free. The parents are among the most widely used traditional mechanisms of justice for the survivors of violence. Sometimes parents are strong advocates for their daughters, as was the case for one 24-year-old respondent:

"My husband was arrested…by the police in Lira Central Police Station; my parents are the ones who made the follow up that led to his arrest."

However, as with others managing VAW cases in the traditional justice system, parents lack power to enforce sanctions. Therefore violence can continue without consequence, as illustrated by this 42-year-old survivor:

"Sometimes my father would call other relatives to settle our case and my husband would be fined goats and gourds of beer but he would beat me again before reaching home. My father-in-law would also try to settle our cases but in vain. My husband would never respect anybody. I eventually decided to leave him when I realized I was going to die. He married another woman who died but I suspect it was the beatings that killed her."

Parents' willingness to help is sometimes constrained by their fear that they will be forced to refund bride price. In these cases parents typically push their daughter to reconcile with the perpetrator even if she is in danger. Many women also find that in-laws are of limited help, as they generally side with their son.

Paternal aunts:

Paternal aunts are highly respected in Uganda. Like religious leaders and parents, they promote reconciliation and advise the couples, but lack a formal set of procedures. And as with the other arbitrators, aunts lack power to enforce punishment of the culprits. In fact, offenders often repeat the violent attacks on their wives even in the presence of the arbitrator, as happened with this 65-year-old aunt:

"Some husbands refuse to be talked to and become even more violent to their wives in the process. I am an old woman so some men disrespect me. They even beat their wives in my presence while trying to reconcile them or on their way home after talking to them. Yet I am weak and I cannot stop them."

The formal justice system offers redress in cases of violence but women face many barriers in accessing justice.

Judiciary:

Respondents rarely mention the judicial courts (such as the Magistrate's courts, High court, Court of Appeal, Supreme Court and the Human Rights Commission) as mechanisms to access justice by women survivors. Cost is one reason. The formal legal system comes with a number of expenses that makes this option impractical or totally inaccessible for most women in this study. A person taking a case to court must cover his/her own transport costs as well as the costs for the transport and accommodation of witnesses and the medical examination. The costs of litigation (including procuring the services of a lawyer) or filing a complaint are also unaffordable. One judge expresses frustration with the system's built-in bias against poor women:

"…women who cannot afford the services of a lawyer are usually intimidated and challenged by the husband's lawyer. Sometimes we really feel bad when we see a woman losing the case just because she has failed to ask or cross examine the lawyer, or has not brought out clearly some facts, but we cannot do much since we are supposed to be neutral."

Another barrier is legal complexity. The language used in courts is complicated and intimidating, thus discouraging survivors from choosing this route of justice. The procedures involved are cumbersome and cannot often be understood by poor women who lack legal representation. Women's knowledge about the law and procedures is also limited, further inhibiting their ability to seek justice through the formal system.

Local Council Courts (LCCs):

Most respondents report that LCCs are the first reporting places by survivors of violence. The LCCs are nearer to the poor and their court procedures are relatively informal. The identified strengths of the LCCs are that they are close to the people, they use local languages and they listen to all cases. However, the fees associated with taking a case to court (in addition to transportation expenses) are still unaffordable for poor women, who therefore simply *"do not report the cases to LCC,"* in the words of a male respondent.

Police:

Most participants complain about the partiality of the police while handling cases of violence reported by women and note that they will favor whoever pays more money in the form of a bribe. Also discouraging is the long distance to police stations for many women, requiring funds for transport that in most cases they do not have.

The police themselves report challenges in handling VAW cases due to inadequate government support for their services. All the police officers interviewed point to low levels of resources and motivation. As one police officer notes:

"I need an assistant…or even two of them…. We need a motorcycle to help us reach out and arrest criminals in time. We are supposed to detain suspects for 48 hours only but we fail to produce them in court due to lack of transport facilities. I am not able to gather witnesses…."

Finally, survivors often fear retaliation from the perpetrators and their relatives if they report their spouse to the police. According to one woman, *"If you report to police the relatives will harass you and the husband will chase you out of the home."* The fear of such an outcome often leads women to drop the case.

Conclusions and Recommendations

Overall, traditional mechanisms are more accessible to women with respect to distance, expense, and approachability. However, the lack of standard protocol for handling violence cases, coupled with the absence of accountability for the guilty party, renders this form of justice less than satisfactory for women. Indeed, some women say they sought the services of the formal justice system because they feel the traditional system is biased in favor of men. Yet at the same time, the findings reveal that survivors of violence are both frustrated with and lack confidence in the formal mechanisms, describing obstacles ranging from expense, to convoluted procedures and lengthy delays in pursuing a case, to an overall lack of "user-friendliness." These and other factors discourage women from pursuing justice through formal channels. For those who make the initial attempt, many eventually drop their cases.

To address these challenges, the following actions are recommended:

- Improve staffing and facilitation within the formal justice system.
- Create an arbitration mechanism within the judiciary and the police to enable parties to settle their complaints out of court.
- Advocate against the refund of bride price in case the survivor seeks separation from the offender.
- Educate women and the community about domestic violence laws (including the Domestic Violence Act), court procedures and women's rights in accessing justice.
- Establish legal aid clinics and shelters for survivors.
- Advocate for the inclusion of women in clan leadership to enable them to participate in decision making within the clan system.
- Advocate for the establishment of one stop centers for survivors of violence.

An Exploratory Study of Bride Price and Domestic Violence in Bundibugyo District, Uganda

Center for Human Rights Advancement (CEHURA)
South African Medical Research Council

Bride price is a common cultural practice in many African countries. Typically, bride price consists of a contract where material items (often cattle or other animals) or money are paid by the groom to the bride's family in exchange for the bride, her labor and her capacity to produce children. While the practice is widely accepted and serves the purpose of validating customary marriages, a number of negative ramifications are associated with bride price, including violence against women.

CEHURA conducted a qualitative study to explore bride price practice and its links to conflict and domestic violence in three communities in Bundibugyo district in Western Uganda. The study's aim was to inform the development of community-based interventions to mitigate the negative impacts of bride price. Using focus group discussions and individual in-depth interviews, the researchers collected data from men, women, community and clan leaders and service providers on community perceptions and views of the custom, and its relationship with domestic violence. More than 200 people participated in the study. Feedback dialogues were held at the CEHURA office with key stakeholders to discuss the research findings and develop strategies for action.

Key Findings

Bride price is a deeply embedded cultural practice in the study sites, yet support for the practice among young people may be waning.

