

Gender-based Violence

6



Sixteen Days of Activism 'Take Back the Night' campaign in Alexandra Township, Johannesburg.

Photo: Colleen Lowe Morna

Key points

- GBV remains one of the most flagrant violations of human rights in the region.
- South Africa's first comprehensive GBV study shows that 35.5% of women have experienced physical and/or sexual violence at least once in their lifetime¹.
- In South Africa, 1.3% of men perpetrate sexual violence against other men, and 2.3% of men experience sexual violence during adulthood².
- Almost eight in 10 South Africans (78%) say domestic violence should be treated as a criminal matter, while 18% see it as a private matter to be resolved within the family.
- South Africa's high court has ruled that rape suspects can no longer rely on the subjective belief that a complainant consented.
- Fifteen out of 16 SADC countries do not meet the minimum standards for the elimination of trafficking, as highlighted in the US State Department 2024 report on *Trafficking in Persons*³.
- The DRC and Tanzania have yet to enact specific domestic violence laws.
- Survivors are often displaced and subjected to violence while seeking essential resources such as food and firewood in conflict-affected areas such as the DRC.
- As access to technology increases, there are parallel risks for the perpetuation of technology-facilitated gender-based violence (TFGBV).

¹ Zungu NP., Petersen Z., Parker W., Dukhi N., Sewpaul, R., Abdelatif N., Naidoo I., Moolman B., Isaacs D., Makusha T., Mabaso M., Reddy T., Zuma, K. and The SANSHEF Team (2024). The First South African National Gender-Based Violence Study: A Baseline Survey on Victimisation and Perpetration. Cape Town: Human Sciences Research Council. Available at: <https://hsrc.ac.za/news/latest-news/results-of-the-first-south-african-national-gender-based-violence-study-2022/> (Accessed: 23 November 2024).

² Ibid.

³ United States Department of State, 2024 Trafficking in Persons Report. Available at: <https://www.state.gov/reports/2024-trafficking-in-persons-report/> (Accessed: 26 October 2024).

Introduction

Gender-based violence (GBV) continues to be pervasive in the Southern African Development Community (SADC) region, with notable differences in prevalence and impact.

In the post-COVID-19 period, GBV continues to pose significant health risks and social consequences, resulting in adverse effects on physical, mental, sexual, and reproductive health. In conflict-affected regions such as the Democratic Republic of the Congo (DRC), sexual violence further complicates existing challenges within the health system, highlighting the need for comprehensive humanitarian responses.

Despite the economic downturns caused by COVID-19 lockdowns and the severe impacts of climate change, countries must remain focused on the economic disparities that significantly contribute to women's vulnerability to GBV. Initiatives such as Gender Links' Sunrise campaign aim to economically empower women, reduce GBV, and promote economic justice in the region.

The recent study from South Africa offers new insights into intimate partner violence (IPV) and childhood experiences of violence for both women and men. Data from the 2023 SADC Scorecard, UN Women, and WHO estimates have been utilised to present current and lifetime statistics on intimate partner violence and other indicators.

South Africa has witnessed a significant court ruling which promotes a more victim-centred approach by invalidating sections of the Sexual Offences Act, which permitted defendants to assert unreasonable beliefs regarding consent.

Maintaining compliance with international standards and implementing effective anti-trafficking measures is critical as trafficking becomes more widespread. All but one SADC country falls below the minimum standards for combatting human trafficking.



GBV 16 days of Activism March by multisectoral organisations, Pietermaritzburg, South Africa. Credit: Incema

This chapter examines the changing landscape of GBV in the digital age. It includes updates from the SVRI conference regarding global and regional initiatives to address technology-facilitated gender-based violence (TFGBV). There is optimism that the SADC Model Law on Gender-Based Violence, along with efforts to adapt training programmes for GBV responders will enhance national legislation and response to TFGBV. The chapter emphasises the importance of projects incorporating mobile applications to prevent TFGBV and promote inclusive decision-making in technology governance. Such initiatives are essential for creating safer digital environments.

Community-driven projects, such as those funded by Voice and Choice Southern Africa (VCSAF)⁴ and initiated by traditional leaders' wives in Zimbabwe, promote gender equality and empower women. Successful rehabilitation programmes in Mauritius and community engagement strategies in Malawi further highlight the importance of integrated approaches to end GBV.

The role of the media in increasing awareness and influencing policy changes through campaigns such as the 16 Days of Activism against GBV is highlighted. The chapter emphasises the necessity for integrated approaches and sustained advocacy to combat this pervasive issue effectively.

The chapter examines the extent, drivers, effects, responses, support, and prevention efforts regarding GBV in the SADC region. Table 6.1 summarises available information on extent of and response to GBV.

⁴ <https://vcsafund.org/>

Table 6.1: Key data on the extent, response, support, and prevention of GBV in SADC

Indicators	Region	Angola	Botswana	Comoros	DRC	Eswatini	Lesotho	Madagascar	Malawi	Mauritius	Mozambique	Namibia	Seychelles	South Africa	Tanzania	Zambia	Zimbabwe
Proportion (%) of ever-partnered women aged 15-49 years experiencing IPV and/or sexual violence at least once in their lifetime ^{5, 6}	13 countries	38	34	8.3	47	n/d	40	44 ⁷	30	n/d	30	27	n/d	23.9 ⁸	38	41	35
Proportion (%) of ever-partnered women aged 15-49 years experienced IPV and/or sexual violence at least once in the previous 12 months ^{9, 10}	13 countries	25	17	5.2	36	18	16	n/d	17	n/d	16	16	n/d	6.4 ¹¹	24	28	19
*SDG 5.2.1 Proportion (%) of women & girls aged 15 years & older subjected to physical & sexual violence by a partner in the previous 12 months ¹²	14 countries	21.7	26.2	12	5	4.6	n/d	15.5	24.3	1.1	18.8	33	0.4	6.4	n/d	47	39.6
*SDG 5.2.2 Proportion (%) of women aged 15-49 years experiencing physical and/or sexual violence perpetrated by someone other than an intimate partner at least once in their lifetime ¹³	Ten countries	4.5	2.9	10.1	25.4	0.2	n/d	n/d	14	n/d	7	n/d	n/d	27	10.1	n/d	14
Laws on domestic violence ¹⁴	14 countries	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes
Laws on sexual assault ¹⁵	15 countries	Yes	Yes ¹⁶	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Bill in place ¹⁷	Yes	Yes	Yes	Yes
Human trafficking laws ¹⁸	All 16 countries	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Sexual harassment laws ¹⁹	All 16 countries	Yes	Yes ²⁰	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Integrated approaches: national action plans ²¹	All 16 countries	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Accessible, affordable, and specialised services, including legal aid, to survivors ²²	All 16 countries	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Specialised facilities, including places of shelter and safety ^{23, 24, 25}	All 16 countries	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Comprehensive treatment, including post-exposure prophylaxis (PEP) ²⁶	All 16 countries	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes

KEY * = indicators measured in the SADC 2023 Milestone Scorecard
n/d = no data available

⁵ Global database on Violence against Women (no date) UN Women Data Hub. Available at: <https://data.unwomen.org/global-database-on-violence-against-women> (Accessed: 8 November 2024).

⁶ World Health Organization 2024 data.who.int, Proportion of ever-partnered women and girls aged 15-49 years subjected to physical and/or sexual violence by a current or former intimate partner in their lifetime (%) [Indicator]. <https://data.who.int/indicators/I/BEDE3DB/E0D4E17> (Accessed on 22 November 2024)

⁷ Statistique (INSTAT), I.N. de la and ICF (2022) 'Enquête démographique et de santé à Madagascar (EDSMD-V) 2021', <https://dhsprogram.com/publications/publication-FR376-DHS-Final-Reports.cfm>, accessed: 8 November 2024.

⁸ Results of the first South African National Gender-Based Violence Study, 2022 - HSRC (2024). Available at: <https://hsrc.ac.za/news/latest-news/results-of-the-first-south-african-national-gender-based-violence-study-2022/> (Accessed: 23 November 2024).

⁹ Global database on Violence against Women (no date) UN Women Data Hub. Available at: <https://data.unwomen.org/global-database-on-violence-against-women> (Accessed: 8 November 2024).

¹⁰ World Health Organization 2024 data.who.int, Proportion of ever-partnered women and girls aged 15-49 years subjected to physical and/or sexual violence by a current or former intimate partner in their lifetime (%) [Indicator]. <https://data.who.int/indicators/I/BEDE3DB/E0D4E17> (Accessed on 22 November 2024)

¹¹ Results of the first South African National Gender-Based Violence Study, 2022 - HSRC (2024). Available at: <https://hsrc.ac.za/news/latest-news/results-of-the-first-south-african-national-gender-based-violence-study-2022/> (Accessed: 23 November 2024).

¹² SADC SRHR SCORECARD 2023 Tableau Public. Available at: <https://public.tableau.com/app/profile/sadc.srhr.scorecard2239/viz/SADCSRHRSCORECARD2023/2023English> (Accessed: 6 October 2024).

¹³ SADC SRHR SCORECARD 2021. EN_FR_PO. <https://dev-www.sadc.int/srhrscorecard/>, accessed: 10 September 2024).

¹⁴ Gender Links, (2019) 'Audit of SRHR Laws and Policies in SADC', Gender Links, <https://genderlinks.org.za/gmdc/publications/audit-of-srhr-laws-and-policies-in-sadc/>, accessed 18 June 2021.

¹⁵ Gender Links (2019) 'Audit of SRHR Laws and Policies in SADC', Gender Links, <https://genderlinks.org.za/gmdc/publications/audit-of-srhr-laws-and-policies-in-sadc/>, accessed 18 June 2021.

¹⁶ Between (October 2nd, 2020 - October 1st, 2021), Angola enacted legislation protecting women from sexual harassment in employment. It also adopted criminal penalties for sexual harassment in employment. World Bank: <https://wbi.worldbank.org/content/dam/documents/wbi/2022/snapshots/Angola.pdf>

¹⁷ 'Sexual Offences Bill 2021 - Proposed Model Law by the Child Law Reform Committee' (2021) The Judiciary of Seychelles, 26 July. Available at: <https://www.judiciary.sc/news/sexual-offences-bill-proposed-model-law-by-the-child-law-reform-committee/> (Accessed: 8 November 2024).

¹⁸ United States Department of State (2020), Trafficking in Persons Report, <https://www.state.gov/reports/2020-trafficking-in-persons-report>, accessed 5 June 2021.

¹⁹ Gender Links (2019) 'Audit of SRHR Laws and Policies in SADC', Gender Links, <https://genderlinks.org.za/gmdc/publications/audit-of-srhr-laws-and-policies-in-sadc/>, accessed 18 June 2021.

²⁰ Between (October 2nd, 2020 - October 1st, 2021), Angola enacted legislation protecting women from sexual harassment in employment. It also adopted criminal penalties for sexual harassment in employment. World Bank: <https://wbi.worldbank.org/content/dam/documents/wbi/2022/snapshots/Angola.pdf>

²¹ Gender Links, Policy and action plans, <https://genderlinks.org.za/what-we-do/justice/policy-and-action-plans/>, accessed 18 June 2021.

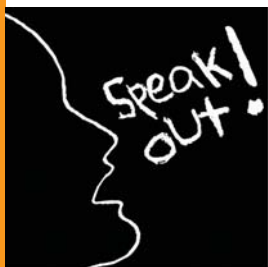
²² Lowe Morna, C., Rama, K. and Chigorimbo, S. (eds) (2020) SADC Gender Protocol 2020 Barometer. 13th edn. Johannesburg: Gender Links, <https://genderlinks.org.za/what-we-do/sadc-gender-protocol/sadc-protocol-barometer/sadc-gender-protocol-barometer-2020/>, accessed: 18 June 2021.

²³ Lowe Morna, C., Rama, K. and Chigorimbo, S. (eds) (2020) SADC Gender Protocol 2020 Barometer. 13th edn. Johannesburg: Gender Links, <https://genderlinks.org.za/what-we-do/sadc-gender-protocol/sadc-protocol-barometer/sadc-gender-protocol-barometer-2020/>, accessed: 18 June 2021.

²⁴ GBV Prevention Network (2018) Seychelles: Shelter for Women Victims of Violence Opens in Seychelles, <https://preventgbvafrica.org/seychelles-shelter-for-women-victims-of-violence-opens-in-seychelles/>, accessed 18 June 2021.

²⁵ UNFPA Comoros (2021) VBS : L'UNFPA remet de matériels informatiques et de mobiliers aux comités de veille de Mohéli et d'Anjouan, UNFPA Comoros, <https://comoros.unfpa.org/fr/news/vbg-lunfpa-remet-de-mat%C3%A9riels-informatiques-et-de-mobiliers-aux-comit%C3%A9s-de-veille-de-moh%C3%A9li-et>, accessed 18 June 2021.

²⁶ Lowe Morna, C., Rama, K. and Chigorimbo, S. (eds) (2019) SADC Gender Protocol 2019 Barometer. 12th edn. Johannesburg: Gender Links, <https://genderlinks.org.za/what-we-do/sadc-gender-protocol/sadc-protocol-barometer/sadc-gender-protocol-barometer-2019/>, accessed: 18 June 2021.



Accessing current data on GBV and especially IPV indicators remains challenging. Table 6.1 mostly shares slightly adjusted numbers to those in the 2022 Barometer. This 2024 Barometer relies on the 2023 SADC SRHR Scorecard for the latest data on two SDG indicators: 1) SDG 5.2.1

Proportion (%) of women and girls aged 15 years and older subjected to physical and sexual violence by a partner in the previous 12 months.²⁷ and 2) SDG 5.2.2 Proportion (%) of women aged 15-49 years experiencing physical and/or sexual violence perpetrated by someone other than an intimate partner at least once in their lifetime²⁸ - measured as non-partner sexual violence in the scorecard. The UNWomen data hub²⁹ and the WHO Estimates data portal³⁰ have been used for data on the Proportion (%) of ever-partnered women aged 15-49 years experiencing IPV and/or sexual violence at least once in their lifetime³¹. Thirteen countries have prevalence data estimates for ever-partnered women aged 15-49 years experiencing IPV and/or sexual violence at least once in their lifetime. This ranges from 8.3% in Comoros to 47% in the DRC.

The proportion of ever-partnered women facing IPV or sexual violence in the past 12 months ranges from 5,2% in the Comoros to 36% in the DRC. South Africa's newest 2022 study shows 6.4% of ever-partnered women aged 15-49 years experienced IPV and/or sexual violence at least once in the 12 months before the study. The figures for IPV in the lifetime and past 12 months for the DRC are very high. This reveals significant challenges regarding violence against women and girls, as well as the legal framework surrounding these issues.

Only ten countries have data on non-partner sexual violence, with high levels in South Africa of 27% and one-quarter of female respondents in the DRC reporting this type of violence, compared to a lowest level of 0,2% in Eswatini.

Most data on other indicators remain essentially unchanged, and the scarcity of regular data gathering makes this outdated. For more than a decade, GL worked to address these data gaps, spearheading seven comprehensive violence against women and girls (VAWG) and GBV baseline studies in Botswana, Lesotho, Mauritius, Seychelles, South Africa, Zambia, and Zimbabwe (2010 to 2016) and a comprehensive follow-up study in Botswana in 2018.³² GL is working to secure funding for a follow-up study in Lesotho in 2025. Findings from the South African survey are very similar to findings by GL, especially on the widespread prevalence of emotional abuse.

