



Violence Against Women

Global Brief Summary

Overview

Before COVID-19 overtook the headlines, the year 2020 was set to be a critical moment for women's rights and gender equality –with an unprecedented number of political milestones and anniversaries–marking an era of accelerated progress for holistic gender equality and bolder action to deliver on commitments for all women, particularly those affected by conflict.^{1,2}

On 9th March 2020 –what should have been the first day of the 64th session of the United Nations Commission on the Status of Women (CSW)– Women for Women International launched **'Unheard. Unseen. A Global Agenda for Action'**.³ This flagship policy report provided analysis on the key challenges that were halting progress for marginalized women in fragile and conflict-affected states and identified five priority action areas and broad recommendations where it was felt that urgent action needed to be prioritized by global leaders. One of these action areas focuses on ending violence against women (VAW) and calls for increased funding and delivery of a survivor-centered approach to all forms of violence against women affected by conflict.

Two days after the launch of 'Unheard. Unseen.', the World Health Organization officially declared COVID-19 a pandemic.

As the world grappled with this new crisis, many of the priorities and recommendations set out within this Agenda for Action became even more critical, relevant, and urgent particularly as the secondary effects of the pandemic exacerbated gender-based violence⁴ around the world and threatened years of progress.

The global effort to end VAW everywhere, including and especially in fragile and conflict affected communities, requires multi-level and multi-sectoral approaches from global and local actors. Our research in communities across Afghanistan, Democratic Republic of Congo (DRC), Nigeria, and South Sudan illustrates the community attitudes and policy implementation gaps that perpetuate the harmful practices of physical domestic abuse, marital rape, rape, and economic deprivation.

Women for Women International has synthesized our findings into four policy briefs. These briefs contribute to the body of evidence focused on preventing and responding to VAW through context-specific data and tailored recommendations for action.

¹ 20 Years of Women, Peace and Security | United Nations Peacekeeping
² CSW64 / Beijing+25 (2020) | Commission on the Status of Women | UN Women
³ Unheard. Unseen. ([womenforwomen.org](https://www.womenforwomen.org))
⁴ COVID-19 and violence against women ([who.int](https://www.who.int))

Who did we speak to?

Country	Description of Outreach and Research
AFGHANISTAN	<ul style="list-style-type: none"> • In-depth interviews (IDIs) and focus group discussions (FGDs) in 2019 with 12 community leaders and 40 community members, men and women, on their attitudes towards and knowledge of VAW in their communities; • Key informant interviews with 22 participants across 13 provinces in May 2020 to learn about impacts of COVID-19; and • Phone-based surveys with 80 former participants in November 2021 to learn about their lived realities following the regime change.
DEMOCRATIC REPUBLIC OF CONGO	<ul style="list-style-type: none"> • In-depth interviews and focus group discussions in 2019 with 10 male and female community leaders and 59 community members in Kamanyola and Luciga communities; • Phone-based surveys with 40 program participants and graduates in April 2020 across 10 communities in South Kivu to learn about impacts of COVID-19; and • A series of nine couples' dialogue sessions between 93 couples in Bwirembe and Luberizi conducted between July and October 2021.
NIGERIA	<ul style="list-style-type: none"> • In-depth interviews and focus group discussions in 2019 with 12 male and female community leaders and 59 community members from Riyom and Pankshin local government areas (LGAs); • Key informant interviews with 20 participants across 10 states, and phone-based surveys with 722 current and former program participants in Plateau, Bauchi, and Kaduna States in May 2020 to learn about the impacts of COVID-19; and • Program data collected between 2020-2021.
SOUTH SUDAN	<ul style="list-style-type: none"> • In-depth interviews and focus group discussions conducted in 2021 with 6 male and female community leaders and 60 community members in in the Jasnsuk, Sobe, Jigomoni communities in Yei River State.

What did we find out?

Each context-specific brief synthesizes findings on the themes of:

Community acceptability of:

- Economic and financial control
- Physical violence against women
- Rape, including marital rape
- Community interventions
- Compliance with laws versus traditional local customs
- Community resources and support available to women experiencing violence
- Policy and program recommendations

Across all four countries, community participants acknowledged that:

- Community attitudes may be changing slowly, but most community members feel that VAW is common and accepted as normal.
- While national laws are acknowledged to give women more rights than customs, not all communities were aware of the laws and not all community members felt women should have equal rights to men. In some countries, national laws were preferred where they guaranteed a girl's right to education and prohibited early marriages. Customs and local traditions were preferred to settle issues of domestic violence because they prioritize family reconciliation over justice.
- Women are still commonly blamed for being raped and face stigma, corruption, or weak redress mechanisms when seeking support and justice.
- Community resources are not available or accessible to survivors because they:
 - Are few and far between in marginalized or rural areas;
 - Cost too much in time or material resource to access;
 - Do not guarantee confidentiality to the survivor; and
 - Are linked to carceral or patriarchal structures which may themselves perpetuate attitudes which stigmatize women for their experiences of VAW or for seeking support.