Many participants note that bride price is considered a *"necessary"* practice. A senior government official says that *"it is culturally wrong to take someone's daughter without paying bride price."* For marriages to be solemnized and recognized a bride price has to be paid first. Yet many of the young participants do not agree on the bride price culture and say, *"Today things are changing."*

Establishing bride price is a bargaining process in which young women have little or no involvement.

Terms such as *"negotiation and agreement"* between the two sets of relatives is most often used to explain the process. A young woman says:

"My parents (and relatives) asked for 2.5 million shillings [US$270] and 12 goats. My in-laws said it was too much for them to afford. They bargained and both agreed they would pay 1.8 million shillings and six goats."

It is also evident that young women are not involved in the negotiations process. Although many say that the agreement can only be concluded if she agrees on the acceptance of the husband, she does not have any involvement in the acceptance of the bride price.

Many factors appear to affect the decisions made during negotiations. The education and the *"background"* of the girl are deciding factors, where *"background"* refers to the financial status of the girl's family in the community.

Many women value the practice of bride price while others view it as exploiting women.

Women use such words as *"respect," "security"* and *"stability"* in association with the practice. For some of the young women interviewed bride price is linked to the wife's status and her relationship to the husband's family. A recently married woman says, *"Women accept it very much because if you are not paid you are looked at as a house girl to that family."*

On the other hand, some informants feel that the payment of bride price exploits women. According to a clan leader, *"It enslaves the woman … disrespects her because the woman was bought through bride price."* A religious leader believes that bride price is a human rights offense:

"It is not right to put human beings on the commercial market, bargain for them and when one is fed up, dump them leaving the woman psychologically tortured. Women lose their dignity, have to do endless hard labor—and then failure to produce children becomes a big crime once you have been paid for."

Bride price places an economic burden on men and couples.

Many refer to the commercialization of the bride price process and that low income men are particularly affected by the rising costs. Young men talk about how bride price affects them financially: *"We suffer so much because we pay a lot of money."* Another calls it *"financial mistreatment."* A government official comments:

"It has resulted in poverty since it is costly and sometimes boys are left with nothing after the payment of bride price, and therefore suffer after marriage because all the money that would be used to feed the family was used to marry."

Inability to pay bride price causes loss of respect for both men and women.

Loss of respect is a common consequence of the inability to pay bride price. A man is reported to lose respect if he is not able to pay and a man may also disrespect the girl's parents if they make huge economic demands. Disrespect for the women in a marriage where bride price is not paid also occurs because such women are considered to be living *"in prostitution."* Similarly the husband is not considered a part of the family or a son-in-law. Young men also speak about feeling humiliated when not able to pay bride price. Men's manhood is questioned, even by their wives, if they are not able to pay. A young man says his wife used his non-payment to humiliate him when she asked, *"What have you paid for me, are you a man?"*

Nonpayment of bride price, heavy debt from paying bride price and the perception of women as property contribute to marital conflict.

Continuous conflict, which can turn violent, between the man and his wife due to his non-payment of bride price can lead to divorce. Women are said to be feel *"unstable"* in their relationships if bride price has not been paid. A clan leader says bride price *"leads to frequent divorces… which lead to unstable families."*

Starting a marriage in heavy debt also leads to conflict between the man and the woman, which can precipitate violence. Additionally the perception that a man has been *"overcharged"* could lead to numerous conflicts with his wife. A perception of being overcharged also creates conflict between the bride and her in-laws. A participant says, *"The family side of the man eventually hates the woman because of overcharging of the bride price."* Disrespect thus emerges on both sides with the woman's family disrespecting the man if the price is not paid and the man's family disrespecting the wife and her family if the price is considered too high.

Men's sense of ownership of women from paying bride price also seeds conflict. A young woman says that bride price:

"…wipes off the freedom of women and gives the man room to decide on what he wants to do with his life like cheating on the woman since they think that women are mere property bought off in the markets and if you complain the man will beat you seriously."

Most participants support improving the institution of bride price rather than abolishing it.

Clan leaders offer many suggestions on how to improve the *"institution"* of bride price. Most do not support abolishing the practice because women may lose respect. One religious leader suggests that the term *"bride price"* should be replaced with the term *"dowry"* because the former term is demeaning to women. It is recommended that there should be constant sensitization about why bride price is necessary and the important role that religious leaders could play in communicating this message. Others suggest that there should be mutual understanding between the parties during the bargaining process.

Clan leaders suggest that going back to the original price and improving relationships between parents and children is important. Another frequent suggestion is that bride price must be reduced to a more affordable level. Almost all the leaders mention educating communities about the traditional meaning of bride price. As one leader explains, *"Communities should be sensitized on the value of bride price according to the culture—what it was meant for—otherwise it has since lost meaning."*

Conclusions

The findings show that bride price is a widely accepted practice that brings families together and cements relationships. But the intersection among bride price, economic and social factors, and conflict which can lead to domestic violence is a recurring theme. Although bride price is not the only factor that fuels violence against women, many participants recognize it as a contributing factor. Additionally, many complain about the changes to the practice which are linked to economic issues. Widespread recognition that bride price could result in or exacerbate marital conflict, exploitation of women, and increasing economic burden on men provides an opportunity for organizations such as CEHURA to engage in education, awareness-raising, and community level discussion and advocacy on the issue.

Service Responses to the Co-victimization of Mother and Child: Missed Opportunities in the Prevention of Domestic Violence

Resources Aimed at the Prevention of Child Abuse and Neglect (RAPCAN)
South African Medical Research Council

Domestic violence is major problem in South Africa. Evidence shows that when children are exposed to violence they learn that it is normal and that conflicts are resolved through the use of violence. To prevent the intergenerational transmission of violence it is important that both services and prevention programs understand the pathways to violence perpetration and victimization. Coordination between service providers who assist in cases of child abuse and domestic violence is also important.

This study explores whether services address the co-victimization of mothers and children in abusive households in rural, peri-urban and urban settings in two South African provinces. Three focus group sessions were held with members of community-based organizations to learn about the quality, availability and accessibility of services. A separate focus group was held with state actors from social services, education, justice and the police. In addition, 21 individuals representing government, traditional leadership and civil society were interviewed about their views and experiences around domestic violence. The South African Medical Research Council provided ethical approval for the study, which was conducted from May-October 2009.

Key Findings

Domestic violence is often perceived as "normal," contributing to the intergenerational transmission of violence.

Study participants recognize that exposure to domestic violence in childhood is linked to domestic violence in adulthood, either as a victim or a perpetrator. A civil society individual and government representative, respectively, explain:

"[Abuse histories are]...very prevalent. A lot of the women that come here witnessed their mothers being abused when they were children, or were abused themselves as children."