Other indicators show that:

- Fourteen SADC countries now have domestic violence legislation, and 15 have sexual assault legislation. Seychelles has a sexual offences bill in place.
- The DRC and Tanzania have yet to enact specific domestic violence laws.
- Angola now has legislation on sexual harassment, and
- All 16 SADC countries have human trafficking laws.



Kwanele app for survivors-by-survivors South Africa.

Credit: Sonke

²⁷ SADC SRHR SCORECARD 2023 Tableau Public. Available at: <https://public.tableau.com/app/profile/sadc.srhr.scorecard2239/viz/SADCSRHRSCORECARD2023/2023English> (Accessed: 6 October 2024).

²⁸ SADC SRHR SCORECARD 2021_EN_FR_PO. <https://dev-www.sadc.int/srhrscorecard/>, accessed: 10 September 2024).

²⁹ Global database on Violence against Women (no date) UN Women Data Hub. Available at: <https://data.unwomen.org/global-database-on-violence-against-women> (Accessed: 8 November 2024).

³⁰ World Health Organization 2024 data.who.int, Proportion of ever-partnered women and girls aged 15-49 years subjected to physical and/or sexual violence by a current or former intimate partner in their lifetime (%) [Indicator]. <https://data.who.int/indicators//BEDE3DB/E0D4E17> (Accessed on 22 November 2024)

³¹ Ibid

³² The studies can be accessed on the GL website: <https://genderlinks.org.za/what-we-do/justice/research/violence-against-women-baseline-research/>

Prevalence

Table 6.1 shows statistics on the prevalence of GBV across SADC which varies between different countries. The following section analyses prevalence statistics of different forms of GBV in South Africa.

First GBV study reveals alarming statistics

The *First South African National Gender-Based Violence Study, 2022* is based on a national survey with a total sample of 10012 (5603 women and 4409 men).



Table 6.2: First South African National Gender-Based Violence Study, 2022 findings

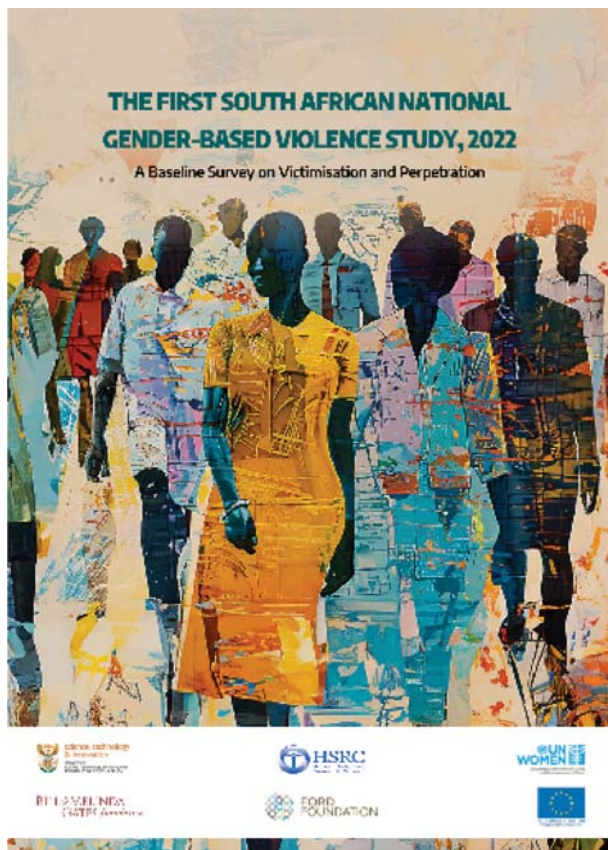
Type of violence	Victimisation		Perpetration	
	Recent (%)	Lifetime (%)	Recent (%)	Lifetime (%)
VAW, regardless of partnership status				
Physical and /or Sexual violence	7%	35,5%		
Physical	6,1%	33,1%		
Sexual	2%	9,8%		
Intimate Partner Violence (IPV)				
Emotional Abuse	10,0%	25,1%	7,2%	33,7%
Physical and/or Sexual IPV	6,4%	23,9%	4,0%	20,5%
Physical IPV	5,2%	22,4%	2,4%	16,7%
Economic Abuse	4,5%	13,1%	5,3%	14,8%
Sexual IPV	2,5%	7,9%	2,3%	7,5%
Psychological: Controlling behaviours		57,6%		77,2%
Non-partner violence (NPV)				
Physical/Sexual NPV	3,7%	27,0%		
Physical NPV	3,4%	24,6%		
Sexual NPV	0,6%	5,9%		
Perpetration by men towards other men				
Sexual				1,3%
Victimisation of men during adulthood (outside the home)				
Physical		20,4%		
Sexual		2,3%		
Prevalence of Childhood Abuse among ALL women before age 15				
Physical		58,0%		
Sexual		4,0%		
Prevalence of Childhood Abuse among ALL men before age 18				
Physical		74,6%		
Sexual		15,7%		

Source: *First South African National Gender-Based Violence Study, 2022*³³

Table 6.2 summarises selected findings from the report. Some key findings are:

- Over one-third (35.5%) of women experience physical and/or sexual violence in their lifetime.
- Extensive psychological abuse and controlling behaviours (57,6%) and emotional abuse against women in intimate partnerships.
- Significant rates of physical and/or sexual non-partner violence (NPV) against women (27%).
- Notable prevalence of physical violence against men outside the home (20.4%)
- 1.3% of men perpetrate sexual violence against other men, and 2.3% of men experience sexual violence during adulthood. This highlights that sexual violence is not exclusively directed towards women but also occurs between men.

³³ Zungu NP., Petersen Z., Parker W., Dukhi N., Sewpaul, R., Abdelatif N., Naidoo I., Moolman B., Isaacs D., Makusha T., Mabaso M., Reddy T., Zuma, K. and The SANSHEF Team (2024). The First South African National Gender-Based Violence Study: A Baseline Survey on Victimisation and Perpetration. Cape Town: Human Sciences Research Council. Available at: <https://hsr.ac.za/news/latest-news/results-of-the-first-south-african-national-gender-based-violence-study-2022/> (Accessed: 23 November 2024).



Overall, women experience higher rates of violence than men. In terms of Non Partner Violence (NPV), physical violence is more common than sexual violence, with most of the physical NPV (31%) from the survivors' family (parent, sibling, parent-in-law, or another male family member.)³⁴ For intimate partner violence (IPV), there is a high prevalence of controlling behaviours and emotional abuse. Additionally, the study highlights that Black African women experience the highest rates of IPV.

The study sheds new insights on violence against women with disabilities who experience a significantly higher rate of lifetime violence (40.4%) compared to women without disabilities.

Emerging forms of GBV: technology facilitated GBV (TFGBV)

The Sexual Violence Research Initiative (SVRI) 2024 forum, which took place in Cape Town, South Africa, from October 21 to 25, delved into the complexities of TFGBV, examining its manifestations across different regions and contexts. Participants discussed the impact on

The study found that a small proportion of women reported experiencing violence during the COVID-19 lockdown, primarily by their partners. Specifically, 1.8% reported physical violence, 0.9% sexual violence, and 2.7% emotional abuse. 1.1% of men self-reported perpetrating physical violence, 0.8% sexual violence, and 1.9% emotional abuse. The study cautions that these findings reflect a specific period with unique factors like restricted movement and alcohol sale prohibitions and should not be compared to recent or lifetime experiences of IPV.

The study notes the under-reporting of GBV. Despite high awareness of GBV laws, effective implementation remains challenging. Continued efforts in prevention, intervention, and support services are needed for victims of violence in South Africa. Recommendations from the study include: targeted community-based initiatives, enhanced mental health support, and improvements in law enforcement and policy frameworks.

Critical insights from the study can inform policies and interventions to curb GBV and femicide in South Africa and other SADC countries facing similar challenges. For countries with high rates of violence against women, particularly those with entrenched patriarchal systems, the insights into community and household dynamics can aid in tailoring interventions. Additionally, identifying key risk factors, such as economic dependence among women and mental health issues among men, can guide targeted prevention strategies across the region. SADC countries are strongly urged to emulate South Africa's example by conducting dedicated GBV studies.

victims and communities, shared research, and explored measures to enhance understanding and address gaps. The forum aimed to advance practical policies and interventions to combat TFGBV, emphasising the importance of data safety and ethical considerations.

³⁴ Media pack: First South African National Gender-Based Violence Study, 2022 - HSRC (2024). Available at: <https://hsrc.ac.za/media-pack-first-south-african-national-gender-based-violence-study-2022/> (Accessed: 23 November 2024).

Drivers of GBV

A complex interplay of factors drives gender-based violence in SADC countries. Key drivers include entrenched patriarchal norms, economic inequalities, and high levels of poverty and unemployment. Weak legal frameworks and inadequate enforcement exacerbate the issue, while cultural practices and societal attitudes often normalise violence against women and

children. Additionally, factors such as armed conflict, humanitarian crises, and substance abuse further contribute to the high prevalence of GBV in the region. Understanding these drivers is crucial for developing effective interventions and policies to combat GBV across SADC countries.



South Africa: Key societal factors contributing to high rates of GBV

The persistence of gender inequality is a critical factor contributing to GBV in South Africa. Deeply ingrained societal norms and structures perpetuate male dominance and reinforce gender hierarchies. This unequal power dynamic fosters an environment where violence against women is normalised and accepted as part of social interactions, particularly in intimate relationships.

Cultural beliefs play a significant role in shaping attitudes toward gender relations. A considerable proportion of men and women subscribe to harmful gender norms that justify male violence and control over female partners. These norms often exhibit strong cultural reinforcement such as concepts of masculinity that equate toughness with exerting control which contribute to the normalisation of violence.

Economic factors are profoundly intertwined with GBV. Women's dependency on men for financial support can leave them vulnerable to violence. Many women in South Africa report relying on grants or limited financial resources, making it difficult to leave abusive relationships.

Economic abuse is widespread, where perpetrators restrict access to necessary financial resources, further entrenching women's dependency.

South Africa's history of institutionalised racism and sexism has enduring effects on current societal attitudes towards violence. The legacy of apartheid, which fostered systemic inequalities, still contributes to a culture where violence remains a tool for asserting power and control.

Mental health crises and substance abuse are also pivotal in understanding GBV. High levels of alcohol and substance abuse are correlated with increased violence, particularly in intimate relationships. The combination of mental health challenges, poor social support systems, and historical trauma exacerbates the risk for both victims and perpetrators.

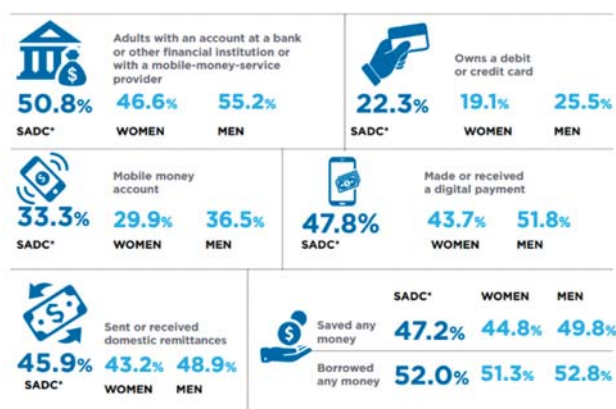
Addressing GBV in South Africa requires a multifaceted approach that recognises and dismantles these deep-rooted societal factors through education, economic empowerment, and policy reform.

Source: First South African National Gender-Based Violence Study, 2022.³⁶

³⁵ Results of the first South African National Gender-Based Violence Study, 2022 - HSR (2024). Available at: <https://hsr.ac.za/news/latest-news/results-of-the-first-south-african-national-gender-based-violence-study-2022/> (Accessed: 23 November 2024).

³⁶ Results of the first South African National Gender-Based Violence Study, 2022 - HSR (2024). Available at: <https://hsr.ac.za/news/latest-news/results-of-the-first-south-african-national-gender-based-violence-study-2022/> (Accessed: 23 November 2024).

The economic status of women in SADC



SADC Gender and Financial Inclusion Fact Sheet: Source, UNWOMEN

The SADC Gender and Development Monitor 2022³⁷, highlights several glaring parity gaps regarding women's economic status in the region:

1. Women continue to constitute more than 50% of the poorest segment of the SADC population. This economic disparity significantly impacts overall economic growth and hinders progress on women's economic empowerment.
2. The report emphasises that sustainable poverty reduction can only be achieved when women have guaranteed access to and participation in all economic sectors. This is crucial for mobilising their potential for sustainable development and poverty alleviation.
3. Various initiatives are being implemented to enhance women's economic independence.

These include capacity-building programmes, entrepreneurship training, and efforts to integrate women into local economic development plans.

4. Despite ongoing efforts, challenges such as high levels of poverty, unemployment, and lack of financial inclusion persist³⁸. However, regional cooperation and policy reforms pave the way towards a more equitable and prosperous future for all SADC citizens.

Women's financial inclusion in the SADC region still lags.³⁹ According to a UN Women 2024 study, although there have been some improvements, leading to narrowing of gender gaps in financial inclusion since 2016, women remain significantly more financially excluded than men in more than half of the SADC member states.⁴⁰ When women are financially excluded, they lack access to essential financial services like banking, credit, and insurance, which are crucial for economic empowerment and independence. Without financial stability, women are less able to invest in business opportunities or secure loans to grow their enterprises, further limiting their economic participation and reinforcing cycles of poverty and dependence. This financial dependency can trap women in abusive relationships, as they may lack the resources to leave or seek help. Addressing financial inclusion is, therefore, critical in reducing women's vulnerability to GBV and promoting their overall economic and social well-being.

Gender attitudes

GBV is rooted in gender inequity, manifested in social norms that legitimate men's control and dominance over women. The following findings from the Afrobarometer survey show perceptions

of GBV in South Africa and Lesotho. In both countries, GBV is identified as the most critical women's rights issue that needs to be addressed by the government and society.

³⁷ SADC Gender and Development Monitor 2022 - English | SADC (no date). Available at: <https://www.sadc.int/document/sadc-gender-and-development-monitor-2022-english> (Accessed: 4 November 2024).

³⁸ Financial inclusion and gender in the SADC region - Her Finance, Her Future Building Stronger Economies One Woman at a Time (no date) UN Women - Africa. Available at: <https://africa.unwomen.org/en/digital-library/publications/2024/10/financial-inclusion-and-gender-in-the-sadc-region-her-finance-her-future-building-stronger-economies-one-woman-at-a-time>

³⁹ Financial inclusion and gender in the SADC region - Her Finance, Her Future Building Stronger Economies One Woman at a Time (no date) UN Women - Africa. Available at: <https://africa.unwomen.org/en/digital-library/publications/2024/10/financial-inclusion-and-gender-in-the-sadc-region-her-finance-her-future-building-stronger-economies-one-woman-at-a-time> (Accessed: 4 November 2024).

⁴⁰ Ibid.

