# Progressio’s Submission to the Global Plan of Action to strengthen the role of health systems within a national multi-sectoral response to address interpersonal violence, in particular against women, girls and children, building on existing relevant WHO work

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Progressio welcomes the opportunity to offer some recommendations to tackle the underlying causes of interpersonal violence against women and girls within the framework of the UN-WHO.

# Background

Progressio is an ECOSOC registered international development organisation that provides practical support to local community organisations in 9 countries and combines this approach with international policy and advocacy. Progressio has 75 years of experience on advocating for policy changes at international level and on building the capacity of local civil society organisations with a strong focus on gender justice and gender equality.

Progressio has always understood that the world won’t see an end to poverty solely through overseas aid. To achieve permanent, sustainable solutions to poverty and injustice, we must also tackle the structural barriers, which keep people poor.

For example, Yemen is a country that lies at the bottom of the global gender gap in the Middle East & North Africa[[1]](#footnote-1). Progressio has supported training for Yemeni women to become champions to combat the roots of discrimination[[2]](#footnote-2).

Addressing unfair power imbalances in gender relations is paramount in order to achieve long-term sustainable development. And, achieving gender equality and gender justice will be very difficult in a world that is increasingly unequal. For that reason, gender justice and gender equality should be at the heart of any development programme aimed at building democratic institutions in order to uphold human rights as a way of tackling injustice, discrimination and impunity.

# Rationale

It is a well-known fact that women and girls are commonly targeted by all forms of violence, which are often shaped by social and cultural norms frequently reasserted under the guise of conservative interpretations of religious and/or sacred texts.

Women and girls in fragile states are even more exposed to such violence because their rights would remain unprotected due to unresponsive national governance structures and are consequently more vulnerable to be victimised throughout the course of their lives[[3]](#footnote-3).

WHO has already recognised the challenges faced by conflict-affected societies where governance fragility represents a threat to service provision, as illustrated by the recent collapse of health care services in Yemen[[4]](#footnote-4).

At a recent seminar organized by the National Alliance of Women’s Organisations (NAWO) on ‘*Sex, Relationship and Consent Education in the UK’* it was stated: *“Life is but a series of personal relationships, if the foundation of these relationships is abuse, this will inevitably affect the quality of that society”*. It is reasonably clear that any global action plan aimed at strengthening national responses to address interpersonal violence should have a strong emphasis in changing society’s mind-sets, attitudes and behaviours towards women and girls, which may be derived from entrenched discriminatory social and cultural norms.

In order to cope with external factors (e.g. conflict, corruption, inexistent State institutions, etc.), fragile States often resort to dual systems of authority: customary and traditional, which run alongside any existing legislative system. This state of affairs bestows faith and traditional leaders with power and authority through which they exercise influence and control with ascribed legitimacy. Weak State structures and institutions are replaced by faith and traditional authorities, who become de facto service providers[[5]](#footnote-5) and in a position to shape society’s norms. If those faith and traditional leaders adopt conservative views of women’s role in society, they risk perpetuating discriminatory social norms and practices that preserve violence against women and girls. This is because any failure to comply with such norms and practices would result in more stigma, exclusion and violence.

Many social and cultural practices, such as female genital mutilation (FGM), forced and child marriages, femicide, marital rape, domestic violence, physical and psychological abuse, have been justified by faith leaders and scholars.

# Why is social and cultural norms and religious belief relevant in the context of violence against women and girls?

## Unequal Power Relations between genders

Violence against women and girls is a manifestation of unequal power relations between men and women. To achieve permanent, sustainable solutions we must also tackle structural barriers, transforming and rebalancing how genders relate to each other.

The pinnacle of violence exercised against women is the killing of women because they are women, which is better known as femicide[[6]](#footnote-6). However, at the root of gender-based violence lies the little value attributed to women and girls. For example, in Malawi, a family would favour sons over daughters to attend higher education, which has serious consequences in their long term future reflected in the gender gap in secondary and tertiary schooling[[7]](#footnote-7). This preference of boys over girls can also take the extreme form known as female-infanticide[[8]](#footnote-8), which has become an alarming trend and a global issue that demands serious attention.

Religious and traditional leaders, as the gatekeepers to communities, can play a role in redressing this imbalance and that is why their engagement is vital. They can potentially break down the barriers in between genders, as they are contacted far more frequently than formal State authorities, being thus well positioned to play a mediating role[[9]](#footnote-9). It is usually the case that imams and community leaders are usually the first responders in case of domestic abuse. If they are not trained on the pathology of violence they may inadvertently become complicit supporters[[10]](#footnote-10).

As mentioned in the Zero Draft, WHO should continue to build upon its previous work, most notably the 2007 paper *‘Faith-Based Organizations play a major role in HIV/AIDS care and treatment in Sub-Saharan Africa’* that states, “*the failure of health policy makers to understand the overarching influence of religion could seriously undermine efforts to scale up health services”*[[11]](#footnote-11).

**Case study: “HOPE: Honor, Power and Expectation for women in Hodedah” (Yemen)**

In 2014, Progressio deployed a Development Worker (DW) to Yemen who trained 60 religious leaders and 78 health workers on the impact of Female Genital Mutilation (FGM) and how to combat it. Despite initial resistance from the religious leaders, which resulted from the deeply engrained association of FGM to religious obligation, the DW was able to teach them the harmful effects of FGM, which allowed them to reinterpret religious teachings to protect women and helped each stakeholder to identify their role in eliminating the practice.