"One thing that we notice is that where a woman or a man was brought up in a violent home...sometimes it does happen that a woman tends to seek out a man that also abuses. And it seems to be a pattern… where you just keep on jumping into situations or relationships where there is violence."

Study participants also note that adults often perceive violence as normal as a result of their own experiences growing up. Additionally, participants identify some disciplinary practices as perpetuating the cycle of violence.

Service providers often fail to take into account the gendered power imbalances women face and the role of these imbalances in fostering violent relationships.

Only a few service providers show an understanding of the realities of patriarchy and gender inequalities. Most blame women for their abuse or for remaining in abusive relationships. Some also say that women find themselves in difficult situations because they are *"easy."* Such views may limit approaches to addressing abuse, and may leave the actual underlying causes of gender-related violence unaddressed. These views also suggest a bias that relieves males of any responsibility in relationships. This is especially true in the context of parenting skills programs. Participants speak about the female rather than the male parent, suggesting that the target for these interventions should only be the female caregiver. Yet, both parents in abusive relationships may engage in violent disciplining of their children but for varying reasons. Men may be violent as an extension of their exercise of power and control over their children and partner. When mothers are subject to severe physical, or emotional and mental abuse, they often use harsh physical and verbally abusive forms of discipline toward their own children. A civil society member explains how a mother's accumulated stress can have an adverse impact on her children:

"To be fair to the mothers, a lot of them don't have the emotional energy to really deal with their children as they should."

The complex relationship between an abused mother and the abused and neglected child can lead to fallacious perceptions of "problem children" or "abusive mothers." Thus service providers need to understand the complexities involved in such relationships, where abusive caregivers often have problems coping with need, dependence, and vulnerability in themselves and others.

Another area where gender power dynamics play a role is in family group conferencing (FGC). FGC is a process in which civil society or state service providers engage family members in resolving family conflicts, including domestic violence. A civil society member explains:

"When we do the family group conferencing, all the family members are there...so we just allow the environment where each and every person is able to express their feelings freely...even if the father keeps staring at the mother as she speaks."

Though addressing domestic violence as a "family matter" responds to the strong cultural and communal bonds within South African communities, FGC can be detrimental if service providers lack an understanding or ignore the patriarchal power dynamic in households and the subordination of victims. Participants clearly state that FGC is an inappropriate measure in cases of child abuse, and due to similar dynamics, it falls short in cases of domestic violence.

There are not adequate services for the co-victims of domestic violence.

Across the different sites, participants note the lack of adequate and high quality domestic violence services, particularly for children. For example, there are no shelters in the rural study area, and the closest facility is three hours away by car. While there are more facilities in the urban area (including a one-stop center for domestic violence survivors and shelters), these often struggle to meet the demand for services by older children. Participants identify only one shelter for abused women in the peri-urban site. However, most women do not know where it is. Women in need thus end up at night shelters for homeless people, but these do not accommodate children. In addition, some shelters do not take in women who do not have a protection order or who do not show physical signs of abuse. This can actually lead to further victimization of women, as this civil society member explains:

"Many female victims are abused at the shelter because they are identified as easy targets. I will hear that the woman say that [other shelter tenants] always think that we [the women] are bad women because we will just sleep with any man."

In the peri-urban area, participants state that there are no specific interventions for child survivors of domestic violence. The shelter for street children does not work directly with victims of domestic violence, but, as this civil society member explains, domestic violence plays a large part in the lives of its users:

"…when the children tell these stories, those [referring to domestic violence] are the reasons why they have left their homes."

Similarly, in the urban site, participants cite the lack of counseling for children who are co-victims of domestic abuse. One civil society member observes:

"... I can say it right now this has been one of the big gaps—counseling services for children. We have looked—there really does not seem to be organizations that are offering that kind of a service unless they are connected to a university like the Childline clinic or the Red Cross child and Family Clinic, and they have huge waiting lists."

Bottlenecks in counseling services are attributed to difficulties in accessing funding, as well as challenges in recruiting skilled service providers. In some instances, organizations get around the challenges, such as by using psychology and social work students. But as a civil society member points out, these responses still do not fully address child victimization:

"Ideally just as every woman who comes into the shelter has an assessment from the social worker, sees the social worker once a week for counseling, and has a support group, every child who comes with their mom ought to be assessed with our childcare worker..."

A focus group of government representatives reveals frustration with their limitations as well:

"We are inundated with a lot of these cases. We are one social worker per 18 schools…. We are all doing crisis management. So if there is someone here we see them, they leave the door, there is someone else waiting. There is no follow-up, and no proper service to begin with."

Conclusions and Recommendations

From a service provider perspective, the study supports the positive relationship between exposure to domestic violence in childhood and later victimization and/or perpetration. It also highlights that service providers lack a gendered understanding of domestic violence, which tends to undermine the quality and effectiveness of services for women survivors. Moreover, specialized psycho-social services for survivors of domestic violence, particularly children, are limited. These gaps call attention to the need to strengthen systems and sectoral collaboration in assessing and addressing domestic violence that impacts women and children. The following recommendations emerge from the study:

Invest in multisectoral anti-violence programs and policies for the long term:
A greater focus on addressing abuse-related trauma in children is also important for breaking the intergenerational cycle of violence.

Promote attitudinal shifts:
Help individuals think through alternatives to violence and create informal and formal systems of accountability and support.

Reform systems:
Train actors in the health, legal/justice, security, education and social development sectors to prevent, detect, monitor and address violence, particularly around early intervention.

Implement anti-violence policies and programs from a gender perspective:
This should take into account the different risks facing girls and boys and should emphasize the empowerment and capacity building of both girls and boys.

Implement positive parenting training at the school level:
Such training should promote the involvement of men and women in caregiving.

Exploring Community Perceptions and Women's Experiences of Violence against Women and Use of Services in Bugesera District, Eastern Province, Rwanda

Rwanda Women's Network (RWN)
South African Medical Research Council

Since 1994, most studies on gender-based violence (GBV) in Rwanda have been in the context of sexual violence that occurred during and after the genocide. While important, there is also the need to better understand and address intimate partner violence (IPV), which numerous studies suggest is a pervasive feature in the lives of Rwandan women.

This study sought to generate information about sources of support for women who experience IPV and the extent to which they use these services. This information will help RWN and other service providers expand and strengthen their strategies to prevent and respond to violence against women. This qualitative study was conducted in the District of Bugesera, an area severely affected by the 1994 genocide. Semi-structured in-depth interviews and focus group discussions were conducted with women IPV survivors, community members and service providers (police, health, community leaders, local authorities, GBV committees, NGOs and mediators). The study followed established ethical procedures for doing research on violence against women.