Table 6.3: Findings from Afrobarometer surveys on perceptions about GBV

Respondents who said	South Africa ⁴¹	Lesotho ⁴²
violence against women and girls is a:		
“somewhat common” or	23%	28%
“very common” occurrence in their community	25%	25%
it is “never” justified for a man to use physical force to discipline his wife	78%	85%
a woman will be criticised, harassed, or shamed if she reports GBV to the authorities:		
“somewhat likely”	25%	29%
“very likely”	18%	27%
the police are likely to take cases of GBV seriously	76%	79%
domestic violence should be treated as a criminal matter rather than as a private matter to be resolved within the family	78%	53%

Areas in which similar views were exhibited in both countries were: significant proportions acknowledge that violence against women is a common occurrence in their communities; large majorities believe that it is never justified for a man to use physical force to discipline his wife; most believe that the police are likely to take GBV cases seriously, indicating a level of trust in law enforcement's response to such incidents.

However, there are notable differences. In South Africa, 48% say violence against women and girls is common, whereas in Lesotho, this figure is slightly higher at 53%. When it comes to

reporting and stigma, 43% of South Africans think it is likely that a woman will be criticised or harassed if she reports GBV, compared to 56% in Lesotho. Furthermore, 78% of South Africans believe domestic violence should be treated as a criminal matter, while this view is held by only 53% of the respondents in Lesotho.

These insights highlight the importance of tailored approaches to address GBV in each country, considering the commonalities and differences in perceptions. Awareness and education efforts are crucial to reduce the justification of violence and to encourage reporting.

Effects of GBV

Studies show that exposure to GBV leads to many adverse health outcomes.⁴³ This includes HIV and other sexually transmitted infections (STIs), induced abortion, low birth weight and prematurity, harmful alcohol use, depression and suicidal tendencies, non-fatal injuries, and fatal injuries (intimate partner homicides). Globally, the World Bank highlights that exposure to GBV

can negatively affect women's physical, mental, sexual, and reproductive health and may increase the risk of acquiring HIV.⁴⁴ In SADC, research has long identified GBV as a significant determinant of HIV infections among women. Thus, activists champion interventions to eradicate violence against women to fight the spread of HIV.

⁴¹ AD738-South-Africans-see-gender-based-violence-as-a-top-priority-Afrobarometer-24nov23.pdf

⁴² AD546-In-Lesotho-gender-based-violence-tops-womens-right-issues-needing-attention-Afrobarometer-31aug22.pdf

⁴³ García-Moreno, C. et al. (2013) Global and regional estimates of violence against women: prevalence and health effects of intimate partner violence and non-partner sexual violence. Geneva, Switzerland: World Health Organization.

⁴⁴ Violence against women (no date). Available at: <https://www.who.int/news-room/fact-sheets/detail/violence-against-women> (Accessed: 29 October 2024).

Injuries and trauma from sexual GBV in Sub-Saharan Africa

A 2024 systematic scoping review to explore the injuries and trauma resulting from sexual and gender-based violence (SGBV) among survivors in sub-Saharan Africa⁴⁵, identified significant research gaps and highlighted the urgent need for targeted interventions to address the consequences of SGBV. The review included 20 studies published between 2012 and 2023. Most of the studies (15%) were conducted in South Africa, with 75% adopting a cross-sectional design and focusing on women. The findings highlighted the prevalence of physical injuries and trauma from SGBV, such as genital injuries, cuts, bites, scratches, abrasions, bruises, sprains, dislocations, fractures, vaginal bleeding, and genital trauma with varying prevalence rates of injuries between urban and rural settings. The studies emphasised the urgent need for effective interventions and support services, noting the significant impact

of SGBV on mental health, including psychological trauma, depression, PTSD symptoms, and other adverse outcomes.

The review revealed substantial challenges in accessing healthcare, especially in rural areas highlighting barriers such as limited availability and affordability of services and survivors' hesitancy to disclose abuse to medical professionals. These findings underscore the importance of addressing healthcare gaps to ensure comprehensive support for survivors. The review also identified limited research on healthcare access and support services for SGBV survivors. The authors call for increased research in other sub-Saharan African countries to effectively mitigate SGBV effects and improve healthcare access and support for survivors.

*Source: Arch Public Health.*⁴⁶

One of the Amplify Change Partnership (ACP) grantees, the Women's Action Group (WAG), based in Zimbabwe, plans to offer emergency funds to assist survivors in marginalised communities to access SGBV services.⁴⁷

South Africa's comprehensive GBV study confirms that GBV can have severe effects on victims. 41.6% of women who ever experienced physical or sexual violence by an intimate partner reported being injured because of IPV. Of these women, 38.8% reported being injured once, 35.6% two to five times, and 25.7% more than five times.⁴⁸

Mental health effects

Gender-based violence has severe impacts on the mental health of women. Some examples from the SADC region illustrate the devastating mental health consequences of GBV.



⁴⁵ Kuupiel, D., Lateef, M.A., Adzordor, P. et al. Injuries and /or trauma due to sexual gender-based violence among survivors in sub-Saharan Africa: a systematic scoping review of research evidence. Arch Public Health 82, 78 (2024). <https://doi.org/10.1186/s13690-024-01307-3>

⁴⁶ Kuupiel, D., Lateef, M.A., Adzordor, P. et al. Injuries and /or trauma due to sexual gender-based violence among survivors in sub-Saharan Africa: a systematic scoping review of research evidence. Arch Public Health 82, 78 (2024). <https://doi.org/10.1186/s13690-024-01307-3>

⁴⁷ WAG report on planned activities for the ACP

⁴⁸ Results of the first South African National Gender-Based Violence Study, 2022 - HSRC (2024). Available at: <https://hsrc.ac.za/news/latest-news/results-of-the-first-south-african-national-gender-based-violence-study-2022/> (Accessed: 23 November 2024).



South Africa: Effects of GBV entrenched in cultural fabric



Photo: Colleen Lowe Morna

In South Africa, GBV is a significant public health issue. Women and men who experience GBV often suffer from mental health problems, including depression and Post-Traumatic Stress Disorder (PTSD). The trauma from GBV also leads to long-term psychological issues, affecting their ability to function in daily life.

Dr. Jarred H. Martin, of the University of Pretoria, discusses the deep-rooted impact of GBV in South Africa in his paper, *'The effects of GBV are entrenched in SA's cultural*

*fabric'*⁵⁰, emphasising how its psychological effects extend beyond victims to the broader society. Prevalent GBV leads to chronic fear, anxiety, and vulnerability in women which contributes to mistrust and stigmatisation. There are also psychological effects on men. In a culture that often perpetuates toxic forms of dominance and control as part of masculinity, boys and men may grapple with conflicting

expectations. There is pressure to conform to aggressive and dominating behaviour, on the one hand, and societal condemnation of violence, on the other. The internalisation of these conflicting norms can result in a distorted sense of self and contribute to heightened levels of stress and aggression.

The intergenerational impact of GBV is highlighted as children witness violence, which fosters emotional and behavioural issues, perpetuating a cycle of trauma. The societal ramifications include a breakdown of social trust vital for community cohesion, thereby weakening responses to violence. The article stresses the importance of unpacking cultural norms that support violence and creating effective mental health support systems for survivors. It argues for educational initiatives to foster empathy and healthy relationships while acknowledging the potential for community activism that promotes non-violent gender identities. A collaborative effort to transform societal attitudes and strengthen support networks is essential for progress toward a resilient, empathetic community.

Source: University of Pretoria, Psychology News.⁵¹

Effects of GBV in conflict-affected areas

GBV is a serious issue in conflict-affected areas that worsens conditions for women and girls

Gender-based violence in conflict-affected areas is a serious issue that worsens conditions for women and girls. Armed conflict and social breakdown increase the risks of physical, sexual, and psychological violence. Survivors often face limited access to support services, legal protection, and healthcare, compounding their trauma. Urgent and comprehensive interventions are needed to protect and support the most vulnerable populations in these settings.

⁴⁹ Diko, M. (2023) 'Gender-Based Violence (GBV) in South Africa: An Interdisciplinary Discourse of One Selected isiZulu and One Selected isiXhosa Literary Text', *African Journal of Inter/Multidisciplinary Studies*, 5(1), pp. 1-11. Available at: <https://doi.org/10.51415/ajims.v5i1.1147>.

⁵⁰ The effects of GBV are entrenched in SA's cultural fabric - UP psychology lecturer | University of Pretoria (no date). Available at:

https://www.up.ac.za/psychology/news/post_3204132-the-effects-of-gbv-are-entrenched-in-sas-cultural-fabric-up-psychology-lecturer (Accessed: 30 October 2024).

⁵¹ The effects of GBV are entrenched in SA's cultural fabric - UP psychology lecturer | University of Pretoria (no date). Available at:

https://www.up.ac.za/psychology/news/post_3204132-the-effects-of-gbv-are-entrenched-in-sas-cultural-fabric-up-psychology-lecturer (Accessed: 30 October 2024).



DRC: Health worker perspectives on conflict-related sexual violence

A report by Physicians for Human Rights (PHR) highlights the severe escalation of conflict-related sexual violence in the eastern DRC since the re-emergence of the M23 rebel group in 2021. The escalating violence has resulted in widespread displacement, increased food insecurity, and a striking rise in sexual and gender-based violence, with over 113,000 cases documented in 2023 alone, and a twofold increase in the first half of 2024 compared to 2023. The report is based on interviews with healthcare professionals who shared challenges in providing care for survivors, including medical and psychological needs and the barriers they face due to a weak health system and stigma. The findings reveal instances of horrific sexual violence, such as multiple perpetrator rape and penetration with foreign objects, affecting both adults and children as young as three. The report highlights the healthcare system's strain and the urgent need for improved medical and psychosocial support and forensic documentation. It urges coordinated action from local, regional, and international parties to address the humanitarian crisis and accountability for violations of international human rights and humanitarian law. For instance, in describing the complex

trauma seen in their clinic, one healthcare worker reported that survivors *"may undergo physical traumas, organ (traumas), destruction... of the genitalia... sexually transmitted diseases that endanger their lives, their future. They can contract unwanted pregnancies, and with those unwanted pregnancies, face the risk of becoming disabled..."*

Members of multiple armed groups, including those supported by the DRC's neighbours and the DRC military itself, were identified by survivors as perpetrators who used sexual violence to instil fear, intimidate, and control affected communities. While violence and displacement caused by armed groups drove survivors away from their communities, clinicians received survivors living in IDP camps who had been forced to travel to insecure areas to access essential resources and who were attacked while searching for food or firewood around IDP camps. One nurse recounted, *"The child told me she went to the field to look for food. Then, arriving at the field, she ran into two soldiers. Then the soldier told her: I'm going to have sex with you. If you refuse, I will kill you."*

Source: Physicians for Human Rights

Response



SADC Gender Protocol Article 20.1: State parties shall:

(a) Enact and enforce legislation prohibiting all forms of GBV. to prevent and eliminate all harmful social and cultural practices, such as child marriage, forced marriage, teenage pregnancies, slavery and female genital mutilation; and

(c) Ensure that perpetrators of GBV, including domestic violence, rape, femicide, sexual harassment, female genital mutilation, and all other forms of GBV are tried by a court of competent jurisdiction.

SADC Gender Protocol Article 20.6: State parties shall ensure that cases of GBV are conducted in a gender-sensitive environment.

⁵² "Massive Influx of Cases": Health Worker Perspectives on Conflict-Related Sexual Violence in Eastern Democratic Republic of the Congo' (no date) PHR. Available at: <https://phr.org/our-work/resources/massive-influx-of-cases-sexual-violence-drc/> (Accessed: 30 October 2024).

SADC Gender Protocol Article 20.7: State parties shall establish special counselling services and legal and police units to provide dedicated and sensitive services to survivors of gender violence.

SADC Gender Protocol Article 20.3: State Parties shall review, reform, and strengthen their laws and procedures applicable to cases of sexual offences and GBV to:

- (a) Eliminate gender bias; and
- (b) Ensure justice and fairness are accorded to survivors of gender-based violence in a manner that ensures dignity, protection and respect.

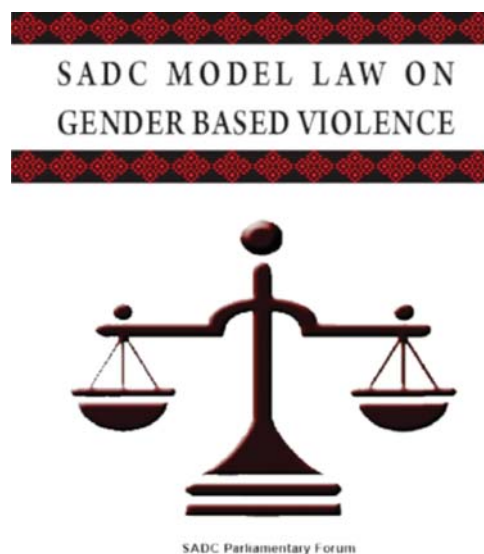
SADC SRHR Strategy Outcome 10: Remove barriers - including policy, cultural, social, and economic - that serve as an impediment to the realisation of SRHR in the region (SDGs 5.1 and 5c).

Maputo Protocol 2(a): States parties shall take appropriate and effective measures to: Enact and enforce laws to prohibit all forms of violence against women including unwanted or forced sex whether the violence takes place in private or public.

Responding effectively to GBV requires legislation and services some of which are tailored for specific forms of GBV such as harassment and trafficking.

Legal frameworks

SADC has established a comprehensive framework to address GBV. Launched in 2021, the SADC Model Law on GBV aligns with Article 20.1 of the SADC Gender Protocol, which stipulates that member states must enact and enforce legislation prohibiting all forms of GBV, develop strategies to eliminate harmful social and cultural practices and ensure that competent courts prosecute offenders. This section highlights the model law's provisions as well as response to several forms of GBV within SADC.



The SADC model law on GBV:

The SADC Model Law on GBV is designed to assist member states in developing or reforming their national GBV laws. It highlights the shortcomings of existing legislation and emphasises the need for reforms to meet international human rights standards. The law advocates for the prohibition of all forms of GBV, ensuring access to justice and protective measures for victims while promoting preventive measures and public awareness campaigns.

The model law encompasses various types of GBV, including physical, psychological, sexual, and economic harm. It addresses issues such as domestic violence, sexual violence, exploitation, trafficking, discrimination, harmful practices, acid attacks, femicide, cybercrimes, and honour crimes. This comprehensive scope aligns with international and regional standards, including the SADC Gender Protocol and the SADC Regional Strategy and Framework for Action 2018-2030.

Critical protections for survivors include ensuring their safety during legal proceedings, protecting their identity, and providing restraining orders and witness protection. The law also mandates special measures for children and persons with disabilities involved in legal processes, ensuring their dignity and privacy. The law prohibits the introduction of a complainant's sexual history in legal proceedings unless it is directly relevant and disallows certain defences, such as claims of honour or intoxication.

The model law promotes awareness, training, and capacity building among stakeholders to handle GBV cases effectively, including in digital contexts. It establishes compliance notices for entities that do not adhere to GBV laws and outlines an institutional framework for coordinated action among police, healthcare providers, social services, and judicial entities.

Community involvement and awareness-raising initiatives are encouraged to enhance case reporting and support for victims. Judicial processes should be efficient and sensitive to victims' needs, ensuring swift and compassionate responses to complaints.

Governments are required to submit annual reports on GBV to the SADC Parliamentary Forum and other relevant bodies, detailing the measures taken to prevent and eradicate GBV.

