Ending GBV and Achieving the SDGs 2019 Progress Report

DIEGO ANTONI
POLICY SPECIALIST, GENDER TEAM
GLOBAL POLICY NETWORK

JESSICA ZIMERMAN
GBV PROJECT SPECIALIST, GENDER TEAM
GLOBAL POLICY NETWORK
Table of contents

Project summary...............................page 1
Pilot overview...............................page 3
Initial findings...............................page 4
Looking ahead...............................page 12
Select knowledge products..........page 15
Results at a glance............................page 16
Financial overview............................page 17
Gender-based violence (GBV) is a global epidemic: the World Health Organization (WHO) estimates that 35% of women worldwide experience some form of physical or sexual violence in their lifetime.

Reducing GBV is a public good that benefits individuals, families, communities and states in many ways, it: reduces risks to HIV and mental illness; improves economic productivity and educational attainment; and helps enable women to fulfill their social, economic and political rights.

GBV is a cross-cutting issue that requires cross-cutting solutions; no single sector or ministry will eliminate it alone.

There is a growing body of GBV prevention programmes that prove that ending GBV is possible. Methodologies such as SASAI, Stepping Stones and Indashyikirwa have all shown to reduce intimate partner violence.

Despite these gains, key questions remain: how can existing evidence-based programmes be adapted for scale? and what are effective ways to affect the institutional level changes that are necessary to prioritize GBV prevention and response?

It is against this background that the Republic of Korea and UNDP launched the “Ending GBV and Achieving the SDGs” initiative. Leveraging UNDP’s SDG integrator function, broad development portfolio and convening power, this project initiated seven pilots across UNDP’s five regions: Bhutan, Indonesia, Iraq, Lebanon, Republic of Moldova, Peru and Uganda.
The project’s objectives are threefold: to contribute to the evidence-base of what works to address and prevent GBV and while exploring the interlinkages with other SDGs (Output 1); to inform evidence-based policy making and shrink the gap between research and practice (Output 2); and to empower local partners with the skills, knowledge and opportunities to carry forward the initiative after the project cycle ends (Output 3).

The pilots are testing different approaches to ending GBV and achieving progress towards reaching other development goals. Pilots in Iraq, Lebanon and Uganda are integrating GBV prevention in large projects in “non-gender” sectors, including climate change, livelihoods and social cohesion.

The “Planning and Paying” pilots in Indonesia, Republic of Moldova and Peru are bringing together diverse community stakeholders to define their own solutions and establish sustainable financing for local GBV action plans.

The pilot in Bhutan is somewhat of a hybrid of the two different types of pilots in that it is exploring the linkages between GBV and violence against children, and using social innovation camps to empower youth to define community-driven solutions.

Each pilot will be rigorously evaluated to ensure the project’s results are according to global standards of evidence. Pilots in Indonesia, Lebanon, Republic of Moldova, Peru and Uganda will also be costed to assess value for money and estimate the cost of possible scale up to reach a greater number of people. The United Nations University International Institute of Global Health (UNU-IIGH) will conduct this costing research.

This portfolio-approach cuts across all six Signature Solutions, UNDP’s cross-cutting approaches to development, with particular emphasis on: Signature Solution 6: strengthen gender equality and the empowerment of women and girls; Signature Solutions 2: strengthen effective, inclusive and accountable governance; Signature Solution 3: enhance national prevention and recovery capacities for resilient societies; and Signature Solution 4: promote nature-based solutions for a sustainable planet.

By addressing the structural drivers of GBV and working across development sectors, the project also fully embodies and contributes to UNDP’s Gender Equality Strategy (2018-2021).
Pilot Overview

**UGANDA**
Integrating GBV prevention within a climate change project (Wetlands Restoration and Alternative Livelihoods, funded by GCF). Significantly increased levels of awareness and demand for GBV prevention among diverse government stakeholders.

Completed: partner recruitment, formative research, market/livelihoods and gender study, capacity and needs assessment, capacity building of government partners, intervention guide.

**LEBANON**
Adopting the Indashyikirwa model for Syrian refugees and Lebanese host communities. Will introduce Gender Equality Cafes, structured activism opportunities for women to engage with municipal leaders.

Completed: staff and partner recruitment, formative research, Indashyikirwa curriculum adaptation.

**IRAQ**
Exploring ways to integrate GBV prevention into a larger stabilization project, working with Syrian refugees in Northern Iraq.

Completed: formative research regarding the linkages between livelihoods, social cohesion, violence and gender inequality.

**BHUTAN**
Addressing inter-generational cycles of violence by working with adolescents and caregivers on gender equality, non-violent communication and community activism.