Key Findings

Women are experiencing the full spectrum of IPV.

Women survivors report having experienced physical, sexual, psychological and economic violence. Many survivors have been beaten. All the women interviewed have experienced sexual violence and service providers corroborate these reports, saying it is a common occurrence. Psychological violence is frequent and often intertwined with infidelity, abandonment and economic abuse. A 28-year-old woman with two children summarizes her experience saying that the violence entailed her husband *"cheating on me, beating me and also staying out of the home for some time."* Another says, *"He refuses to provide food for the family and spends much time drinking and comes back home late and ends up beating me."* All of the violence reported by the women survivors occurred within the context of marriage.

Women's limited access to, ownership and control of land play a role in their experience of violence. This most often occurs when women attempt to claim their *Umunani*—share of property from parents to children upon reaching adulthood. A 62-year-old disabled woman believes that her loss of land created problems in her marriage. She says:

"After hearing that I am denied land from my family, my husband became angry and started telling me that he will not continue to provide for me, that even my family has abandoned me. Life started to become difficult for me."

Though study participants cite many sources of support for victims of violence, the utility of these support systems is inconsistent.

All participants in the study agree that local leaders in the villages, police, hospitals and local service providers contribute to assisting women violence survivors. Services include provision of information, training, legal and financial aid and individual, family and group counseling. Women, community members and service providers also cite informal support structures, such as families and neighbors (particularly older married women), who offer assistance ranging from advice and emotional support to first aid for injuries to offers of temporary shelter.

As a health center representative explains:

"To me, I feel the first person to intervene is the neighbor because he/she is the one whom you will call at night and he comes, he is the one who knows you, the one [with] whom you share everything and also they are the ones who can provide firsthand information on what happened."

One woman explains how her neighbors rallied to support her in the face of abuse:

"I used to seek advice from some of the women who were my neighbors and they would comfort me telling me that it's life and later they gave me some start-up capital and I started selling some food stuffs in the market."

However, the ability to help women is ultimately limited due to a number of factors, including enforcement. Advice and proposed resolutions to conflicts from well intended neighbors and local leaders are limited in effectiveness because in reality, no one can enforce the husband's promises and commitments. In fact, mediation efforts can backfire, as in this one woman's case:

"He pretends to have heard what they [neighbors] advised him and [says he is] ready to change but as soon as they leave, he would then do worse."

Also, while most participants cite family as the first source to turn to for help in cases of abuse, this option is generally of little use for women, who are often told to bear the violence. One woman says that her mother-in-law *"consoled"* her by telling her that *"all married people experience this."* Some women do not even have the support of family, having lost immediate and extended family members to the genocide.

Local leaders admit to not being able to help all women, and some of the women corroborate this. One woman recounts that:

"They [local leaders] would call him and advise him and he pleaded that he will never do it again. But still no change and after their departure, he could …tell me to continue reporting… and that even the police don't keep prisoners forever, they take them and later free them."

Both informal and formal support networks eventually show signs of strain with neighbors and local leaders alike often growing weary of giving assistance. As one woman explains about the food and shelter she received, *"[People] used to*

say, 'how long do we have to go on assisting her?'" Another woman notes, *"The local leaders also became tired of our conflicts and asked me whether I could take the children to my parents and find other ways of surviving."*

Financial, cultural and logistical factors inhibit women from seeking assistance.

Economic dependence on their husbands appears to be one of the main reasons women endure violence. For most women, the lost income that results if their husbands are in jail is too high a cost for a cessation of abuse. A 30-year-old woman reports that even though her husband treats her very badly, she is reluctant to report him because she believes this would only make her life worse, as she depends on him to support her and her children. She simply explains, *"I do not know how we can survive without him."*

Financial constraints also limit women's ability to seek medical assistance. Although most people have access to health insurance, abused women may find it difficult to make contributions to the system. Payment is then expected for all health care services. A woman whose arm was broken by her husband explains *"At the hospital I was charged for the check up. You can imagine in that situation I didn't have money."*

Pursuit of justice through the legal system also is cost prohibitive for many women, as women putting forward a legal claim are held responsible for legal fees that are only reimbursed if she wins the case—a risk that most women literally cannot afford to take.

The Rwandan culture of keeping family affairs private is another key barrier to reporting abuse. As one woman explains, *"It's not good to reveal your private affairs to anyone."* Another comments that *"he will complain that you exposed him [and will ask] 'what kind of wife are you who exposes home secrets?'"* Many women report not wanting their husbands to go to jail because this is effectively a public declaration of their private affairs. As a service provider explains: *"They fear what other people will say when they hear that she reported her husband….*

So in most cases even neighbors and families tend to discourage women [from speaking out]."

From a logistical perspective, service providers mention a number of obstacles that prohibit women from seeking and/or receiving needed assistance, such as lack of transport to take victims to the hospital, long distances between villages and limited health personnel to attend to survivors.

Finally, there is some sense of futility when trying to work within the system's rules and regulations. For example, several participants note that men often can simply bribe the police and be released. According to one woman: *"A neighbor of mine… is always beaten by the husband and whenever she reports and they jail him, he bribes the leaders and is released."*

Many women point out the limitations of legal recourse, such as jail for offenders. As one woman recounts:

"I always told him that if he beats me again I will report him and he would tell me, 'Where are you going to report me? To the police? Go ahead and report, they will just jail me for some days and release me.' So I gave up reporting him."

Another woman gave up the prospect of obtaining assistance from her local leader *"because that village leader was a best friend to my husband; they used to share hemp and other drugs. I decided to leave this."*

Conclusions and Recommendations

This study fills an important gap in the evidence base by documenting women's experiences of violence in Bugesera District and what types of assistance they seek in response to the abuse. Despite the many challenges, women do seek help, generally in the form of emotional support and financial assistance to gain economic independence. Efforts to provide assistance by community members, local leaders, police and hospitals are also encouraging but financial dependence on husbands, the Rwandan culture of keeping family matters

private and supply barriers limiting access to health services create barriers for women. Further, instances of corruption of police and local authorities, the difficulty of enforcement, and the long and expensive process of gaining access to justice are important obstacles to women's access to justice.

Recommendations for RWN and other Civil Society Organizations

- Continue efforts in raising awareness among and training of both men and women around human rights with a specific focus on women's rights.
- Provide space for women for psychosocial support and solidarity groups as a means to provide counseling, promote mutual support and to learn from each other's experiences, as well as to foster self-help groups in support of women's economic independence.
- Strengthen legal aid programs with women's associations.