In summary, the SADC Model Law ensures the protection of legal rights, the establishment of support mechanisms, and sensitivity to the needs of survivors. Its successful implementation relies on multi-sectoral collaboration, promotes legal consistency across the SADC region, and aligns with international human rights standards. Member states can strengthen their national frameworks by adopting these best practices.

Source: Author's perspectives on the SADC Model Law on Gender-Based Violence.⁵³

Member states must proactively implement legal reforms and establish comprehensive new laws to address GBV, as illustrated by the recent legislative actions in Angola and South Africa.



Angola: Sexual harassment in the workplace legislation enacted

Angola has introduced new legislation aimed at protecting women from sexual harassment in the workplace, which includes clear definitions and explicit prohibitions against such behaviour in employment settings. The law establishes criminal penalties for individuals found guilty of committing sexual harassment, serving both as a deterrent and a means of providing legal recourse for victims. These reforms were enacted

between October 2020 and October 2021 as part of a broader global effort to enhance gender equality and safeguard women's rights at work. Angola's initiatives are highlighted in the World Bank's 2022 report on Women, Business, and the Law, marking significant progress toward creating safer and more equitable work environments for women.

Source: World Bank's Women, Business and the Law 2022 report.⁵⁴

⁵³ Model Law on Gender Based Violence. Available at: <https://gbv.sadcpf.org/> (Accessed: 30 October 2024).

⁵⁴ <https://wbl.worldbank.org/content/dam/documents/wbl/2022/snapshots/Angola.pdf>

Sexual harassment is a serious issue that is often misunderstood and stigmatised, leading to a lack of open discussion. There are various forms

of sexual harassment, including ogling, catcalling, stalking, unwanted attention, and online harassment, among others.



South Africa: Key steps on GBV laws

In May 2024, President Cyril Ramaphosa signed the National Council on Gender-Based Violence and Femicide Bill into law alongside the National Prosecuting Authority Amendment Bill, aiming to combat crimes against women and children in South Africa. He emphasised that GBV has become a severe crisis in the country, necessitating immediate governmental action. Recent statistics reveal nearly 200 GBV incidents recorded in the third quarter of last year alone, with over 1,500 attempted murder cases involving women under investigation.⁵⁵ Ramaphosa called for collaboration, "Now I do believe that we will continue to count on your support, as well as the support of labour and business, to combat the scourge of gender-based violence." The signing into law of these bills underlines the government's commitment to addressing GBV. The legislative framework includes provisions for better coordination among law enforcement bodies and the justice system, aimed at

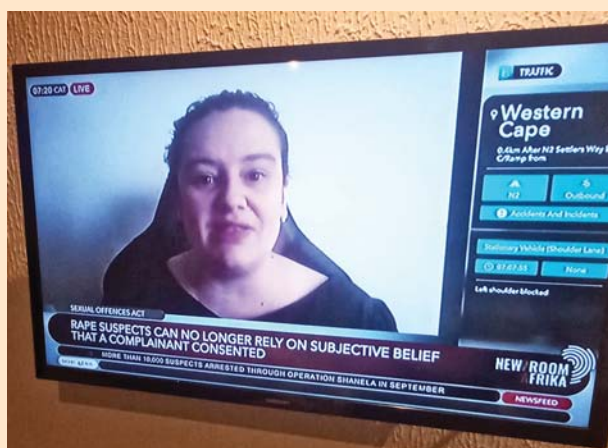
strengthening accountability mechanisms to address and reduce crimes against women and children effectively.

A September 2024 judgment by the Gauteng Division of the High Court has **declared certain sections of South Africa's Sexual Offences Act unconstitutional**, specifically those that do not criminalise sexual violence when a perpetrator holds an unreasonable belief in consent.⁵⁶

The Embrace Project, a non-profit focused on combatting GBV, initiated a constitutional challenge due to the Act's problematic definitions of consent and the requirement to prove intent for rape. The high court's ruling highlighted that the current law violates victims' rights to equality, dignity, and security. The ruling has closed a loophole that allowed perpetrators to rely on unreasonable beliefs about consent, particularly in cases where the victim is incapacitated.

The ruling has several implications for the justice system. These include:

- Unreasonable beliefs about consent are no longer a valid defence.
- Ruling targets egregious cases where consent is absent.
- Ruling does not change the burden of proof, which remains on the state to show beyond reasonable doubt that there was no consent.
- Ruling does not alter the presumption of innocence.
- Ruling is not a silver bullet, as only 8% of sexual offence reports result in convictions⁵⁷.



Dr Sheen Swemmer, head of the Gender Justice programme at the Centre for Applied Legal Studies at the University of the Witwatersrand, reviews the High court ruling on News Afrika, South Africa.

Photo: Kevin Chiramba

⁵⁵ Ramaphosa signs GBV law (no date) Bing. Available at: https://www.bing.com/search?pglt=171&q=Ramaphos+signs+GBV+law&cvid=35e97f773af24290b6709d7159985cad&gs_lcrp=EgRIZGdKgyIABBFgDkyBggAEEUYOTIGCAEQABhA0gEJMTQ4NjZqMGoxqAlisAlB&FORM=ANSPA1&PC=DCTS (Accessed: 1 November 2024).

⁵⁶ Metelerkamp, T. (2024) High court rules parts of Sexual Offences Act unconstitutional, Daily Maverick. Available at: <https://www.dailymaverick.co.za/article/2024-10-02-not-a-dry-eye-in-the-room-as-court-rules-parts-of-sexual-offences-act-unconstitutional/> (Accessed: 9 October 2024).

⁵⁷ News Afrika Interview with Dr Sheen Swemmer, Gender Justice programme head at the Centre for Applied Legal Studies at the University of the Witwatersrand.

- All entities in the criminal justice system need to perform their roles effectively for the new ruling to be impactful.

The high court ruling is poised to significantly influence future legislative changes regarding GBV in South Africa. Firstly, the verdict highlights a critical shift in the legal understanding of consent and the burden of proof in sexual violence cases. By rejecting the previous requirement that perpetrators demonstrate a belief in consent, the court has paved the way for a more victim-centric approach. This could lead to the re-drafting of legislation to ensure that consent is explicit and does not hinge on the subjective beliefs of the accused. It is anticipated that the case will be sent to the constitutional court for confirmation. Parliament will then have 18 months to amend the identified constitutional defects in the legislation, demonstrating a direct path toward reform.

Secondly, the ruling has galvanised advocacy efforts around GBV, bringing attention to the

inadequacies of the current legal framework. Organisations like the Embrace Project, should leverage this momentum to advocate for comprehensive reforms that address other aspects of GBV including prevention, support for survivors, and prosecution of offenders.

Furthermore, if the constitutional court upholds the high court's decision, it could influence how cases of sexual violence are prosecuted. Legal experts and advocates anticipate that a more precise and reasonable standard for proving intent in sexual violence cases will increase the likelihood of successful prosecutions which will encourage more survivors to come forward.

In summary, the ruling may lead to substantial changes in legislation that will enhance the protection of GBV victims in South Africa, fostering a legal environment that prioritises the rights and experiences of survivors while holding offenders accountable.

Source: NewsRoom Afrika.⁵⁸

Trafficking in persons (TIP)



SADC Gender Protocol Article 20.5: State parties shall:

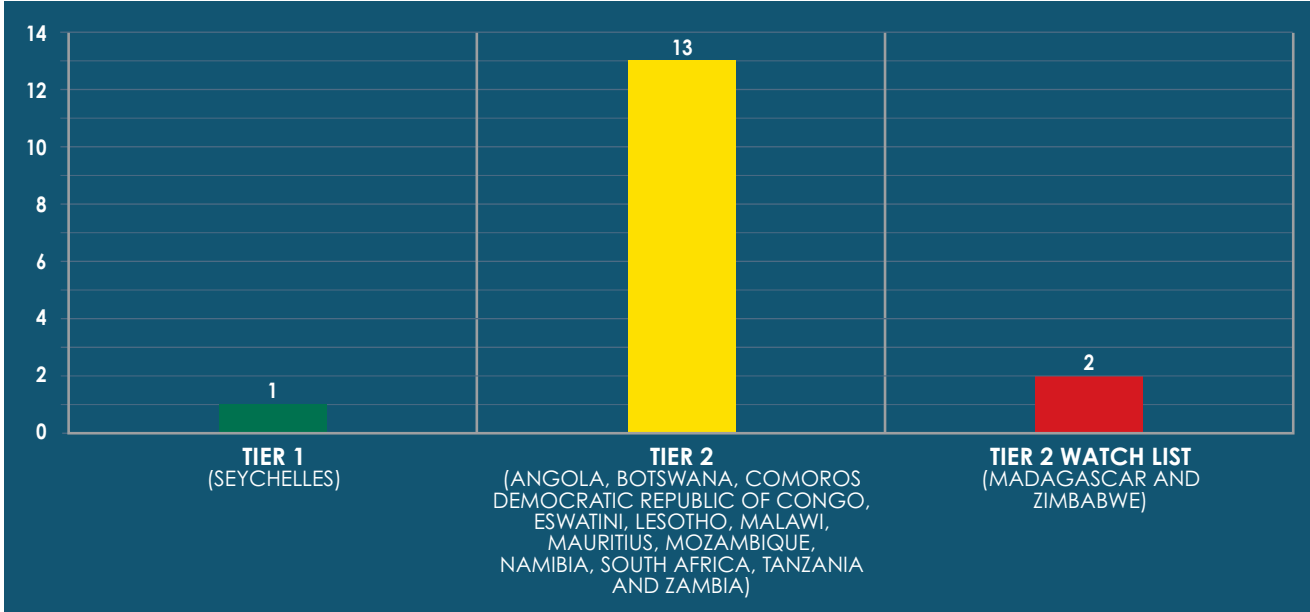
- Enact and adopt specific legislative provisions to prevent trafficking in persons and provide holistic services to the victims, with the aim of re-integrating them into society.
- Put in place mechanisms by which all relevant law enforcement authorities and institutions should eradicate national, regional, and international trafficking syndicates.
- Put in place harmonised data collection mechanisms to improve research and reporting on the types and modes of trafficking to ensure effective programming and monitoring.
- Establish bilateral and multilateral agreements to run joint actions against trafficking in persons among origin, transit and destination countries; and
- Ensure that capacity building, awareness raising, and sensitisation campaigns on trafficking in persons exist for law enforcement officials.

SDGs 5.2: Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking, sexual, and other types of exploitation; and **16.1** Significantly reduce all forms of violence and related death rates everywhere.

⁵⁸ Ibid

The US State Department 2024 report on Trafficking in Persons shows that trafficking continues in SADC. While all sixteen countries are making some efforts to address trafficking, fifteen of them do not meet the minimum standards for the elimination of trafficking.⁵⁹

Figure 6.1: 2024 Tier placements for SADC countries regarding trafficking



Source: 2024 Trafficking in Persons Report.⁶⁰

Figure 6.1 provides a tiered classification of Southern African countries regarding human trafficking for the year 2024, as outlined in the US Department of State's Report. Countries are categorised into three tiers reflecting their efforts to combat human trafficking and adherence to the minimum standards for the elimination of trafficking as set by the Trafficking Victims Protection Act (TVPA).⁶¹

Other than Seychelles, SADC countries do not meet the minimum standards to address trafficking

Tier 1, which includes Seychelles demonstrate robust measures and commitment to preventing human trafficking. They comply with the minimum standards set by the TVPA. They are recognised for their proactive initiatives, such as vigorous law enforcement, victim support services, and public awareness campaigns to reduce trafficking incidents. Tier 2, which includes Angola, Botswana, Comoros, Democratic Republic of Congo (DRC), Eswatini, Lesotho, Malawi, Mauritius, Mozambique, Namibia, South Africa, Tanzania, and Zambia, are recognised for significant efforts to combat trafficking but may not fully meet the minimum standards. These countries often face challenges such as limited resources, varying enforcement of existing laws, and insufficient victim support systems. Their classification suggests ongoing improvements but highlights areas needing further attention to align with international standards. Tier 2 Watch List, which includes Madagascar and Zimbabwe,

⁵⁹ United States Department of State, 2024 Trafficking in Persons Report. Available at: <https://www.state.gov/reports/2024-trafficking-in-persons-report/> (Accessed: 26 October 2024).

⁶⁰ Ibid

⁶¹ Human Trafficking | Key Legislation (2016). Available at: <https://www.justice.gov/humantrafficking/key-legislation> (Accessed: 26 October 2024).

are not addressing human trafficking adequately. They have insufficient anti-trafficking measures with slow progress, posing an increased risk of trafficking and exploitation. There is urgent need for comprehensive action and reform in their anti-trafficking strategies.

Only two countries in SADC are now on the Tier 2 watch list, down from seven in 2022. However, the two, Madagascar and Zimbabwe, have dropped from Tier 2 to the Tier 2 watch list.⁶²

Namibia dropped its ranking from Tier 1 in 2022 to Tier 2 in 2024. This re-evaluation may indicate a decline in efforts to combat trafficking, or it could reflect an increase in trafficking incidents or reports of abuse that the government has not addressed effectively. The tier placements underscore varying levels of commitment and effectiveness in combatting human trafficking across SADC, necessitating tailored approaches to address the specific challenges faced.

Sexual harassment



SADC Gender Protocol Article 22.1: State parties shall enact legislative provisions and adopt and implement policies, strategies and programmes which define and prohibit sexual harassment in all spheres and provide deterrent sanctions for perpetrators of sexual harassment.

SADC Protocol Article 22.2: State parties shall ensure equal representation of women and men in adjudicating bodies hearing sexual harassment cases.

Sexual harassment is a serious issue that is often misunderstood and stigmatised, leading to a lack of open discussion. The United Nations defines sexual harassment as "any unwelcome sexual advance, request for sexual favour, verbal or physical conduct or gesture of a sexual nature, or any other behaviour of a sexual nature that might reasonably be expected or be perceived to cause offence or humiliation to another."⁶³ There are various forms of sexual harassment, including ogling, catcalling, stalking, unwanted attention, and online harassment, among others. Perpetrators can be individuals or groups of both genders and may be known or unknown to the victim. Reporting incidents of harassment can contribute to a more robust understanding of its prevalence and support community-based efforts to combat it. In the SADC region, sexual harassment remains a significant challenge, with countries having legislation, policies and programmes to address the issue in public and private spheres.

Verbal harassment, including catcalling and inappropriate comments, is widespread in **Mauritius**, particularly in urban areas. The Equal Opportunities Act addresses sexual harassment, but enforcement is weak due to limited awareness and cultural norms that often trivialise the issue.⁶⁴



A 2020 study on sexual harassment conducted in Mauritius found that 90% of women and one-third of men reported having experienced sexual harassment at least once in their lives, with 28% of women facing it over ten times within five years. A significant proportion of respondents reported verbal (75%) and physical harassment (50%), with 3.9% notifying the police. The survey highlights that 60% of victims suffered long-lasting effects, including depression and altered behaviour. Despite recognising sexual harassment as a serious societal issue (94% agree), there is a prevalent taboo surrounding the topic, which limits open discussion and contributes to

⁶² United States Department of State, 2024 Trafficking in Persons Report. Available at: <https://www.state.gov/reports/2024-trafficking-in-persons-report/> (Accessed: 26 October 2024).