Despite these common trends across the four countries where we conducted research, the calls for action were nuanced and varied by context. These differences often depended on the socio-political environment and the key actors and institutions that informally and formally influence the underlying conditions of violence or the support available to survivors.

Some key differences include:

- Alcohol cited as a contributing factor –often related to higher male unemployment– to instances of physical violence in the home in Afghanistan (most often), Nigeria, and the DRC.
- Participants in WfWI programming shared that the COVID-19 lockdowns improved husband-wife relationships due to more time together and greater social cohesion, providing an interesting counter-example of most global research showing increased household tensions and increased IPV.
- A higher prevalence and perceived threat of conflict-related sexual violence in South Sudan where communities experience higher militarization and thus perceive greater personal risk.
- Connectivity versus confidentiality: respondents in Nigeria often noted a desire for greater connectivity and a survivor network, whereas in South Sudan, women above all wanted support mechanisms that allowed them to maintain confidentiality to avoid stigma.

On hopes for the future:

“Changes are seen but they are not enough.”

(Afghanistan)

On community responses:

“VAW occurs every day and people now see it as a normal thing because when it happens nothing is being done.”

(South Sudan)

On physical domestic abuse:

“We don't allow a woman to be beaten but when she behaves stubborn you beat her a little, not to wound her but to remind her that she is under the influence of a man and for her to also know that she is wrong.”

(Nigeria)

On economic deprivation:

“Back home we say her belongings and herself inclusive, are the husband's properties. Reason being he got married to her when she had nothing therefore, anything she acquires in my house belongs to me also because we are one.”

(Nigeria)

On marital rape:

“During the marriage preparation step, the godparents advise us never to tell people what goes on in our bedroom, it should be a secret between two people. If one of the two partners tells it, he commits a taboo; that's why we can't denounce it.”

(Democratic Republic of Congo)

On the difference between customs and laws:

“I believe that the law is good because it privileges everyone, there is not a boy and a girl all are the same, whereas for the custom it gives importance to a man that it is the only person who exist.”

(Democratic Republic of Congo)

What can we do about it?

To truly end VAW, our global and local policy approaches must increase and enhance localization and partnerships across the humanitarian, development, and peacebuilding sectors to end GBV and support survivors in fragile and conflict-affected settings.

Coordination:

- Governments and international organizations incorporate and prioritize funding for GBV risk mitigation across all the triple nexus' response strategies.
- International community continues support to the health system during and post-conflict, prioritizing women's health care and referral systems for GBV.
- Prioritize violence prevention and recovery –acknowledging the increased risk of many types of violence affecting women and vulnerable groups during times of crisis– by categorizing protection and response services as lifesaving, essential, and non-negotiable as part of aid and security responses.
- Governments and agencies strengthen the ability of non-specialist mental health and psychosocial support actors to deliver psychological first aid as part of the current humanitarian response.
- UN agencies, governments and international organizations ensure accountability to existing global frameworks of protection is a cross-sectoral mandate to support implementation of GBV prevention and social norms change strategies so that even the most marginalized communities are aware of their rights to protection and redress.

Localization and Partnerships:

- Prioritize partnerships with local women's rights organizations (WROs) providing services to survivors.
- Invest in survivor-centered and context-specific approaches that engage community leaders, allies, and champions to support survivors and address the root causes of VAW.
- Services delivered should include context-adapted sexual and reproductive health services, access to justice, mental health and psycho-social support, the creation of safe spaces, economic empowerment, and community sensitization and mobilization to challenge stigma and discrimination.

Invest in integrated, survivor-centered, and localized approaches that:

- Address root causes and community norms and support context-specific redress and support mechanisms through an integrated and survivor-centered approach –which emphasizes women’s economic power as well as norms change– as necessary to address root causes of violence against women and achieve tangible change in the daily lives of women.
- Emphasize long-term partnerships for practically accessible support resources for women including community-based protection mechanisms and strengthened referrals systems and direct services for GBV survivors.
- Support ongoing engagement with prospective allies and champions including funding which supports women advocates, male champions, formal and non-formal groups to broker community-level agreements with government and traditional power holders.
- Grow and strengthen community-based organizations, networks, and groups to develop strategies and priorities for preventing VAW and supporting survivors.

These recommendations and any survivor-centered approach to transform community attitudes to prevent and address VAW must be context-specific:

- For example, in all four countries, community members indicated a desire for traditional leaders to take on a stronger role in changing the community narrative and norms around GBV and to facilitate the redress process for survivors. However, community members in South Sudan noted that an important precursor and priority was to restore authority to those traditional leaders by reducing local conflict and military presence.

Without taking this step, traditional leaders had no real power to seek justice for GBV survivors against the weapons of the gangs or military in the conflict-affected region. In the DRC, community members also wanted their local authorities to do more to prevent and address GBV, but their primary ask in this regard was to reduce corruption, specifically the practice of seeking bribes from survivors seeking to file a report or seek support.



Get in touch

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