Recommendations for Government and Development Partners

- Periodically review laws to ensure that they provide adequate protection of Rwandan women.
- Train and raise awareness of community leaders to carry out campaigns at the community level that promote shifts in perceptions and practices that foster violence against women.
- Ensure adequate resources to all government structures to ensure women's protection and safety.
- Strengthen dialogue between government and civil society on the issue of IPV/GBV.
- Include psychosocial support and mental health care as a critical aspect in the provision of assistance for women survivors.
- Conduct awareness raising campaigns on women's rights and gender equality to give added value to and ensure the intent of policies and laws.

From Campaign to Action: The 16 Days of Activism Campaign in the Prevention of Gender-based Violence

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TWIFUNDE Centre for Learning
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The annual 16 Days of Activism Campaign first started in Tanzania in 1996 in response to the pervasiveness of gender-based violence (GBV) in the country. Coordinated by WiLDAF, the campaign brings together civil society organizations, development partners and government agencies to mount a range of GBV awareness-raising activities, such as dramas, exhibitions, presentations and discussions, and marching in the streets. Though the campaign is into its 12th year, little is known about the partners' perceptions of the campaign. Such information is important for strengthening the organization, implementation and impact of campaign activities.

WiLDAF conducted a study to understand the extent to which the campaign has catalyzed activism and responses around the prevention of violence against women. The researchers collected qualitative data from 41 respondents from three regions in the country: Dar es Salaam, Mwanza, and Kilimanjaro. The respondents were drawn purposefully from selected campaign partners–NGOs, community groups and government agencies–that address GBV and that have participated in the 16 Days Campaign for the past two years. A total of four focus group discussions, 13 in-depth interviews and five key informant interviews were conducted. The study took place from April 2010-January 2011.

Key Findings

The 16 Days Campaign generates a high level of involvement by partners and now engages more men than in the past.

From the planning to the implementation stage, partners are highly engaged in the 16 Days Campaign. The most striking change in the last two years is the shift from participants in campaign activities being predominantly female to being both male and female. As this female respondent explains:

"…In the past we thought that these issues of fighting against discrimination and violence were for women, but now things are different; even men participate because they are discriminated or affected by the gender based violence as well. Now they are our supporters in helping us fight gender based violence…."

The 16 Days Campaign contributes to improved awareness of and responses to GBV.

Most respondents state that the campaign has enabled communities to become aware of GBV issues. One female respondent observes:

"…First of all the awareness itself of understanding the gender-based violence in the society, its effects, how to report if there are incidents of violence and where the survivors can get assistance …It is the campaign that helps the community to know all about this, for example events or incidents that people witness is one way of making the society understand the effect of GBV…."

Respondents cite other benefits of the campaign, including popularizing their GBV work, using the campaign as a mechanism to provide services, learning from their fellow organizations, and expanding their networks to include non governmental and governmental actors. One male respondent explains how the campaign has benefited his work:

"…the campaign has resulted in great gain and benefits in that it helps us to meet with various stakeholders who deal with these issues of human rights and gender-based violence. And I have met with many organizations, more than three, and I have come to know many people. …so the first point is that it has established for us a wide network…"

Survivors' access to services has increased as a ripple effect from the 16 Days Campaign.

Respondents report an increase in the utilization of services by survivors as an outcome of campaign activities. As explained by this female respondent, *"We found that the majority of our clients have come to know our services and where they can access other such services through the various announcements made [during the campaign]…."* Respondents also cite an increase in the reporting of incidents of GBV as a result of greater promotion and availability of services, particularly legal recourse and referrals.

Challenges to the 16 Days Campaign are that it has been urban-centered, has had minimal cooperation from local government and is dependent on donor funding.

Urban-centered campaigns generally fail to reach rural areas where the need may be greater to participate, experience and learn from campaign activities. One male respondent explains the need to broaden the campaign's geographic scope:

"… we have been holding these campaigns mainly in urban settings but we now think it is important for such campaigns to move to rural areas, where the incidence of gender-based violence is higher; and also the cost of operating the campaign is much lower…"

Government participation has been limited to high profile positions, with local government leaders who are closer to communities playing less of a role. This is particularly detrimental given their role in handling cases, as noted by this female respondent:

"…It is true the Prime Minister has been coming, but personally I would have wished some other groups of leaders to also turn up in good numbers. For example, District Development Officers, Ward Social Workers and also if Ward Executive Officer were involved in good numbers especially as they are the ones who handle over 90% of all GBV cases in their areas of leadership…"

Finally, the campaign is dependent on donor funding. While the budgetary discussions have been open, sometimes new budgets need to be calculated to reflect the availability of resources. For some partners this has been problematic, especially when budgetary constraints mean a cut in their activities.

The campaign theme and communications materials are useful and applicable, but the messages should be shorter and catchier.

Each year the national theme is adopted from the global theme, as well as the regional theme for the East and Horn of Africa set by the GBV Prevention Network. All zones in the country are required to adopt the national theme. Overall, respondents report that the theme and accompanying materials are relevant and useful, but that the underlying messages should be more precise and engaging so that they are easier to communicate.

Transparency in the planning and coordination process gives participating organizations a sense of ownership and avoids duplication of effort.

Most respondents say that planning meetings help in the division of roles and responsibilities among the network partners and avoid duplication of efforts. They also point out the sense of ownership they feel in carrying out the campaign, as observed by this female respondent:

"…There is a sense of ownership among all of us and not WiLDAF themselves. We see that 16 Days is like our baby even when we sit there and supervise a certain activity…."

This reflects WiLDAF's deliberate attempt to make the planning and implementation processes participatory, transparent and meaningful to the organizations as they carry out local activities in addition to what is already planned nationally.

Conclusions and Recommendations

The 16 Days of Activism Campaign against Gender Violence has catalyzed an array of opportunities to promote and implement GBV prevention and response strategies. The campaign has made GBV-related work more efficient by creating an interface between government and nongovernmental actions and, more generally, establishing a platform for GBV actors to network. It also encourages new partners to engage in GBV-related work, increases community awareness of GBV and provides a mechanism for the provision of GBV-related services. Joint pre-campaign activities accord ownership and transparency and create synergy for post-campaign GBV work. To be more effective, catchy and shorter messages need to be developed and the involvement of local leaders in the campaign needs to be increased. Other recommendations are as follows:

- More rigorous research is needed to determine the campaign's outcomes on community stakeholders' GBV-related knowledge, attitudes and practices.
- The government should build on its increasing engagement in the campaign by formally recognizing the International Day on Violence against Women and linking the 16 Days of Activism Campaign with other national events such as National HIV/AIDS Day.
- Local government authorities should include their engagement in the 16 Days of Activism Campaign in their yearly action plans and budgeting to ensure roll out of the campaign in rural communities.
- National and zonal coordinators should make deliberate efforts to ensure that more GBV prevention partners participate in campaign activities to facilitate the campaign having a more positive influence on their programs.