Completed: team and partner recruitment, CSO partner capacity assessment, baseline survey, intervention manual, facilitators training, social innovation camp for youth, ongoing sessions with adolescents and caregivers.

**SOUTH AFRICA**

**PERU**
Using COMBOS (a tool to identify multidimensional challenges and solutions) to co-design La Instancia, a model to “plan and pay” to address GBV in Villa El Salvador, a district of Lima with the most cases of violence against women in Peru.

Completed: team and partner recruitment, formative research, cost of no GBV prevention study, creation of La Instancia, ongoing implementation of local planning and paying process.

**MOLDOVA**
Empowering decision makers and community members in the region of Gagazia to localize national policies and take joint actions on preventing and addressing GBV. Created a multi-disciplinary task force on combating GBV and signed an MOU between the government and UNDP. Moldova to establish a women’s safe space, the first of its kind in the region of Gagazia.

Completed: team and partner recruitment, situational analysis/formative research, nine capacity building activities, ongoing implementation of local planning and paying process, community crowdfunding campaign, theatre performances and community mobilization.

**INDONESIA**
Catalyzing a participatory planning and budgeting process with the aim to amplify women’s voices and improve multi-sectoral coordination and activate a community-based referral mechanism.

Completed: team and partner recruitment, situational analysis, ongoing advocacy with local level and Papua Desk.
Initial Findings

As the project reaches its mid-way point, this report reflects a stocktaking of the key lessons, promising practices and tentative conclusions gleaned thus far. While each pilot setting is unique, six common elements have emerged as key ingredients for achieving the project's goals. These critical success factors can be broadly summarized by the six themes below. More details can be found in the pages that follow.

1. Innovate

2. Diversify partnerships

3. Pursue vertical and horizontal integration

4. Empower through participation

5. Share costs

6. Engage in action research
1. Innovate

The SDGs represent the most ambitious global agenda yet. With only eleven years to go, Agenda 2030 will not be achieved by "business as usual." We need to radically amplify our impact through innovative, improved practices, and working with new and diverse partners.

From its outset, the GBV and SDGs project adopted innovation as its mantra. This drive to innovate infused the project with a creative, adaptive and learning-focused approach. This has allowed it to successfully manage the complexity and dynamism of development challenges, and inspire outside-the-box thinking. It has enabled it to adapt existing best practice—such as SASA!, Indashyikirwa and CETA methodologies— but with an infusion of complex systems thinking that has allowed greater focus on transforming institutions and structural factors themselves.

In the Republic of Moldova, a survivor-centered and human-centered design process engaged survivors and service providers to develop a women’s safe space, which will provide psychosocial support services, along with peer support and livelihoods training. The safe space is the first of its kind in a marginalized region of Moldova.

In Bhutan, social innovation camps have empowered youth to identify and present solutions to end GBV and foster active citizenship to community leaders.

In Lebanon, structured activism opportunities called “Gender Equality Cafes”, will provide spaces for women to raise issues and put forward recommendations to municipality leaders.

In Peru, multiple methodologies—including a mapping of SDG indicators, a network of women leaders, a radio programme and cooperation with cultural organizations to develop violence-free art work for community spaces—are reshaping ways to collaboration to end GBV.

Innovation has been key not only in project design and implementation, but in monitoring and evaluation as well. Through a user-experience workshop, the project developed new tools that better capture complexities of social change, along with practice-based learning.

Survivor-centered approach

This approach applies a human rights-based approach to designing and developing programming that ensures that survivors’ rights and needs are first and foremost.

At the heart of this approach is the belief that survivors have a right to be treated with dignity and respect, instead of being exposed to victim-blaming attitudes.
2. Diversify partnerships

Innovation is not limited to doing things differently; it can also entail engaging new actors, or engaging traditional actors in new ways.

By expanding both the type and number of partners engaged in GBV prevention and response (and offering spaces for their ongoing and meaningfully engagement), the GBV and SDGs project has fostered high levels of political commitment and political will - two often missing but necessary elements of sustainable social transformation. Its new and untraditional partnerships have also enabled the project to significantly broaden its reach, overcome silos and institutionalize multisectoral action.

In Uganda, UNDP has partnered with the Ministry of Water and Environment (MWE) and Ministry of Agriculture, Animal Industry and Fisheries (MAAIF) to integrate GBV prevention into an ongoing Green Climate Fund (GCF) project on wetlands restoration and alternative livelihoods. In doing so, the project has expanded its reach exponentially and found some untraditional champions. Ministry officials were initially skeptical about the linkages between GBV and their ministry’s work, preferring to discuss “gender enhancement” rather than GBV. After continuous sensitization efforts and community-based formative research, government partners are now calling for more guidance on how to prevent GBV and integrate it throughout the GCF wetlands restoration project.