⁶³ UN Women | UN System Coordination - Anti-harassment. Available at: <https://www.un.org/womenwatch/uncoordinated/antiharassment.html> (Accessed: 7 February 2025).

⁶⁴ Sexual Harassment in Mauritius: Survey Report and Statistics (2020) Le Mauricien. Available at: <https://www.lemauricien.com/le-mauricien/sexual-harassment-in-mauritius-survey-report-and-statistics/391687/> (Accessed: 27 October 2024).

a lack of sexual education. The study concludes that effective change requires action from educational institutions, religious authorities, and

the government to increase public awareness and address the roots of sexual harassment comprehensively.⁶⁵

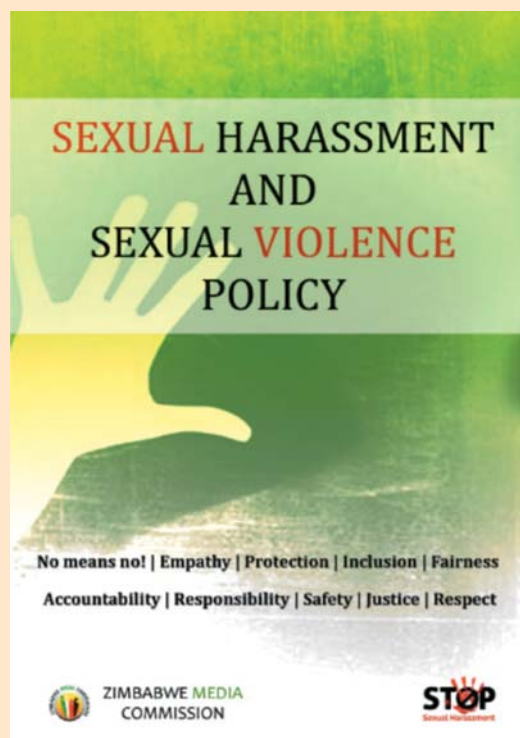


Zimbabwe: Media Industry Sexual Harassment and Sexual Violence Policy launched

The Zimbabwe Media Commission (ZMC) plans to address potential resistance to reporting incidents of sexual harassment by implementing the newly launched Media Industry Sexual Harassment and Sexual Violence Policy. The policy adopts a zero-tolerance approach to sexual harassment, requiring all media organisations to create internal policies for both physical and digital environments. Its goal is to ensure a safe and respectful workplace through prevention, clear reporting procedures, and support for affected individuals.

The policy aims to empower journalists to report incidents without fearing victimisation. This includes establishing designated offices or individuals within media organisations to oversee implementation of the policy and ensure that it is binding across the sector, fostering accountability. The policy emphasises that sexual harassment is a crime that must be reported promptly, thereby encouraging victims to come forward. By reinforcing that there is protection for those who report harassment, the media industry hopes to reduce the stigma and fear associated with reporting such incidents, leading to a more supportive atmosphere for journalists.⁶⁶

Media personnel will receive training on sexual harassment and violence, with annual refresher courses mandated for each organisation. Employers and management must train those handling complaints to understand employee rights and the complaint process.



An independent committee will be established to address sexual harassment and violence, helping to identify and reduce inappropriate behaviours. The policy also recognises virtual sexual harassment, defined as online behaviour targeting someone's gender, ethnicity, or sexuality. Examples include sending explicit messages or making unwanted advances during remote work. Overall, the policy outlines the responsibilities of media organisations to combat all forms of harassment.

Source: ZMC Sexual Harassment Policy.⁶⁷

⁶⁵ Ibid

⁶⁶ Zimbabwe Media Commission Launches Ground-breaking Policy to Combat Sexual Harassment and Violence in the Media Industry - Zimbabwe Media Commission (no date). Available at: <http://mediacommission.co.zw/zimbabwe-media-commission-launches-ground-breaking-policy-to-combat-sexual-harassment-and-violence-in-the-media-industry/> (Accessed: 29 October 2024).

⁶⁷ Zimbabwe Media CommSexual-Harassment-Policy.pdf: <http://mediacommission.co.zw/download/sexual-harassment-policy/>

Support



SADC Gender Protocol Article 23.2: State parties shall ensure accessible, effective and responsive police, prosecutorial, health, social welfare and other services to redress cases of GBV.

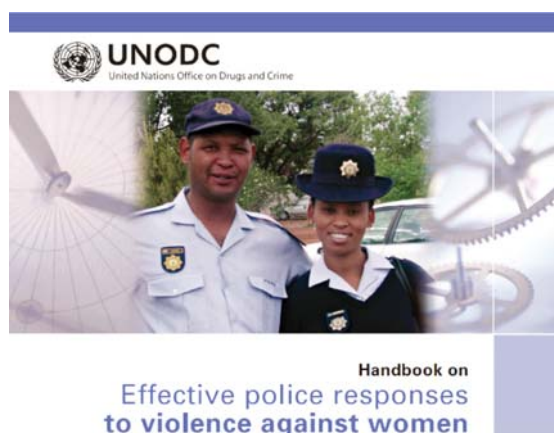
SADC Gender Protocol Article 23.3: State parties shall provide accessible, affordable, and specialised legal services, including legal aid, to survivors of GBV.

SADC Gender Protocol Article 23.4: State parties shall provide specialised facilities, including support mechanisms for survivors of GBV.

To comply with Article 23.2 of the SADC Gender Protocol, SADC member states have implemented various measures to support survivors of GBV, including ensuring that police and prose-

cutorial services are effective and responsive; support for survivors, such as shelters and economic empowerment; as well as training for service providers.

UNODC handbook on police response



The handbook is a comprehensive guide aimed at enhancing police responses to violence against women, outlining definitions, types of violence, and the police's critical role in addressing this pervasive issue. It emphasises that violence against women is a widespread human rights violation, requires systematic intervention, and should not be treated as a private matter. The handbook provides guidelines

on international norms and standards that police must adhere to, and the need for a collaborative approach involving multiple agencies in the criminal justice system. Emphasis is placed on victim protection, evidence collection, procedural law, and the psychological sensitivity required when interacting with victims. The document advocates for transparency, accountability in police actions, and a survivor-centred approach to law enforcement and judicial processes. Additionally, it addresses the necessity of specialised training for police officers and advocates for legislative reforms to ensure women's safety and protection from violence.

The Comoran government has conducted training for law enforcement officers in collaboration with international organisations such as UN Women and the United Nations Office on Drugs and Crime (UNODC). The training focuses on understanding GBV, sensitising officers to the needs of survivors, and improving their skills in handling and investigating GBV cases.⁶⁸



⁶⁸ https://www.unodc.org/documents/justice-and-prison-reform/Handbook_on_Effective_police_responses_to_violence_against_women_English.pdf

Support for victims of GBV

Beyond specialised police officer training, member states must ensure that funding support for survivors is sustained so that they recover and are empowered. In the Comoros, the United

Nations Population Fund (UNFPA) has supported the provision of social services and amenities where survivors can access protection services, medical care, and psychological support.



At just 13 years old, when she returned from school, Mariama* was sexually assaulted by a neighbour. Forced into early motherhood, she told UNFPA, "At 16, I have a daughter who is almost one and a half years old." In the Comoros, some 17 per cent of women have experienced at least one incident of physical or sexual violence in their lives, and more than 30 per cent of girls are married while they are still children. Young girls reported most cases of violence, explained Said Ahamed Said, from the Ministry of Health: "Last year we received 173 reports of sexual violence, of which 162 were against young girls under age 17."

I want my daughter to be able to defend better herself and other young girls who may suffer any form of abuse

Mariama turned to the UNFPA-supported Listening and Protection Service for Children and Women Victims of Violence in the capital city, Moroni, for guidance. The centre provides midwifery, contraceptive services, post-rape care and screenings for sexually transmitted infections, as well as referrals to hospitals. Since 2021, a psychologist also helps women and girls

left to care for their families alone. The centre provided Mariama with medical and legal assistance and followed up on the case in court after the man's arrest.

UNFPA strengthens essential sexual and reproductive health support, such as the Listening Service. It also supports programmes to end all forms of violence against women and girls through capacity-strengthening for partners, medical and legal assistance as well as a toll-free hotline that survivors can call for help.

Changing social and gender norms can take a long time and requires long-term, sustained investments. Working towards ending gender-based violence will only show results over time. In the 17 years since the Listening Service has existed, change has started after continuous awareness among communities. "People are becoming more conscious now, and they can denounce violence compared to how things were before," explained Mr. Said.

The goal is to lay a solid foundation for ending GBV by setting up social services and amenities where survivors can access appropriate protection services that help them rebuild their lives and contribute to transforming social norms with partners and local communities on the ground. "I want my daughter to be able to defend better herself and other young girls who may suffer any form of abuse," said Mariana.

Source: UNFPA Comoros/Melvis Kimbi.⁶⁹

⁶⁹ Core resources support survivors of gender-based violence in the Comoros (no date). Available at: <https://www.unfpa.org/updates/core-resources-support-survivors-gender-based-violence-comoros> (Accessed: 3 November 2024).



Prioritising Survivor Leadership:

One of the critical discussions at the SVRI Forum 2024 was the need to involve survivors in decision-making processes. Kolbassia Haoussou, a torture survivor and activist from Chad

but based in the United Kingdom (UK), stressed that survivors should lead the efforts to address GBV. This approach ensures that interventions are grounded in the real experiences and needs of the affected. Drawing from his experiences of torture, Haoussou's message was, "It's not enough to hear their stories. We need to involve them in decision-making," he said. "I think about how decisions are often made for survivors but not with them. To prevent future violence, we

must understand the impact of what's already been done. Survivors should not just be consulted, but they should lead." Haoussou's work with the "Survivors Speak Out" network challenges the systems that often treat survivors as helpless victims, instead placing them at the heart of policymaking and advocacy. "For me, it's about shifting the culture from seeing survivors as helpless victims to recognising them as leaders and experts in the fight against sexual violence and torture."⁷⁰

It's not enough to hear their stories. We need to involve them in decision-making. Survivors should not just be consulted, they should lead

Shelters for survivors

Supporting GBV survivors through providing shelters gives them a safe and supportive environment where they can access essential services. One such shelter is GL's Safe Haven Halfway Home in Mauritius.⁷¹



Mauritius: Safe Haven Halfway Home

The Gender Links Safe Haven Halfway Home is a beacon of hope and empowerment for individuals seeking support on their journeys toward independence and resilience. Founded to provide a safe, inclusive, and empowering environment, the halfway home is a nurturing space where individuals can heal, develop, and acquire skills and confidence for successful reintegration into society. Safe Haven offers holistic support, empowerment, and personal and professional development opportunities for individuals facing transition or crisis.

Since its opening in 2017 until mid-June 2024, the home has accommodated 310 residents, including 155 children (77 girls and 78 boys). In 2023,

the home provided refuge for 91 residents (45 adults, 29 girls, and 17 boys), including 28 existing residents. Among the 91 residents in 2023, 72 were victims of domestic violence (28 adults and 44 children), six came from children's shelters, 12 experienced homelessness, and one woman arrived from a women's prison. From January to June 2024, the home accommodated 41 residents: 19 female adults, 15 girls, and seven boys, comprising 34 new and seven existing residents.



Photo: Colleen Lowe Morna

⁷⁰ Davey, D. (2024) 'SVRI Forum 2024: From crisis to change', The Mail & Guardian, 24 October. Available at: <https://mg.co.za/partner-content/2024-10-24-svri-forum-2024-from-crisis-to-change/> (Accessed: 7 November 2024).

⁷¹ 'Mauritius: The Safe Haven Halfway Home project' (no date) GenderLinks. Available at: <https://genderlinks.org.za/casestudies/mauritius-gl-provides-a-safe-haven-for-girls-too-old-to-be-children/> (Accessed: 23 November 2024).

Economic justice

Economic justice in the SADC region is crucial for addressing the persistent inequalities within member states. SADC's Vision 2050 highlights sustainable economic growth, good governance, and social equity as foundational pillars.⁷² The Sunrise Campaign, initiated by Gender Links, supports key development goals outlined in

Agenda 2030 and SADC's Vision 2050. It has two main objectives: to help women gain access to all economic sectors and to reduce violence by enhancing women's confidence and agency. Ultimately, this empowers women to take greater control of their lives.

Sunrise campaign



In 2013, Gender Links (GL) piloted an Empower Women, End Violence programme⁷³, to test the hypothesis that increasing women's agency, confidence, and economic power would result in less violence for women in abusive relationships and more control over their lives. Rebranded the Sunrise Campaign⁷⁴ in 2016 because of the "new beginning" that this model offered to survivors of GBV, the programme focused on an integrated approach to Life Skills and Entrepreneurship training, including confidence building, decision making, business management, use of IT, networking and addressing the underlying structural inequalities between women and men.

Over the past decade, the Sunrise Campaign, "End Violence, Empower Women", has gained significant momentum across SADC. It has reached over 3,000 women in 10 countries, including 600 in South Africa. This programme has provided evidence of the critical link between economic empowerment and sustainable solutions to GBV. Highlighting the policy-

level impact of this initiative, South Africa's National Strategic Plan on Gender-Based Violence and Femicide (NSP GBVF) adopted in 2020, includes a dedicated pillar on Economic Power.

GL's approach to addressing GBV targets multiple levels of the ecological model. The project connects GBV survivors to Local Economic Development opportunities at the individual level and provides life and IT skills training to enhance their agency. At the household level, it involves family members, including former perpetrators, in rehabilitation programmes. At the community level, it integrates into GL's gender-responsive governance work through Centres of Excellence (COEs) in Local Government, where councils commit resources, run campaigns to end GBV and empower women economically. A unique feature is that these councils, having undergone a ten-stage process to become COEs, include support for GBV survivors in their action plans. The outcomes include increased agency and economic independence for survivors.

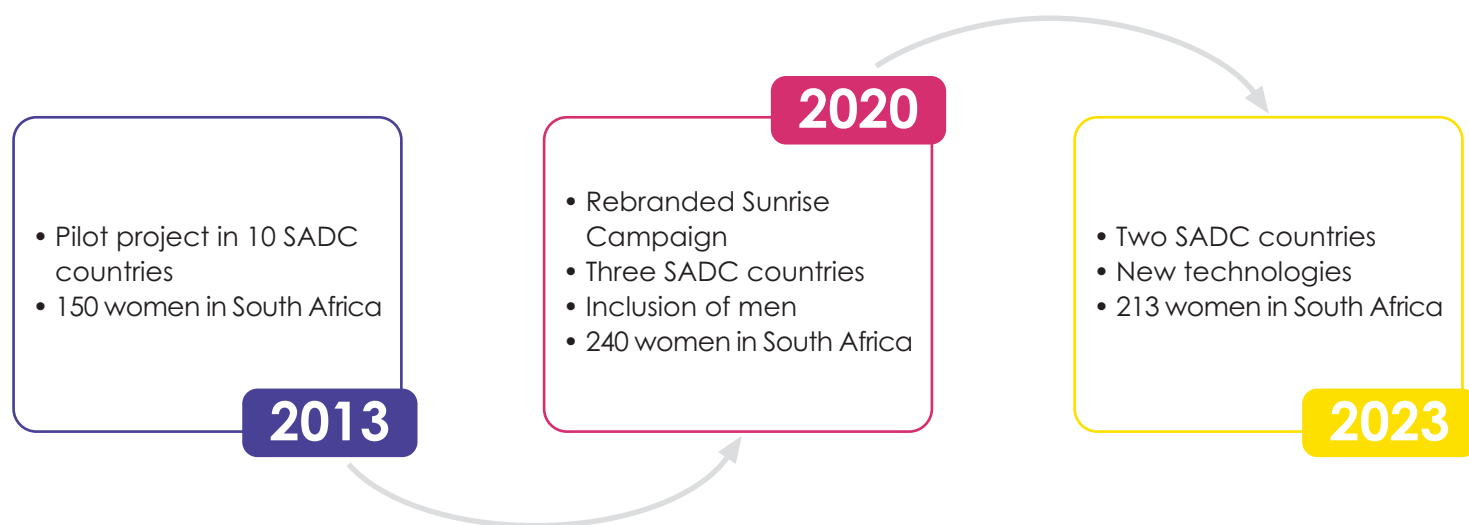
Interventions include forming Women in Local Economic Development (WLED) Networks, and integrating economic power into local GBV action plans. This approach seeks to address the high levels of GBV in South Africa, which compromise women's ability to exercise their rights, with many remaining in abusive relationships due to economic dependence.