Understanding Community Perspectives of Child Sexual Abuse in Malawi

Youth Net and Counselling (YONECO)
Addis Continental Institute of Public Health (ACIPH)

Child sexual abuse is a global public health concern. The World Health Organization defines child sexual abuse as *"the involvement of a child in sexual activity that he or she does not fully comprehend, is unable to give informed consent to, or for which the child is not developmentally prepared and cannot give consent, or that violates the laws or social taboos of society."*

YONECO, in collaboration with ACIPH, conducted a study to understand the perspectives of child sexual abuse among community members and service providers. The study took place in three districts in southern Malawi where YONECO operates. A total of 866 individuals, 18 years and older, were surveyed (595 women and 271 men). In addition, the study team conducted 30 interviews with police, social and health services providers, and community leaders, as well as 12 focus group discussions (FGDs) with community members (adolescent and adult men and women). All respondents provided informed consent prior to participation in the study.

Key Findings

Awareness of child sexual abuse is high.

About 85 percent of survey respondents have heard of child sexual abuse. Nearly two-thirds of those who have heard of child sexual abuse say it occurs in their community. Of these, almost half say they know of a sexually abused child, and in almost all of these cases, this child has experienced penetrative sexual intercourse. According to an FGD participant:

"Child sexual abuse happens usually when a child is on the way somewhere, going to hospital or to the market ... It happens even at household level, fathers can defile or rape their children when their mother is away. Sometimes at the river when they are bathing, sometimes a man just comes from nowhere and forces the girl to have sex with him."

The most recognized forms of child sexual abuse are sexual penetration (98 percent), insertion of an object in the genital area (94 percent) and fondling a child (90 percent). Other forms of child sexual abuse are less well recognized, such as looking at a child's genitalia (52.5 percent) and showing children one's sex organs (76 percent).

While respondents overwhelmingly recognize that girls are victims of abuse, there is less awareness that boys too are affected.

Almost all (98 percent) community members surveyed agree with the statement that victims of sexual abuse are often girls. But only 62 percent indicate that boys are also abused. The qualitative data reveal that some are aware of boys being sexually abused. The following quotes are from a participant in an FGD of adolescent boys and a health worker, respectively.

"Sometimes they [women] seduce boys or even force boys to sleep with them… We know of cases of boys that have been infected with STIs within the community or households."

"I met a boy aged between 9 and 10. He had a sexually transmitted disease and was releasing puss from his penis. I sat down and thought about how he got the disease at that tender age. I did ask him a number of questions but he could not reveal because his parents were present. I asked his parents to leave us alone so that he could be free to talk, still he couldn't reveal."

Many respondents believe that cases of child sexual abuse are never reported.

More than a third (36 percent) of community members surveyed feel that cases of child sexual abuse are never reported to the authorities. Shame is a common reason why cases go unreported. According to a District Social Welfare Assistant:

"Victims mostly are afraid, others are ashamed and others feel guilty or blame themselves, they feel like outcasts in the families and society. Usually they withdraw, they stay away from people, and not only the survivors but even the parents

of the victim are ashamed, they do not talk, they do not know where to go and others do not know the long term effects of the sexual abuse that has occurred to their child."

Counseling is not well recognized by community members as being important for survivors.

Most community members surveyed (78 percent) agree that children who experience sexual abuse should receive medical treatment. But only 13 percent indicate that counseling is also necessary. A District Social Welfare Assistant and community leader, respectively, describe the importance of counseling and support:

"On her own or on his own it's difficult to cope because there is stigmatization or discrimination because some may say he or she was deliberately doing it, because there was some sort of agreement. This is why we encourage counseling. This counseling is not only targeted to the victim but also to the community. We tell them to accept the child without stigmatization."

"In most cases it becomes difficult for such abused children to have a bright future because they are already affected mentally. But it depends on the support they can get from religious leaders and other people who can encourage them, because this was not their wish."

While services are available for abused children, those provided by the public sector are perceived as inadequate and of poor quality.

Interview and FGD participants report that services exist for children who have experienced sexual abuse. They cite the police, social services and NGOs. While a majority of service providers interviewed are passionate about providing support for abused children, they believe that the public services lack quality, coordination and rely heavily on NGOs. According to a police officer:

"Currently the services are not enough… each and every police officer should have the capability of handling child sexual abuse, and [so should] the community at large as we all understand that these abuses happen at community level, so we need other stakeholders to take a leading role in assisting these survivors…."

Parents are becoming more comfortable talking about sexual abuse with their children, though additional efforts are needed to reach adults and children.

More than three-fourths (77 percent) of surveyed respondents think that parents are a source of information for children about child sexual abuse. Yet only 35 percent say they received information from their parents about the topic during childhood. More encouragingly, greater than half (55 percent) of parents report that they discuss child sexual abuse with their adolescent children. The main reason for not discussing the topic is not having an adolescent child in the house. Very few cite discomfort by the parent or child, lack of privacy or lack of information.

Besides their parents, survey respondents note other sources of information. About 38 percent cite events organized by schools, community gatherings and civil society organizations as sources of discussion on the topic. Yet many adults and children are still not being reached by these community conversations.

There is wide support for family members to discuss child sexual abuse with children.

Interestingly, grandparents are mentioned most often as being appropriate people to discuss sexual abuse with children (96 percent) followed by mothers (92 percent) and aunts (91 percent). But uncles (88 percent) and fathers (85 percent) are also perceived as appropriate sources. A female participant in an FGD notes, *"…child victims report to parents or elders who have wisdom… Some of the victims feel free to talk to their parents while others are free with their grandparents."*

Respondents perceive schools as unsafe spaces for girls.

A large majority of community members (85 percent) believe that child sexual abuse is common in and around schools. Male teachers and students are frequently cited as perpetrators of sexual violence against girls. Less than half of respondents believe that cases of sexual abuse within the school environment are reported to teachers or school management. Schools are also not perceived as sources of information about child sexual abuse. Only 37 percent of survey respondents think that schools provide information to children about the topic. Yet 87 percent believe that teachers should discuss child sexual abuse with children. There is also support for holding teachers accountable for abusing children. According to an FGD participant:

"The role of the school is to make sure that children are getting education and protection, so if teachers are abusing children sexually they should be punished severely, they should go to jail and others will learn from them."