In the Republic of Moldova, the GBV and SDGs project brought together diverse individuals, including representatives from outside the traditional “GBV” sectors such as health and justice. Through a process of co-design, these actors jointly created a local GBV action plan. Providing opportunities for diverse stakeholders to meaningfully come together, exchange ideas and jointly take decisions, has encouraged broad political buy-in and opened up new programmatic avenues, including women’s economic empowerment and theatre as a tool for social change.

In Peru, the GBV pilot has engaged the private sector both locally and at the corporate level. At the pilot site, small business owners - mostly women - have been invited to participate in JUSTA, the newly created women’s network. BBVA, a private bank, has also decided to participate in JUSTA.
3. Pursue vertical and horizontal integration

Many countries have national policies and frameworks to end GBV and achieve SDG target 5.2, but there is often a gap between normative commitments and the lived experiences of women and girls. At the same time, there is a wealth of local level experiences that can be better used to inform national and regional practices and policies.

One central lesson coming from the project then is the importance of working at multiple levels of government, as national policies and commitments may not always “trickle down”, and the local needs, perspectives and solutions are not always shared on a national scale.

The project’s efforts to localize national policies and international commitments, predominantly through its “Planning and Paying” pilots in Indonesia, the Republic of Moldova and Peru, represents a very promising way to localize national policies on the one hand, while also bringing local solutions to national scale on the other.

The planning and paying approach (see next page) adapts participatory techniques for creating customized local action plans. It engages a diverse group of local actors from the government and civil society in the design, implementation, monitoring and evaluation of the local action plans.

Local stakeholders ensure local action plans are grounded in community realities (including municipal government structures, social norms and trends); they anticipate points of support and resistance within their communities, and craft strategies to respond accordingly.

Participatory planning also brings rights to the forefront, as those affected by GBV can exercise their right to create solutions to problems they experience firsthand.
The Republic of Moldova has very strong national legislation and policies to eliminate GBV, though many are not available in Russian, the lingua franca of Gaguazia, the autonomous region GBV and SDGs pilot site. Using the local action plan as a framework, the pilot localized the provisions in the National Strategy on Prevention and Combating Violence against Women (2018-2023). After participatory community discussions and action planning - involving inputs from the multiple stakeholders, local people and survivors of violence - the local Council of Chirsova approved and contributed funds to implementing the local action plan. Given the pilot’s success, the government of Gaguazia is exploring ways to scale the pilot throughout the region.

In Indonesia, the pilot is working with the district Jayapura to include GBV prevention in the policies and budget of the provincial five-year action plan for development (2020-2025). The aim is for the village government to fund and implement the local GBV action plan, whereas the district government will invest the multi-sectoral funding for the GBV referral service mechanism which will make the local plan possible.
4. Empower through participation

Participatory processes help ensure the voices of those most marginalized and impacted by violence have a say in decision making. These processes not only empower participants, but also have the additional positive effect of strengthening capacities, which is a goal of this project in and of itself.

In Bhutan, the facilitators of the school clubs have indicated that they have increased their understanding of gender roles and have become to recognize their own unconscious biases. They have also noticed an improvement in their parenting skills and their ability to communicate with their children.

In the Republic of Moldova, stakeholders engaged in developing the local action plan developed skills and knowledge of key areas such as referral mechanisms and identification of children subjected to violence. Indeed, the "Planning and Paying" process created an entry point for people to express their desire and willingness to learn more and become more actively engaged in GBV prevention and response.

In Peru, stakeholders utilized the COMBOS methodology to identify synergies and interconnections between different goals and objectives of Agenda 2030. Participants not only used the insights gleaned from the COMBOS to establish a local mechanism eradicate GBV, but they also now have COMBOS in their planning toolboxes and can apply this approach to their respective ministries and organizations.

In Indonesia, the process of integrating GBV prevention into the village action plan and budget is ongoing but has already significantly raised the awareness of key government decision makers regarding the scale of the issue and the existing mechanisms and funds available to address it.
5. Share costs

The practice of cost-sharing has been an effective strategy to build local ownership, cultivate buy-in and plant the seeds of organizational culture shifts. In many cases, cost-sharing has also been used to overcome sectoral siloes.

A sample of the cost-sharing agreements can be found in the chart below.