⁷² SADC Vision 2050 | SADC (no date). Available at: <https://www.sadc.int/pillars/sadc-vision-2050> (Accessed: 4 November 2024).

⁷³ Economic Justice (no date) Gender Links. Available at: <https://genderlinks.org.za/what-we-do/justice/entrepreneurship/> (Accessed: 4 November 2024).

⁷⁴ Emerging Entrepreneurs Archive (no date) Gender Links. Available at: <https://genderlinks.org.za/emergingentrepreneurs/> (Accessed: 4 November 2024).

Figure 6.3: Evolution of Sunrise programme



The campaign has evolved over three phases, illustrated in Figure 6.3, incorporating new learning and becoming a robust model with a total reach of 13 540, including 3010 GBV survivors trained as entrepreneurs, an average of three family members per household (including, where appropriate, former perpetrators); Gender Focal Persons; members of GBV and Local Economic Development (LED) committees. The programme has demonstrated the link between economic power and reducing GBV.

Funding Leadership Opportunities for Women (FLOW) in the Netherlands supported the first phase from 2013 to 2015 in Botswana, Eswatini, Lesotho, Madagascar, Mauritius, Mozambique, Namibia, South Africa, Zambia and Zimbabwe. The United Nations Trust Fund (UNTF) to End Violence Against Women funded the project in South Africa, Madagascar and Eswatini from January 2020 to December 2022. Important innovations included a focus on young women and the inclusion of men. The project gained momentum in Zimbabwe in 2023 with funding from the Swedish Development Agency (SIDA) for Local Economic Development in 12 councils, with the Sunrise Campaign as a central pillar. In South Africa, the Irene M. Staehelin (IMS) Foundation, based in Switzerland, supports the

project in ten municipalities across four provinces as summarised in Table 6.4.

Table 6.4: The current Sunrise programme in South Africa

Province	Council	No of women
Gauteng	Emfuleni	20
Gauteng	Midvaal	21
Limpopo	Greater Tzaneen	21
Limpopo	Maruleng	20
Limpopo	Phokwane	20
Northern Cape	Magareng	20
Northern Cape	Platfontein	19
Northern Cape	Sol Plaatjie	20
Western Cape	George	17
Western Cape	Knysna	23
Grand Total		201

In the programme's third year, GL will collaborate with the councils and women entrepreneurs to implement campaigns highlighting the connection between economic empowerment and the prevention and reduction of GBV that include localised information, educational materials, communications, and a video documenting the programme's results. In November 2024, the entrepreneurs received R20,000 from IMS to invest in their businesses. Local mentors will support the women entrepreneurs.

In the pilot phase (2013 to 2015), 1350 survivors of GBV trained as entrepreneurs. 91% completed a business plan, and 79% followed through. 533 survivors of GBV in nine Southern African countries were mentored in the follow-up phase in 2016. Average income increased by \$35 per month after the first phase to \$328 per month in the follow-up phase. 85% (post-training) and 97% (follow-up) of participants said they now experience less or much less GBV (Gender Links, 2019). Overall, the relationship control index increased by four percentage points to 66%.

Participants' accounts illustrate significant outcomes through "I" stories and interviews. Some are summarised in the following narratives.



The first group of women in Phalaborwa during the pilot training workshop.

Photo: Susan Mogari

The participants aimed to achieve increases in their income. "I have learned that it is essential to budget before spending money. My spending habits have improved, and I now avoid purchasing unnecessary items. I am selling my goods on a cash basis or require my customers to provide a deposit before releasing any products. Previously, I was selling sweets and cigarettes, but now I focus on beauty products, ladies' handbags, and offering loans. We were taught to save the profits from our business and to refrain from using the money we've earned."

Eva from Phalaborwa.*

Some women were already running small businesses before the project, and there is evidence that they have improved their business management or have started more promising ventures: "I found the training very helpful and interesting. The most useful thing about the training was that I was taught how to save money from a business. This was a major lesson for me, and I can see improvement. Before I attended the training, I had a small business selling cool drinks and airtime at my house. In June 2015, I started to venture into a new business, renting out rooms. I hope to finish the building of all the rooms by June 2016. So far, I have built two rooms with bathrooms for rent. It was at the Gender Links workshop that I got the information and the encouragement to build these rooms. I am managing to do this project all by myself".

Maria Mathebula from Phalaborwa.⁷⁵*

⁷⁵ A * denotes a pseudonym as the participant does not want to be identified.

Training of service providers



SADC Gender Protocol Article 24: State parties shall introduce, promote, and provide:

- (a) Gender education and training for service providers involved in GBV, including the police, the judiciary, health, and social workers.
- (b) Community sensitisation programmes regarding available services and resources for survivors of GBV; and
- (c) Training of all service providers to enable them to offer services to people with special needs.

BPFA +20 Africa Declaration (4.1): Enact and strengthen the enforcement of laws addressing and punishing all forms of violence against women and girls through adequate resource allocation and targeted capacity-building of law enforcement agencies, including the judiciary.

To effectively respond to and support survivors of GBV, SADC countries must prioritise ongoing training for all service providers involved in GBV response. This includes police officers, judicial personnel, healthcare workers, and social workers. Continuous professional development is crucial for addressing emerging forms of violence, such as online abuse, and tackling persistent issues like human trafficking and the clinical management of rape survivors. By equipping these professionals with up-to-date knowledge and skills, SADC countries can ensure a more effective and compassionate response to GBV, enhancing the support provided to survivors. Several gender education and training programmes and tools have been introduced in SADC countries to improve their capacity to handle GBV cases effectively. These include:

SADC regional training guidelines: SADC has developed comprehensive tools⁷⁶ to curb GBV across the region. These include the Regional Sexual Gender-Based Violence (SGBV) Training Guidelines and the Guideline for Developing Standard Operating Procedures (SOPs) on SGBV. These tools aim to strengthen the capacity of law enforcement and other first responders to

address SGBV effectively. For instance, the guidelines cover critical areas such as victim rights, crisis intervention, crime scene management, and evidence collection. These tools have been used to train police officers, social workers, and judiciary members across SADC member states.

Capacity strengthening in member states: The European Union-funded Support to Peace and Security in the SADC Region (SPSS) programme aims to raise awareness of the SADC Protocol on Gender and Development, focusing on the provisions addressing GBV,⁷⁷ and the SADC Regional Strategy and Framework of Action for Addressing Gender-Based Violence (2018 - 2030). This initiative has provided extensive training to service providers in Botswana, Eswatini, Malawi, Mozambique, Namibia, Tanzania, Zambia, and Zimbabwe. Additionally, the SPSS programme has conducted Regional Training of Trainers (TOT) for investigators and engaged prison and corrections commissioners in rehabilitating SGBV perpetrators. These efforts have led to a critical mass of trained professionals capable of effectively responding to GBV, coordinating interventions, and raising public awareness.⁷⁸

⁷⁶ SADC Develops tools to Curb GBV across the Region | SADC (no date). Available at: <https://www.sadc.int/latest-news/sadc-develops-tools-curb-gbv-across-region> (Accessed: 4 November 2024).

⁷⁷ SADC-EU Support to Peace and Security Programme (SPSS) | SADC (no date). Available at: <https://www.sadc.int/project-portfolio/sadc-eu-support-peace-and-security-programme-spss> (Accessed: 4 November 2024).

⁷⁸ SADC makes considerable progress in strengthening capacity to effectively prevent and respond to sexual and gender-based violence in Member States | SADC (no date). Available at: <https://www.sadc.int/latest-news/sadc-makes-considerable-progress-strengthening-capacity-effectively-prevent-and-0> (Accessed: 4 November 2024).

The UN Women's handbook on gender-responsive police services offers detailed training materials for law enforcement agents to ensure they provide gender-responsive services.⁷⁹ It includes modules on understanding GBV, effective communication with survivors, and legal frameworks for protecting women's rights.



National training programmes: Many SADC member states have developed national training programmes. For example, **South Africa's** National Strategic Plan on Gender-Based Violence and Femicide (NSP GBVF), adopted in 2020, is organised around six pillars, one of which focuses on strengthening the criminal justice system's response to GBV.⁸⁰ This includes comprehensive training programmes for police, prosecutors, and judiciary members to ensure they handle GBV cases effectively and with sensitivity.

These initiatives highlight the significant progress made in strengthening the capacity of service providers to address GBV in SADC, ensuring better protection and support for survivors. However, with the increase of technology-facilitated GBV, SADC countries are recognising the need to adapt their training programmes to tackle TFGBV. Some key measures being implemented are:

Incorporation of online violence modules:



Some training programmes for police and judiciary now include specific modules on TFGBV.⁸¹ For example, in October 2024, the **Seychelles** Judiciary conducted a two-day intensive training session on handling digital evidence in modern trials. This training, organised by the International Law Enforcement Academy and led by experts from the United States (US) Secret Service, covered critical topics such as the authentication of digital evidence, privacy versus security, and the complexities of handling digital technology in legal proceedings. These sessions are part of a broader effort to equip judges and legal professionals with skills to address the challenges posed by the rapid advancement of digital technology, including TFGBV.

Similar training programmes have been conducted in **Botswana**. The ILEA in Gaborone, Botswana, offers a range of specialised courses, including those focused on handling digital evidence and addressing TFGBV.⁸² The ILEA Gaborone provides comprehensive training that includes modules on forensics, primary case management, and investigating and prosecuting organised crime, which are crucial for effectively addressing online violence.



Judge James Hudson and Deputy Criminal Chief for National Security and Cybercrime Ryan Locker addressing participants in Seychelles. Credit: ILEA

⁷⁹ Handbook on gender-responsive police services for women and girls subject to violence (2022) UN Women - Headquarters. Available at: <https://www.unwomen.org/en/digital-library/publications/2021/01/handbook-gender-responsive-police-services> (Accessed: 4 November 2024).

⁸⁰ <https://www.justice.gov.za/vg/gbv/NSP-GBVF-FINAL-DOC-04-05.pdf>

⁸¹ Seychelles Judiciary: Judges and Researchers Trained on Handling Digital Evidence in Modern Trials' (2024) The Judiciary of Seychelles, 15 October. Available at: <https://www.judiciary.sc/news/seychelles-judiciary-judges-and-researchers-trained-on-handling-digital-evidence-in-modern-trials/> (Accessed: 4 November 2024).

⁸² Gaborone, U.S.E. (2024) International Law Enforcement Academy, U.S. Embassy in Botswana. Available at: <https://bw.usembassy.gov/international-law-enforcement-academy/> (Accessed: 4 November 2024).

Prevention



SADC Gender Protocol Article 21.2: State parties shall, in all sectors of society, introduce and support gender sensitisation and public awareness programmes to change behaviour and eradicate GBV.

With the Southern Africa region experiencing extremely high rates of GBV, especially Intimate Partner Violence, there is urgency to prevent GBV. Governments have included GBV prevention among their top priorities, and numerous grassroots organisations have campaigns and awareness programmes around GBV prevention. They actively employ social media, mobilise communities and collaborate with local

leaders, especially during the annual 16 Days of Activism against GBV. Other strategies are the media, tech solutions, restorative justice and working with men and boys. Collaboration and integrated approaches are critical for GBV prevention. This section examines some of the innovative approaches to GBV prevention that have emerged.

Social Innovation Lab: Exploring new ways for GBV prevention in Southern Africa⁸³



The Deutsche Gesellschaft für Internationale Zusammenarbeit GmbH (GIZ) through its regional programme "Partnerships for Prevention of Gender-Based Violence in

Southern Africa" (PfP II), launched social lab platforms for addressing complex social challenges through an iterative and agile approach. Social labs are helpful under conditions where the situation is complex and requires multidisciplinary and systemic responses; existing good practices still need to be discovered, are insufficient, or need further development; and there is a willingness to collaborate with others to find and enact solutions.⁸⁴

Multi-stakeholder teams from Namibia, Lesotho, South Africa, Zambia, and Zimbabwe representing civil society organisations and public

and private sector actors, participated in a year-long in-country and regional process to learn from one another and develop strategies to strengthen and expand meaningful GBV prevention efforts in their countries and across SADC.

The social lab methodology allowed participants to explore different perspectives, focus on listening, analyse the underlying factors that perpetuate GBV, and embrace the diversity of experiences shared within the GBV context under the following umbrella themes:

- Mainstreaming GBV prevention in other sectors (including climate, infrastructure, health, SRHR and education)
- GBV, diversity and inclusion
- GBV in the digital space
- Masculinities

The Social Innovation Lab is a platform for uniting change agents in collaboration that transcends

⁸³ Partnerships for Prevention (no date). Available at: <https://partnershipsforprevention.org/article-view/the-social-innovation-lab-exploring-new-ways-for-gbv-prevention-in-southern-africa-23> (Accessed: 5 November 2024).

⁸⁴ Ibid

borders.⁸⁵ The participants' represent education, health and psychosocial support, positive masculinities, inclusion, and research sectors with backgrounds from policymaking to activism through fundraising, education and social development. Each sector has a different focus and approach to GBV prevention all of which are important in tackling GBV at its very roots. Participants' different perspectives and expertise catalyse the creation of new GBV prevention

ideas. The ideas conceptualised collaboratively in the Lab are ready for implementation. The country teams developed ten primary GBV prevention initiatives.⁸⁶ These were presented to funding partners at a pitching event during the SVRI Forum 2024. The event highlighted the importance of integrating local wisdom and insights with contemporary prevention strategies to build resilience and promote sustainable, context-relevant solutions.