Conclusions and Recommendations

Despite high awareness of child sexual abuse among study participants there are important gaps in their knowledge, including what constitutes sexual abuse, who are the victims and what services are needed by survivors. Participants perceive that reporting of sexual abuse is limited, with shame being an important reason for underreporting. In addition, schools are viewed as particularly vulnerable places for girls. On the positive side, the police, government social services and NGOs provide some services upon which to build to reach more people with information, counseling and redress. There is also wide support for family members and teachers to be sources of information for children on sexual abuse. Moreover, some parents are talking with their children about sexual abuse and some participants have themselves been reached by community events on the topic. The following recommendations emerge from the study:

Increase children's and adults' access to information on child sexual abuse.

There is a need to intensify and diversify sources of information on child sexual abuse in the community. This entails equipping parents and other family members with the information and skills to communicate with their children. It also means working with teachers so that they can be sources of information to children.

Ensure that the information provides a fuller picture of what constitutes sexual abuse and that it conveys that boys can also be victims.

Education and awareness programs should emphasize that sexual abuse constitutes a range of behaviors, including inappropriate touching and showing pornography. They also need to highlight that boys are vulnerable to sexual abuse perpetrated by men and women.

Improve reporting of child sexual abuse and services for child survivors.

To improve reporting of abuse, more work is needed to mitigate the shame felt by children and families who are affected. More supportive community reporting structures and survivor services are also needed.

Make schools safer places for children.

All stakeholders should work to ensure that the school environment is safe for children. School systems in particular need to enforce teacher codes of conduct and increase awareness of child sexual abuse among pupils and their educators.

Part 4: Achievements and Lessons Learned

At the conclusion of the program, ICRW solicited feedback from the six participating organizations, mentors, and the GBV Prevention Network on the program's accomplishments, challenges, and ideas for strengthening the model. This section synthesizes the feedback, presenting the program's achievements and lessons learned.

Achievements

The achievements described below indicate that the program has led to personal advancement, fostered institutional change, and contributed to evidence-based advocacy and programming around violence against women.

The research-NGO partnership model strengthened NGOs' capacity to conduct action research and present their findings to an international audience.

The program included both formal training that brought together all NGO participants and their mentors as well as informal interactions between each activist organization and its mentor. Overall, participants feel that the model increased their knowledge and enhanced their skills to conduct qualitative research that could be translated into action. According to one participant:

"The capacity building approach worked well. When you are doing your university education, your study of research is more theoretical. The challenge is to translate theory into practice. This process took us through the nitty gritties of conducting research."

What stands out for another NGO participant is the *"combination of theory training and practical work on the ground that involved individuals from different countries."* This was particularly valuable in fostering learning, experience sharing and networking.

Participants report that the program has given them the knowledge and skills to conduct relevant, useful and ethical research on violence against women. In turn, they have

passed on this information, awareness and capacity to colleagues, thus having a wider impact on the institution. One component of the capacity-building program that NGO participants especially appreciated was the chance to present their study findings at SVRI, an international conference that brings together researchers, activists and program implementers seeking to combat sexual violence. A participant notes that the program's peer review process to develop and fine tune each presentation was empowering:

"The criticisms given were positive and enabled me to reflect further and synthesize our findings further. The peer assessment that was part of developing my presentation [for SVRI] was the most thrilling. We were very open and objective while giving comments to each other. This increased my confidence and ability to share our findings."

The study findings are being used as intended—to increase awareness, improve programs and support advocacy efforts.

Participants have disseminated and discussed findings from the research both internally and externally (in addition to SVRI). RAPCAN, for example, has shared findings on service responses to the co-victimization of mothers and children with its research participants and interested organizations in South Africa, including child rights groups. They have prepared a briefing document specifically targeted to government policymakers and are using the findings to frame other interventions RAPCAN is developing alone and with others. ACFODE's research that identifies the weaknesses and strengths of the traditional and formal justice mechanisms for women who experience violence is feeding into a new pilot project to prevent violence in families and communities. One part of the project is a video documentary that will include how traditional leaders have helped women access justice, reflecting insights from research conducted as part of this program. CEHURA has used its findings to raise awareness and stimulate dialogue among government representatives, civil society, and community elders and youth on the negative impact of

bride price. They have found through their research that it is particularly important to engage elders in these discussions as they are critical in the bride price negotiation process. WiLDAF in Tanzania is using the findings from its evaluation of the 16 Days Campaign to Prevent Gender-based Violence to inform planning of the 2012 annual campaign scheduled for November/December.

The program has fostered an appreciation for the power of research, leading to individual and institutional changes.

Participants note that they have developed a higher regard for the value of action research, which is having an impact on the way they do their work. According to one participant:

"Now I am developing a tool for tracking gender-based violence in health facilities. As I have received training on the importance of consent, ethical considerations, and how to ask permission of potential participants, I am incorporating this knowledge into my current work. I am doing it more scientifically, more ethically in order to get quality data."

Another participant comments on how the program's focus on advocacy has changed with regard to what they do with the data they collect. He notes that while previously they would simply compile data, now they use it proactively to inform their advocacy work.

A third participant relates how research has become more institutionalized:

"Overall, participation in the project has opened our eyes. We see the value of research where before we didn't. Now we say 'yes we must do further research.' If cases of violence against women are being reported, we want to know why the violence continues: are there new trends, issues to focus on? What has changed since participating is that research has become a key strategy for our advocacy and program work. We have programs in different parts of the country but now we talk about establishing a baseline. We don't just go in and implement—but that our implementation is informed by data."

In some cases this new understanding of the value of research and the importance of ethical review has led to institutional changes. One participant reports that her organization has established ethical guidelines for the research it undertakes and all protocols must receive ethical approval prior to their implementation. Another says she was made a program officer in monitoring and evaluation—a new department that the organization's leadership created to reflect their interest in doing further research and developing new staff capacities. A third highlights several ways in which research has gained greater prominence within the institution as a whole:

"We finished our five-year plan and have realized that research has to be part of what we are doing. Policy analysis is key to influencing advocacy, for example. We have developed a monitoring framework to track cases of violence against women at the community level and the information gathered is to inform our national level advocacy."

The program has demystified research thereby breaking down barriers between research and activism.