In addition to the institutional arrangements, committed citizens have also expressed their support to end GBV. In one particularly moving example in Moldova, a young couple, Alina and Nelu, encouraged all of their wedding guests to donate to the pilot-established women’s safe space, in lieu of wedding bouquets. This is an extension of a broader crowdfunding campaign which has mobilized funds from community members.
6. Engage in action research

Linking research with action, through critical reflection and engagement of community-based actors (or action research) has allowed the project to deepen its context-specificity and embed the perspectives of community activists from the outset.

<table>
<thead>
<tr>
<th>PILOT</th>
<th>KEY FINDINGS OF FORMATIVE RESEARCH</th>
<th>IMPLICATIONS FOR INTERVENTION DESIGN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bhutan</td>
<td>Violence against women prevalence is significantly higher than expected and national GBV work focuses on response, with far less attention given to prevention.</td>
<td>Pilot a primary prevention intervention that engages with youth and caregivers to address the root causes of GBV.</td>
</tr>
<tr>
<td>Indonesia</td>
<td>The village level rarely invests in preventing GBV.</td>
<td>Use the pilot intervention as a demonstration fund on how a participatory process leads to better results and new sources of funding to address and prevent GBV.</td>
</tr>
<tr>
<td>Iraq</td>
<td>While men were concerned about women’s safety in the community, women noted that they did not always feel safe from violence in their own homes. Women’s caregiving and household responsibilities would not decrease even if they become involved in economic activities</td>
<td>Engage both men and women in relationship-based interventions may be helpful. Address norms around the burden of care and household work.</td>
</tr>
<tr>
<td>Lebanon</td>
<td>Syrian refugees reported struggling with stress. Openness to women engaging in income-earning activities was seen as a temporary change, given the circumstances of displacement.</td>
<td>Incorporate psychosocial support and explore ways to effect long-term norm change beyond temporary living situations.</td>
</tr>
<tr>
<td>Republic of Moldova</td>
<td>No GBV-related services exist in the autonomous region of Gagauzia. Alcohol abuse was found to be an important driver of intimate partner violence.</td>
<td>Establish a safe space with a co-financing model and incorporates new approaches for psychosocial support, along with ways to effect long-term social norm change.</td>
</tr>
<tr>
<td>Peru</td>
<td>The enormous cost of GBV is largely borne by community members.</td>
<td>Advocate for greater government investment in GBV prevention.</td>
</tr>
<tr>
<td>Uganda</td>
<td>Existing livelihood &amp; climate change mitigation efforts are increasing GBV risks &amp; perpetuating patriarchal gender norms.</td>
<td>Develop and integrate Do No Harm GBV sensitive strategies for livelihoods and climate mitigation work.</td>
</tr>
</tbody>
</table>
Looking ahead...

In 2019, the GBV and SDGs project made significant strides in its efforts to generate new evidence on effective strategies to prevent GBV. Each of its seven pilots demonstrated what is possible when innovation is applied to participatory, survivor-centered approaches that empower citizens and inspire institutional shifts.

The upcoming period offers a critical opportunity to solidify the transformational changes initiated by the project. 2020 is also a time to deepen and expand knowledge of these innovative processes, intensify capacity building efforts, along with evaluate and measure impact.

The project's priorities for 2020 are detailed below:

Safeguards
As part of its overall commitment to impactful positive change, UNDP mainstreams social and environmental safeguards within its projects. These have historically focused on identifying and mitigating potential adverse impacts on people and the environment, without specific mention of GBV-related risks. In its recent update to its Social and Environmental Standards however, UNDP included language on GBV. This presents a significant entry point to incorporate GBV safeguards throughout UNDP’s portfolio, and to open up conversations about GBV prevention to a "non-GBV" audience.

The upcoming period provides a key opportunity to apply lessons from the “integration” pilots in Bhutan, Lebanon, Iraq and Uganda beyond the GBV and SDGs project and impart changes at the institutional level of UNDP.

Making the business case
Initial reflections indicate that costing and value for money research may be a very effective advocacy tool. For example, a recent study commissioned by the GBV and SDGs pilot in Peru, found that GBV caused an economic loss of more than 72.9 million USD to the communities in the pilot community of Villa El Salvador in 2018 alone. This is the equivalent to 53% of the Peruvian Ministry of Women and Vulnerable Populations’ national budget for the same year; it is also four times greater than the amount Villa El Salvador’s district government spent on infrastructure in 2016. This research has opened up new dialogue with government decision-makers on GBV prevention and their commitments in this regard. It has also become a baseline by which the pilot and the municipal government can measure impact.