Working with traditional leaders

Involving traditional leaders and their wives in the fight against GBV has emerged as a powerful strategy to address GBV, particularly in rural and traditional communities where traditional leaders hold significant influence and respect, making them critical allies in shifting cultural

norms and attitudes perpetuating GBV. For example, Chief Chikosha's wife, Mai Chikosha, has mobilised community support and advocated for women's rights in Ward 16 of Bindura Rural Council, Zimbabwe.⁸⁷



Zimbabwe: Chief's wife joins the fight against GBV

This case study highlights the significant role that the wives of traditional leaders, particularly Mai Chikosha, play in addressing GBV in rural Zimbabwe. ROOTS Africa, a Voice and Choice Southern Africa Fund (VCSAF) grantee, focuses on improving gender equality and reducing GBV through community engagement and advocacy in the country's Mashonaland Central Province. In rural areas, traditional leaders, including chiefs and their wives, significantly influence community norms. Chiefs have considerable authority and are vital in mobilising support for educational and awareness initiatives. Mai Chikosha, the wife of Chief Chikosha from Musiwa in Bindura Rural, has taken a stand against GBV in her community, which faces challenges like child marriage and sexual exploitation.

ROOTS works with Mai Chikosha who actively participates in community dialogues, advocating for education and support for women and girls, and mobilises other chiefs' wives to form a collective network against GBV. Despite facing challenges such as cultural resistance and resource limitations, her efforts demonstrate the effectiveness of grassroots leadership in fostering a supportive environment for discussing GBV and empowering women within the community.

Mai Chikosha began her advocacy through personal experiences and gained influence after



Mai Chikosha speaking during a community dialogue session.
Credit: ROOTS

⁸⁵ Ibid

⁸⁶ Ibid

⁸⁷ Zimbabwe: Chief's wife joins the fight against GBV' (no date) Gender Links. Available at: <https://genderlinks.org.za/driversofchange/zimbabwe-chiefs-wife-joins-the-fight-against-gbv/> (Accessed: 7 November 2024).

representing the Chief in a community dialogue, where she stressed the need for an equal society. Her most impactful contribution has been leading community dialogues that discuss the impacts of GBV and educating the public on the importance of girls' education and the risks of early marriage. By relating these issues to cultural values, she has helped shift community perspectives.

Beyond her community, Mai Chikosha collaborates with other chiefs' wives to share knowledge, forming a supportive network that champions gender equality and GBV prevention. During meetings with ROOTS staff, she emphasises the need for more support for women in leadership roles.

These efforts are beginning to reshape community norms regarding GBV and gender equality. Despite pushback from some traditional leaders, Mai Chikosha advocates for collaboration between traditional and modern governance, promoting human rights while respecting cultural values.

At the national level, these community changes align with initiatives like the Not in My Village campaign, which aims to develop laws addressing child marriage. By combining grass-

roots efforts with policy advocacy, Mai Chikosha and her peers are working towards comprehensive laws that protect vulnerable individuals and promote gender equity.

Mai Chikosha and ROOTS Africa underscore the pivotal role that traditional leaders and their wives play in addressing GBV in rural communities. By leveraging their influential positions, these women drive meaningful conversations and foster a culture of support and empowerment. Their collaborative efforts highlight the potential for grassroots initiatives to create sustainable change in the fight against GBV.

In Mashonaland Central, supporting and empowering chiefs' wives in their advocacy work is crucial. For example, the Not in My Village campaign is currently aiding the development of provincial laws on child marriages, bringing all the chiefs in the province together. Utilising these existing relationships to bolster the efforts of female leaders like Mai Chikosha⁸⁸ is essential.

As communities navigate the complexities of gender issues, the experiences and insights gained from this case study serve as a valuable framework for future interventions. This emphasises the need for inclusive leadership and collective action in pursuing gender equality.

Role of the media



SADC Gender Protocol Article 29.7: State parties shall take appropriate measures to encourage the media to play a constructive role in eradicating GBV by adopting guidelines that ensure gender-sensitive coverage.

The Protocol urges the media to ensure gender equality in and through the media and to challenge gender stereotypes. The Protocol also discourages media from promoting pornography and violence against all persons, especially women and children.⁸⁹

In this digital age, the influence of print and electronic media in raising public awareness about GBV prevention, response, and support

is indispensable. Media plays a pivotal role in fostering a gender-just society by providing accurate reporting, shaping political discourse,

⁸⁸ https://www.instagram.com/reel/C8ycOv8tra2/?utm_source=ig_web_copy_link&igsh=MzRIODBiNWFiZA== In This Instagram Post, Mai Chikosha addresses the participants of a community dialogue on the importance of the law.

⁸⁹ SADC Protocol on Gender and Development Article 29 (1-7).

and dispelling myths and harmful attitudes. Citizens rely on the media for trustworthy information about GBV and emerging threats like climate change and global political instability. Media campaigns have proven effective in influencing behaviour change and reducing

GBV, demonstrating the power of media initiatives in driving societal transformation. Beyond highlighting problems, media also offers solutions, leveraging technology to amplify voices and mobilise communities against GBV.

Role of GBV media campaigns in SADC

The media is crucial in addressing and ending GBV in the SADC region. When media outlets highlight the prevalence and impact of GBV, they bring attention to the issue and encourage public discourse. This helps to break the silence and stigma surrounding GBV. By highlighting personal stories and statistics, campaigns, such as the 16 Days of Activism Against Gender-Based Violence, help to bring GBV into the public eye and foster a greater understanding of the need for prevention. For example, sustained media reports have brought to the fore the alleged abuse and rape of Congolese women migrants expelled from Angola.⁹⁰

Media campaigns can influence policy changes. By keeping GBV issues in the public discourse, campaigns can pressure governments to adopt

and implement more robust policies and frameworks to combat GBV. For example, during the 16 days of Activism campaigns, various Malawian media outlets highlighted the alarming rates of GBV in the country and the urgent need for more robust policies and enforcement mechanisms. The widespread media attention and public discourse generated by the campaigns put significant pressure on the government to act. There were renewed calls for the implementation of the National Plan of Action to Combat Gender-Based Violence 2014-2020 and for increased funding for GBV prevention and response programmes. This example demonstrates how sustained media campaigns can keep GBV issues in the spotlight, influencing policy changes and encouraging government accountability.⁹¹

Media campaigns can influence behaviour change

Mass media campaigns can effectively change health behaviours by promoting healthier and discouraging harmful choices. This was evident during the HIV and COVID-19 pandemics. Similarly, media campaigns are crucial in addressing GBV. Behaviour change often stems from altering individuals' beliefs or attitudes. However, studies indicate that changing perceptions of the social environment is more effective.⁹² For instance, SADC countries can learn from how Ugandan edutainment videos on domestic violence increased the willingness

to report incidents and reduced actual violence over six months.⁹³ This change was not due to altered attitudes towards violence but rather a shift in how viewers perceived community responses. The videos depicted appropriate handling of reports, leading viewers to believe that the community would support them and that reporters would not face social repercussions. In summary, media campaigns can drive behaviour change by influencing social perceptions and expectations rather than just individual attitudes.⁹⁴

⁹⁰ Rolley, S. (2023) 'Dozens raped as migrant workers expelled from Angola to Congo', Reuters, 13 April. Available at: <https://www.reuters.com/world/africa/dozens-raped-migrant-workers-expelled-angola-congo-2023-04-13/> (Accessed: 5 November 2024).

⁹¹ Eliminating gender-based violence is possible in Malawi | United Nations in Malawi (no date). Available at: <https://malawi.un.org/en/41494-eliminating-gender-based-violence-possible-malawi> [Accessed: 6 November 2024].

⁹² Silva, A. et al. (no date) 'Mass Media, Behaviour Change & Peacebuilding'.

⁹³ Ibid

⁹⁴ Ibid

Media initiatives influencing the reduction of GBV in SADC

The Spotlight Initiative, funded by the European Union and implemented by the United Nations, focuses on ending sexual and gender-based violence and eliminating child marriages. It includes extensive media campaigns to raise

awareness about GBV and educate communities on available support services. The initiative has strengthened over 40 women's organisations in Mozambique to advocate for women's rights and challenge harmful practices.⁹⁵

Tech: Beyond problems and solutions

When discussing technology as a facilitator of or solution against violence, Jac sm Kee, a feminist activist, writer and researcher from Malaysia and an advocate for feminist digital security, warned against seeing tech as merely a tool, whether for good or harm: "Technology is not neutral. The governance structures, algorithms and platforms all reflect the same offline power imbalances. It's no accident that women, queer people, and marginalised communities face violence the moment they step into public digital spaces. These spaces weren't designed for us." Instead, technology should be seen as an infrastructure that shapes political power, relationships and resource access. For this reason, survivors, women and other marginalised people must be part of decision-making processes regarding the creation and governance of technology.

The UN Women organised sessions that explored digital solutions to combat violence against women and girls. These sessions provided a

platform for discussing innovative approaches and best practices from various SADC countries. They highlighted the importance of integrating digital literacy and safety into GBV training programmes for police and judiciary.

It's no accident that women, queer people, and marginalised communities face violence the moment they step into public digital spaces. These spaces weren't designed for us

Source: SVRI Forum 2024: From crisis to change.⁹⁶

One digital initiative is the GIZ Partnership for Prevention (PfP2) Connected for Change initiative. The initiative is a regional collaboration between civil society organisations working in

the digital spaces in Lesotho, South Africa, Zambia, Namibia, and Zimbabwe to scale the use of the Nokaneng app⁹⁷ in Lesotho to the other countries.

⁹⁵ Freeing women and girls from violence and abuse in Mozambique (2022). Available at: <https://www.unv.org/Success-stories/freeing-women-and-girls-violence-and-abuse-mozambique> (Accessed: 5 November 2024).

⁹⁶ Krige, J. (2024) 'SVRI Forum 2024: From crisis to change', Lifestyle & Tech, 24 October. Available at: <https://lifestyleandtech.co.za/just-life/article/2024-10-24/svri-forum-2024-from-crisis-to-change> (Accessed: 4 November 2024).

⁹⁷ 'Lesotho: Nokaneng app - going digital on GBV' (no date) Gender Links. Available at: <https://genderlinks.org.za/casestudies/lesotho-new-app-to-prevent-gbv/> (Accessed: 8 November 2024).

Southern Africa: Connected for Change



The innovative multi-country project focuses on the primary prevention of TFGBV in the Southern Africa region. The goal is to create safer digital spaces and empower communities across Namibia, Zimbabwe, South Africa, Zambia, and Lesotho by leveraging a tailored mobile application, educational resources, and community engagement initiatives. Importantly, this project is designed to be replicable across all countries in Southern Africa, adapting to local contexts and needs. The comprehensive strategy involves conducting participatory workshops, developing localised multimedia content, and fostering interactive digital forums, including

advocacy for strengthening legal frameworks and online platform accountability.

The project seeks to actively collaborate with key stakeholders, including government agencies, civil society organisations, educational institutions, and technology companies, to cultivate an ecosystem that effectively addresses the root causes and harmful impacts of online gender-based violence. The initiative would consider the specific conditions of each country by building on 1) similarities (synergies for activities, apps, and materials) and 2) differences (promotion of exchange of lessons learnt and good practices.)

The project aims to raise awareness and promote a culture of respect and accountability in online spaces by targeting women, girls, men, boys, policymakers, and marginalised communities. By collaborating with local organisations and experts in each country, the project will ensure that methods are culturally relevant and practical.

Source: GIZ PfP2 Upcoming Flagships.⁹⁸

Restorative justice



SADC Gender Protocol Article 20.4: State parties shall put in place mechanisms for the social and psychological rehabilitation of perpetrators of GBV.

SADC Gender Protocol Article 23.5: State parties shall provide effective rehabilitation and reintegration programmes for perpetrators of GBV.

Noting that the legal path offered to redress GBV often fails to meet the needs of the survivors and seldom creates a safe place for their experiences within society, alternative methods of dealing with GBV cases are being explored. One such approach is restorative justice.

According to the United Nations, restorative justice is “a way of responding to criminal behaviour by balancing the needs of the community, the victims and the offenders”.⁹⁹ It can take many forms, such as family group conferencing, survivor-offender mediation and sentencing circles.

⁹⁸ Partnerships for Prevention, Nkaneng Digital Solutions. Available at: <https://test.pfp.gendel.com/flagships> Accessed: 6 February 2025).
⁹⁹ https://www.unodc.org/pdf/criminal_justice/Handbook_on_Restorative_Justice_Programmes.pdf

In the context of GBV, restorative justice involves addressing the harm caused by such violence through a process that includes the victim, the offender, and the community. This approach aims to provide healing and justice for the victim while holding the offender accountable meaningfully. However, applying restorative justice to GBV cases is complex and often controversial due to several factors:¹⁰⁰

- GBV often involves significant power imbalances between the victim and the offender, which can complicate the restorative process.
- Ensuring the safety of the victim is paramount. There is a risk that the restorative process could re-traumatise the victim or expose them to further harm.

- The victim and the offender must voluntarily agree to participate in the process, which can be challenging in GBV cases.
- The process must ensure that the offender takes full responsibility for their actions and that there are mechanisms to prevent future harm.

Despite these challenges, restorative justice can provide a space for victims to voice their experiences and needs, promote offender accountability, and foster community support for both victims and offenders.¹⁰¹

Consideration of existing rehabilitation programmes in SADC is crucial for understanding their effectiveness in transforming the behaviour of perpetrators and reducing GBV incidence.



Mauritius: Perpetrator rehabilitation programmes

The Family Welfare and Protection Unit (FWPU) has established several perpetrator intervention programmes to address domestic violence and rehabilitate offenders in Mauritius. One notable programme is the Domestic Violence Perpetrators' Rehabilitation Programme, launched in 2018 with a view to:

- Bring a change in mind-set that would help perpetrators to abstain from committing acts of violence.
- Enable them to manage anger, which often leads to domestic violence.
- Empower them to resolve conflicts in a peaceful manner.
- Educate them to become responsible partners in their relationship.

The programme includes counselling sessions and educational workshops designed to address the root causes of violent behaviour and promote

healthier relationships.¹⁰² Additionally, the Protection from Domestic Violence Act (PDVA), which has been amended multiple times since it was promulgated in 1997, includes provisions for the rehabilitation of perpetrators. These amendments mandate counselling and rehabilitation for offenders as part of the legal response to domestic violence.¹⁰³ The PDVA's comprehensive approach ensures that perpetrators receive the necessary support to change their behaviour while protecting victims. These programmes are part of a broader effort in Mauritius to create a coordinated community response to domestic violence, involving various stakeholders such as the police, social services, and victim support organisations.¹⁰⁴ By addressing the behaviour of perpetrators and providing them with the tools to change, Mauritius aims to reduce the incidence of domestic violence and promote safer communities.

¹⁰⁰ Government of Canada, D. of J. (2021) Victims of Crime Research Digest No. 14. Available at: <https://justice.gc.ca/eng/rp-pr/cj-jp/victim/rd14-rr14/p3.html> (Accessed: 6 November 2024).

¹⁰¹ Government of Canada, D. of J. (2021) Victims of Crime Research Digest No. 14. Available at: <https://justice.gc.ca/eng/rp-pr/cj-jp/victim/rd14-rr14/p3.html> (Accessed: 6 November 2024).

¹⁰² Family Welfare and Protection Unit (no date). Available at: <https://gender.govmu.org/Pages/Family-Welfare-and-Protection-Unit.aspx> (Accessed: 7 November 2024).

¹⁰³ Family Welfare and Protection Unit (no date). Available at: <https://gender.govmu.org/Pages/Family-Welfare-and-Protection-Unit.aspx> (Accessed: 7 November 2024).