Participants recount how learning about technical terms made them feel on par with researchers and gave them greater confidence in discussing research findings and pursuing further research. According to one participant:

"My understanding of doing research, both qualitative and quantitative, has improved a lot. After the training, I can give feedback on scientific research. I understand the language of research, how to develop a protocol, how to articulate the problem you want to solve. My approach to research has changed. Now my co-workers see me as an expert in research since I now know about terms like 'rigor' and 'triangulation.' This has given me more confidence to pursue research."

Another notes how her strengthened research capacity has added value to her work as a whole:

"I recognize the work involved and still think it is difficult but at least I can now go in with my eyes open and informed. I can now tap into my research and activist capacities to enrich my work, understanding the difference between the way researchers and activists present their work and to use these skills to present to different audiences."

Engagement in the program has expanded participants' networks.

The participating organizations range from very small NGOs like CEHURA to more established NGOs like ACFODE. Yet each expanded their networks, creating new relationships or deepening existing ones with organizations and institutions focused on violence against women. RAPCAN is continuing to work with MRC on additional research. WiLDAF's research findings on the 16 Days Campaign to Prevent Gender-based Violence are relevant to the GBV Prevention Network, a coordinator of the regional campaign. As a result, WiLDAF now has strengthened ties not only with the Network, but also with other Tanzanian NGOs. After presenting its findings at SVRI, ACFODE established new links with individuals and organizations seeking partnerships, including Purdue University's Department of History and Women's Studies. These new contacts enable participants to feel they are part of and contributing to a broader network that values action research as a key strategy to combat violence against women. According to one participant:

"I keep on receiving information from them [SVRI]—their publications, events. I don't feel alone—I am working on violence against women with other countries and other continents as well."

Lessons Learned

This program demonstrates that building the capacity of NGOs to conduct qualitative, action research by pairing researchers with activists is a time-intensive process but one that has positive outcomes for programs and advocacy to combat violence against women. The following lessons can inform future efforts to build research capacity in the region and elsewhere. These lessons reflect the components of the model that worked particularly well as well as challenges in carrying out the program.

Skills of activist organizations can be meaningfully strengthened by using group training and a mentoring approach.

Activists who began with very limited research skills now feel considerably more competent to conduct qualitative studies and use the findings to inform programs and advocacy efforts. The provision of technical assistance through continuous mentoring and once-a-year trainings on key components in the research process has been effective in improving participants' research capacities. However, in most cases, the organizations can still benefit from partnering with more experienced researchers. But what has changed is that now such partnerships can be on a more equal footing, with the activist organizations playing a greater and more meaningful role in conducting research on issues that they deem as priorities.

Participants' presentation of results at a national, regional or international forum builds oral and written communication skills.

Participants' presentation of their findings at SVRI was an empowering process that gave them hands-on experience in a number of areas. These include identifying their most important results, making sure their conclusions reflect the data, and putting together a strong powerpoint presentation and presenting it within a designated time frame.

Working with peer organizations enhances learning and accountability.

Working with peers within the GBV Prevention Network made the experience less intimidating as participants worked jointly to critique and learn from each other.

The leadership of the GBV Prevention Network was instrumental in sustaining the momentum and ensuring that participating organizations met their obligations and completed their planned activities.

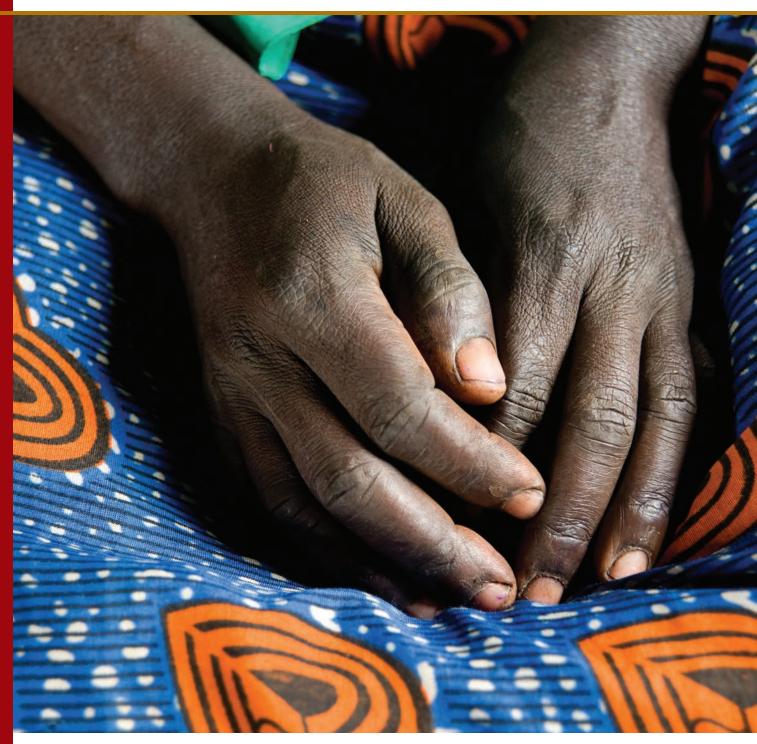**Clarifying roles and expectations is important to do from the onset.**

For most of the NGOs selected, despite having received basic training through the PATH/MRC workshops, this was the first time they had actually participated in a study as researchers. Consequently, they needed considerable support from their mentors in addition to the attention they received during the yearly group trainings. This was particularly true with regard to data analysis and report writing. In some cases the needs of NGO partners did not coincide with the availability of the mentors, whereas in other cases, the NGO partners found it difficult to make time for research activities. In the midst of competing organizational priorities, both situations led to delays and occasional frustration. For future endeavors, these issues should be clarified early on in the process. Making sure that both the research and the activist partners feel that their needs and contributions are being recognized and addressed is crucial for a successful partnership.

Managing communication among partners needs to be a key priority.

With such a diverse group of partners, both geographically and in terms of experience and mission, it was a challenge to keep all partners informed and engaged in the process over the three year period. Several departures and staff changes in partner organizations meant that continuity or past experience was lost, and difficult to replace. Although the research teams started out with a lot of enthusiasm, particularly during data collection, some of the groups got bogged down during analysis and report writing, which are the most difficult parts of the research process. Future efforts should emphasize maintaining communication and motivation, particularly between the steering group members and the mentors, so that they, in turn can keep the NGO teams engaged throughout the process.

Further investment is needed to build on the program's achievements in developing research capacity and building the evidence base.

ICRW, MRC and the GBV Prevention Network are well placed to further the gains from this program. This would entail honing the research skills of the participating NGOs through refresher trainings and fostering partnerships and mentoring between other researchers and activists in the region. Such efforts will create a stronger and more diverse base of skilled researchers and practitioners to catalyze action needed to combat violence against women.

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