During the upcoming period, it will be critical to monitor how the initial responses to the "business case" inspire concrete action. The forthcoming financial and economic costing research conducted by UNU-IIGH will be an important addition to the project’s advocacy toolbox.
**Peace-development-humanitarian nexus**

The pilots in Iraq and Lebanon share many similarities - both are working with internally-displaced persons (IDPs), returnees and host communities affected by the Syrian crisis, using livelihoods and gender equality as entry points to bring people together and improve social cohesion. However, they are set apart in several important aspects that bear further exploration. In particular, the relatively short project timeframe in conflict-affected Iraq, presents unique challenges and opportunities for GBV prevention.

The upcoming period offers an opportunity to apply the recommendations from the project’s research on livelihoods programming and GBV in communities affected by the Syrian crisis (see Knowledge products for more details).

**Accountability mechanisms**

In order for approaches to prevent and address GBV to be sustainable and ethical in the long-term, they need to be accountable to the communities they serve. The oversight mechanisms in the Planning and Paying model shows great promise in terms of institutionalizing national and sub-national government accountability in terms of planning, funding and delivering multisectoral programmes to prevent and respond to GBV.

During the next stage of the project, participants will begin to monitor local action plan implementation and will test the Planning and Paying model’s ability to hold implementers to account.

**Empowering grassroots civil society**

Civil society plays a key role in ensuring context-specificity and effectiveness, longer-term sustainability and accountability of governments to their commitments to end GBV. Not all of the pilot contexts had a strong civil society at the outset of the project however, and there is more room to engage with grassroots actors. The initial period laid significant groundwork for strengthening women’s movements and so this upcoming period will further support this process. For example, a Village Think Tank and a women’s empowerment CSO will be actualized in Indonesia and Moldova respectively.
Leave no one behind

Indicative results from the Planning and Paying pilots show that this methodology is effective at including historically marginalized groups though more time and effort is needed.

The upcoming period is a significant opportunity to redouble focus on engaging and empowering groups such as IDPs in Lebanon, Yezidis in Iraq, adolescents in Uganda, to give a few examples.

Policy translation

There is further need to translate the project’s experience and learnings into actionable policy tools and programming guidance. The RESPECT Framework for Policymakers, developed by WHO in partnership with several multilateral organizations, including UNDP, will be a primary guidance document for influencing policy agendas and encouraging policymakers to take necessary action.

2020 will also be an opportune time to deepen the links between the GBV and SDGs project and the EU-UN Spotlight Initiative (see left-hand side) and apply the project’s tools on a larger scale.

South-south cooperation

Knowledge exchange is a key tool to cross-fertilize, generate and spread ideas, knowledge and tools. In 2020, the project will expand its learnings beyond its pilot sites. In collaboration with UNDP’s Regional Gender Advisors and Regional Bureaux, fifteen countries will apply the recommendations and tools developed by the seven existing pilots. South Africa has already been identified as a prime example. Conflict-affected countries may be given special consideration.
Select knowledge products

Accessible resources:

Livelihoods and GBV in Protected Crises: Lessons from the Levant

Opportunities for Integrating GBV Prevention in Livelihoods and Social Cohesion Programming in Iraq: Formative Research Study

The Cost of No Prevention: Analysis and recommendations to face violence against women from the perspective of Villa El Salvador, Peru

Guidance Note: Planning and Paying for Local Action Plans to Address Gender-based Violence

Summary Brief: Local Action to End Gender-based Violence in Moldova

GBV and SDGs newsletters

Blogs:

- Why climate change is a gender issue - lessons from a pilot project in Uganda
- Time to radically change the status quo
- In defense of nature: women at the forefront
- The silent health toll of gender-based violence
- Violence against women, a cause and consequence of inequality
- Women are key to the resilience of our people and our planet

Forthcoming:

Guidance Note: Integrating GBV prevention into wider sectoral development programmes (2020)

Summary Brief: Local Action to End Gender-based Violence in Indonesia (2020)

Summary Brief: Local Action to End Gender-based Violence in Peru (2020)

Synthesis report: Integrating GBV actions into large scale programmes (2021)

Synthesis report: Participatory planning for localized GBV action plans (2021)
Results at a glance

Output 1

Indicator 1.1: Number of tested approaches
Indicator 1.2: Number of documented approaches
Indicator 1.3: Number of integrated approaches

Bhutan, Indonesia, Iraq, Lebanon, Moldova, Peru, Uganda

Output 2

Indicator 2.1: Number of policy advocacy tools produced
Indicator 2.2: Number of countries implementing recommend tools

Bhutan, Indonesia, Iraq, Lebanon, Moldova, Peru, Uganda, Global
Financial overview

Total resources: $3,950,000
For more information, please contact Diego Antoni, diego.antoni@undp.org