¹⁰⁴ https://www.academia.edu/21737275/A_CRITICAL_ANALYSIS_OF_REHABILITATION_PROGRAMS_FOR_DOMESTIC_VIOLENCE_PERPETRATORS_IN_MAURITIUS

Mauritius also set up the Victim Empowerment and Abuser Rehabilitation Policy (VEARP) as a workplace initiative in both private and public sectors to address the problem of gender-based violence, particularly domestic violence. The purpose is to enhance the knowledge of both

employees and employers on the existing legislation and services and to urge them to be compassionate about domestic violence so that basic assistance can be provided to victims whenever required.

Source: Family Welfare and Protection Unit, Mauritius.¹⁰⁵



The SVRI Forum 2024 featured several discussions on restorative justice, particularly in the context of GBV. Various workshops focused on innovative approaches to restorative justice, emphasising the importance of community involvement and survivor-centred practices. These sessions explored how restorative justice can be integrated into existing legal and social frameworks to support victims better and hold perpetrators accountable. Researchers presented findings on the effectiveness of restorative justice programmes in different cultural contexts, highlighting successful practices for implementing restorative justice in GBV cases. A significant proportion of the discussions centred

on engaging men and boys in preventing GBV, with speakers emphasising the need to challenge harmful gender norms and promote positive masculinity through restorative justice initiatives. Policymakers and practitioners discussed the challenges and opportunities of incorporating restorative justice into national GBV strategies, sharing insights on creating supportive legal and social environments that facilitate the rehabilitation and reintegration of perpetrators while ensuring the safety and healing of victims. These discussions underscored the potential of restorative justice to transform responses to GBV by fostering healing, accountability, and community support.

Engaging men and boys

Restorative justice principles can effectively engage men and boys in preventing violence against women and girls in SADC countries by promoting accountability and empathy. Programmes that use restorative justice encourage participants to reflect on their actions, understand the impact of gender-based violence, and take part in community dialogues for gender equality. By participating in community mediation sessions, men and boys can challenge harmful gender norms and become advocates for change, contributing to the prevention of violence and fostering healthier relationships. The Government of Malawi has made strides by launching a comprehensive male engagement strategy.



Male involvement during the 16 days against GBV in Siteki, Eswatini.
Photo: Thandokuhle Dlamini

¹⁰⁵ Family Welfare and Protection Unit (no date). Available at: <https://gender.govmu.org/Pages/Family-Welfare-and-Protection-Unit.aspx> (Accessed: 7 November 2024).



The National Male Engagement Strategy

The Ministry of Gender, Community Development and Social Welfare in Malawi has officially launched a National Male Engagement Strategy to implement all male engagement initiatives in the country. Launching the strategy, the gender minister, Jean Muonaouza Sendeza, highlighted the under-representation of men and boys in efforts to combat gender-based violence. The

approach focuses on critical areas such as harmful social norms and sexual and reproductive health rights, signifying the government's commitment to achieving sustainable development goals 3, 5, and 10. The minister emphasised that successfully implementing the strategy could significantly enhance gender equality in Malawi.¹⁰⁶

Community involvement and support systems

Mobilising communities to support the social and psychological rehabilitation of GBV perpetrators is crucial for creating a safer and more equitable society throughout SADC. This process involves several key strategies that leverage community resources, foster positive behavioural change, and ensure the safety and healing of victims.

Community education and awareness campaigns play a crucial role in addressing GBV. These campaigns focus on the root causes of GBV, such as harmful gender norms and social constructions of masculinity. By educating community members about the impact of GBV and the importance of rehabilitation, these

initiatives create a supportive environment for change.

Local leaders, influencers, and survivors actively engage in these efforts, amplifying their reach and effectiveness. For example, in **South Africa**, the Sonke Gender Justice organisation operates the Community Education and Mobilisation (CEM) Unit. This unit collaborates with women, men, boys, and girls across the country's nine provinces to tackle gender inequalities, GBV, and the spread of HIV and AIDS. These programmes are contributing to changing attitudes and behaviours regarding GBV.



Integrated approaches



SADC Gender Protocol Article 25: State parties shall adopt integrated approaches, including institutional cross-sector structures, to eliminate GBV.

Gender-based violence remains a pervasive issue across the SADC region, affecting individuals and communities at multiple levels. Despite efforts to address this challenge, a lack of coordinated and integrated approaches has often hindered

progress. The SADC Gender Protocol Article 25 emphasises the need for state parties to adopt integrated approaches, including institutional cross-sector structures, to eliminate GBV. This section explores various strategies to enhance

¹⁰⁶ Ministry of Gender launches National Male Engagement Strategy. Available at: <http://www.gender.gov.mw/index.php/news-events/news/item/30-ministry-of-gender-launches-national-male-engagement-strategy> (Accessed: 6 November 2024).

collaboration, update and implement National Action Plans (NAPs), ensure sustainable funding, monitor and evaluate interventions, engage communities, and reform legal and policy frameworks. By adopting these comprehensive

measures, SADC countries can create a more effective and unified response to GBV, ensuring that survivors receive the support they need and that perpetrators are held accountable.

Strengthening cross-sector collaboration



Collaboration between government agencies, NGOs, and community organisations is crucial for addressing GBV effectively. For instance, the Diamond Trading Company (DTC) in **Botswana** is collaborating with NGOs such as Women Against Rape (WAR) to provide comprehensive support services to survivors.¹⁰⁷ This partnership has improved service coordination, ensuring survivors receive timely and comprehensive care.

Such multi-stakeholder approaches can be replicated across SADC to enhance efficiency in eliminating GBV. Incema, a grantee of the VCSAF, is doing this by forming strategic partnerships with various stakeholders to make significant progress in addressing social challenges.



South Africa: Integrated approach delivers results

Incema, a VCSAF grantee based in KwaZulu-Natal, South Africa, focuses on broad social challenges, particularly Sexual Reproductive Health and Rights (SRHR) and GBV. The organisation aims to enhance its outreach to vulnerable groups such as women, children, and youth while establishing partnerships with diverse stakeholders to increase its programme's scale and effectiveness.

In collaboration with the Human Sciences Research Council (HSRC), Incema focuses on educating young people in rural settings, specifically within schools, to address early misconceptions surrounding SRHR and promote informed decision-making. This initiative targets schools like Ingqawangele High School, Siyanda High School, and Sanzwili Primary School, aiming to improve sexual and reproductive health outcomes for young people.

Incema's GBV Hotspots programme provides essential emergency services to survivors of violence, including access to medical care, legal assistance, and psychosocial support. Incema works closely with local healthcare providers, legal entities, and mental health professionals to ensure survivors receive the help they need promptly and confidentially.

Recognising the critical role men and boys play in ending GBV, the "I Am a Man and I" Campaign challenges traditional notions of masculinity and encourages men to reflect on their role in preventing violence. The campaign involves workshops, social media engagement, and community discussions, where men are encouraged to take responsibility for their behaviour and become allies in the fight for gender equality.

¹⁰⁷ 'DTC Botswana Supports WoMen Against Rape in Maun - DTC Botswana' (no date). Available at: <https://www.dtcbotswana.com/dtc-botswana-supports-women-against-rape-in-maun/> (Accessed: 8 November 2024).

Incema's multi-faceted approach is part of its strategy to facilitate long-term impact by confronting the root causes of SRHR and GBV. The organisation advocates and collaborates with government bodies and local communities to amplify its efforts. These initiatives signify a positive and expected development in Incema's commitment to fostering gender equality and healthier communities.

Beyond its work in SRHR and GBV, Incema has a history of collaborating with various stakeholders on initiatives to improve community well-being. For instance, Incema has partnered with the Department of Health to ensure its projects align with national strategies and policies. These partnerships have enhanced the reach of Incema's work and allowed the organisation to tap into government resources to support its initiatives.

Incema also focuses on women's economic empowerment, an essential strategy for reducing GBV. By providing women, particularly survivors of GBV, with access to vocational training, entrepreneurship workshops, and financial literacy programmes, Incema helps women achieve financial independence. This empowerment enables survivors to break free from abusive relationships, which are often perpetuated by economic dependency. Through these programmes, Incema fosters resilience and self-reliance among women, creating opportunities for them to thrive economically and socially.



'I Am a man and I' campaign launch in Pietermaritzburg in November 2023, South Africa. Credit: Incema

As part of its next steps, Incema plans to continue its engagement with schools to ensure sustained awareness and education around SRHR and GBV. By leveraging data and feedback from surveys conducted at participating schools, Incema aims to refine its programmes and address emerging needs among the youth. Furthermore, fostering partnerships with local government and health entities will remain a priority. These collaborations will support current initiatives and help establish a foundation for future outreach efforts, ultimately contributing to long-term, transformative change within rural communities.

Incema's expanded focus and innovative programmes highlight its commitment to comprehensively addressing SRHR and GBV, promoting gender equality, and fostering healthier communities in KwaZulu-Natal and beyond.

Source: Incema.¹⁰⁸

Ensuring sustainable funding for GBV in the wake of dwindling GBV funds



At the SVRI Forum 2024, discussions on dwindling funds highlighted the urgent need for sustained and increased funding to combat GBV, especially in low and middle-income countries where resources are often limited. The forum underscored that while laws and policies have

improved, more financial support is needed to ensure implementation. Activists and survivor-leaders emphasised that with adequate funding, efforts to prevent and respond to GBV would be sufficient and cohesive.¹⁰⁹ Key agreements that emerged from the discussions were:

¹⁰⁸ <https://www.incema.org.za/>

¹⁰⁹ Davey, D. (2024) 'SVRI Forum 2024: From crisis to change', The Mail & Guardian, 24 October. Available at: <https://mg.co.za/partner-content/2024-10-24-svri-forum-2024-from-crisis-to-change/> (Accessed: 7 November 2024).

- Participants agreed to explore innovative funding mechanisms to ensure sustainable financial support for GBV programmes. This includes leveraging public-private partnerships and encouraging international donors to commit to long-term funding. The establishment of dedicated GBV funds was emphasised.
- The forum called for a unified global advocacy effort to highlight the importance of funding GBV initiatives. This includes raising awareness about the impact of GBV and the critical need for resources to support survivors and prevent violence. The role of international organisations, such as the UNTF, in mobilising resources and providing technical support was emphasised.
- Another agreement was the importance of investing in data collection and research to

inform policy and programme decisions. Accurate data is essential for understanding the scope of GBV and evaluating the effectiveness of interventions. This evidence-based approach can help advocate for more resources and ensure funds are used efficiently.

The SVRI Forum 2024 highlighted the critical need for sustained and increased funding to combat GBV effectively. By prioritising survivor leadership, exploring innovative funding mechanisms, fostering global solidarity, and strengthening data and research, stakeholders can work towards a more coordinated and impactful response to GBV.



Namibia Secures EU and UNFPA funding to combat GBV

In a significant move to tackle GBV in Namibia, the European Union (EU) and the United Nations Population Fund (UNFPA) have committed funds¹¹⁰ to support initiatives aimed at eradicating GBV and promoting gender equality, focusing specifically on Zambezi, Ohangwena, Khomas, Kunene, and Omaheke. The rates of GBV in Namibia remain alarmingly high, ranging from 28% to 42% in certain regions. In September 2024, the Ministry of Gender Equality, Poverty Eradication, and Social Welfare (MGEPEWS) of Namibia, in collaboration with the EU and UNFPA, held an inception meeting for the Gender Equality/Combating Gender-Based Violence Project for 2024-2027¹¹¹. This meeting provided

an opportunity to review potential areas for collaboration among partners. Participants shared information and best practices related to GBV prevention and response and emphasised the importance of implementing cross-sectoral programmes and policies to tackle GBV effectively.

The EU and UNFPA view the initiative as essential for improving the well-being and empowerment of women and girls in Namibia, representing a significant step toward achieving gender equality in the country.

Source: The Namibian¹¹², UNFPA Namibia¹¹³

¹¹⁰ Nakashole, P. (2023) 'Over N\$30 million invested in combating GBV', The Namibian, 30 November. Available at: <https://www.namibian.com.na/over-n30-million-invested-in-combating-gbv/> (Accessed: 7 November 2024).

¹¹¹ Stakeholders gather for Inception Meeting of Gender Equality/ Combating GBV Project in Namibia (no date) UNFPA-Namibia. Available at: <https://namibia.unfpa.org/en/news/stakeholders-gather-inception-meeting-gender-equality-combating-gbv-project-namibia> (Accessed: 7 November 2024).

¹¹² Nakashole, P. (2023) 'Over N\$30 million invested in combating GBV', The Namibian, 30 November. Available at: <https://www.namibian.com.na/over-n30-million-invested-in-combating-gbv/> (Accessed: 7 November 2024).

¹¹³ Stakeholders gather for Inception Meeting of Gender Equality/ Combating GBV Project in Namibia (no date) UNFPA-Namibia. Available at: <https://namibia.unfpa.org/en/news/stakeholders-gather-inception-meeting-gender-equality-combating-gbv-project-namibia> (Accessed: 7 November 2024).



Next steps

Prevalence

- SADC countries need to establish a centralised and standardised system for collecting and monitoring data on GBV. It is essential to fund and conduct dedicated annual or bi-annual GBV surveys for current data gathering, as some of the IPV indicators are now dated.
- Governments should provide training for local agencies to ensure accuracy in data collection and promote partnerships among government bodies and NGOs for resource sharing.
- The integration of digital tools for real-time reporting and the securing of sustainable funding from local and international sources will further support these ongoing data collection efforts.
- There should be a strong emphasis on improving data collection methods regarding GBV, coupled with strict safety protocols to protect the privacy and well-being of victims. This will help to address gaps in evidence, guide appropriate interventions, and hold responsible parties accountable.

Drivers of GBV

- SADC countries should prioritise the establishment of comprehensive bilateral and multi-lateral agreements to foster cooperation against trafficking in persons. This should include joint actions among origin, transit, and destination countries, alongside robust capacity-building initiatives for law enforcement and the implementation of awareness-raising campaigns to address and mitigate trafficking issues effectively.
- It is crucial to define and implement effective policies that address both sexual violence in conflict and TFGBV. This should involve interdisciplinary collaboration among researchers, civil society organisations, and government bodies to develop comprehensive solutions that effectively tackle the challenges faced by survivors and at-risk communities.

Effects of GBV

- Addressing GBV in the SADC region requires comprehensive strategies that include immediate support for victims, long-term mental health care, economic empowerment programmes, and community education to break the cycle of violence.

Response

- Member states need to review legislation to conform to the SADC GBV model law guidelines and to be responsive to the realities of TFGBV.

Support

- It is recommended that community involvement in restorative justice processes is strengthened to ensure they are survivor-centred and that the needs of victims are prioritised, thus fostering a support network that aids both victims and offenders in their rehabilitation journey.

GBV Prevention

- It is crucial to explore and establish innovative funding mechanisms, including public-private partnerships and dedicated GBV funds, to secure long-term support for GBV programmes. Advocating for global solidarity and mobilising resources through international organisations will also play a vital role in addressing funding shortages.
- There is a need to look at prevention strategies holistically. More innovative programmes targeted at changing socio-cultural norms that condone and legitimise violence are needed.

Integrated approaches

- Countries should replicate successful multi-stakeholder approaches. Engaging government agencies, NGOs, and community organisations will create a more efficient and comprehensive response to GBV.



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