## The role of the media

The role of the media in society can be a source for good in disseminating messages and information. However, they could also play a detrimental role in perpetuating images and stereotypes by sensationalising and glorifying violence and by sexualising and devaluing of women and girls. The constant influx of violence can desensitizes men and women from a young age which could make violence appear as “the norm”. Violence can also be learned and facilitated by new technology[[12]](#footnote-12).

The media’s ability to influence and to reach remote locations (e.g. rural, urban, low and middle income countries) can be used to raise awareness challenging dominant masculinities and promoting alternative masculine identities[[13]](#footnote-13), which are more appropriate for creating healthy relationships.

**Case study: “The case of Puntos de Encuentro” (Nicaragua)**

For many decades, Puntos de Encuentro was a Progressio partner organization created as “a feminist social change organization dedicated to promote individual and collective autonomy and empowerment of young people and women”.

At the end of October 1998 Hurricane Mitch devastated Nicaragua with a series of floods, mud slides, loss of crops, houses, animals, roads, and bridges. Several thousand Nicaraguans lost their lives, and tens of thousands more lost their homes. Knowing well that masculine violent behavior intensifies in post-natural disaster phases, Puntos decided to connect its 1999 campaign to Hurricane Mitch – this was supported by Progressio’s Development Workers.

The campaign built on several main ideas: first, that violence against women constitutes a “disaster” in terms of damage to people and society; that unlike a hurricane, which is a natural phenomenon, male violence is not “natural” or unavoidable, it is totally within men’s control to avoid. And, that a family free of violence would contribute to the social and economic reconstruction of the country. With this campaign, Puntos offered an alternative articulation of Nicaraguan masculinity, away from the traditional interpretation of “manhood”.

The research report was published as *“Nadando contra la corriente: buscando pistas para prevenir la violencia masculina en las relaciones de pareja”* [Swimming Upstream: seeking clues to prevent masculine violence in couples]. The campaign slogan was “*La violencia contra las mujeres: un desastre que los hombres SÍ podemos evitar”* [Violence against women: a disaster that as men we CAN prevent].[[14]](#footnote-14)

## On conditioning and the perpetual nature of violence

VAWG is closely linked to health inequality[[15]](#footnote-15) and cannot be addressed unless attitudes that normalise violence are transformed. This includes actions and behaviours that prevent women and girls accessing healthcare, including sexual and reproductive health rights, which is often obstructed by predominantly men and faith and religious leaders in conservative societies.

In most cases, parents shape their children’s attitudes towards gender relations. By supporting family programmes that encourage more equal gender relations, children will be less likely to engage in partner violence as adults[[16]](#footnote-16).

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| **Case study: “*Women’s champions in Yemen*”**  *“Most Yemeni women are not willing to work outside the home*”, says Hanan Omar, head of Half of Society, a Progressio partner organization in Hodeidah (Yemen). But with training from Progressio development workers, women are starting to speak out against discrimination.  Wearing the pink sash, which distinguishes them as *‘women champions’*, they go out into the communities to discuss issues such as violence against women, and promote women’s participation in local development. |

## Social movements and migration

It is important to consider social movements and migration as variables affecting social norms, rights and entitlements because gendered dimensions will vary from rural to urban settings[[17]](#footnote-17). WHO works in countries with different levels of security, prosperity and fragility. Its development interventions ought to be context-specific based on the needs of a given country.

Civil society plays an essential role in mobilizing communities to rethink the acceptability of violence and supporting positive change[[18]](#footnote-18). WHO must adopt an approach that encourages direct engagement with local Civil Society Organisations (CSOs) in specific countries and/or regions.

UN Special Rapporteur on VAWG, Rachida Manjoo, stated: “*where possible, services should be run by independent and experienced women’s non-governmental organizations providing gender-specific, empowering and comprehensive support to women survivors of violence, based on feminist principles. Interventions should be survivor-centered and should be driven by women and girls’ own experiences and input within all initiatives and strategies to ensure that these are empowering*”[[19]](#footnote-19).

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| **Case study: “Inter-generational Learning” (El Salvador)**  Progressio organised a side event at the “*End Sexual Violence in Conflict*” summit where we shared the reality of Salvadorian women combatants and survivors of sexual violence in conflict and the impact of rape in a post-conflict context (the Salvadorian peace agreement was signed in 1992).  These survivors explained the challenges they faced as women and former combatants and the perception of their communities in relation to sexual violence in conflict. |

## Further recommendations

1. To train, champion and, where appropriate to challenge, religious and traditional leaders as a way to tackle violence and discrimination against women and girls.
2. To target men and boys, religious and traditional leaders as secondary beneficiaries of VAWG initiatives.
3. To develop, implement, enforce and finance a national action plan on violence against women and girls that are aimed at changing discriminatory social and cultural norms in consultation with civil society. It is required that any project relating to VAWG has a long term agenda and vision (6-10 years), which will not always fit into project cycle (3-5 years)[[20]](#footnote-20). Most importantly, it is important to acknowledge that investing in changing minds, behaviours and attitudes takes a long time.
4. To promote access to safe and anonymous women-only services as well as other kinds of support for women and girls suffering abuse in order to strengthen multi-sector (health, education, justice) and survivor-centred approach to violence including access to comprehensive and appropriate services[[21]](#footnote-21).

## Specific comments on the Zero Draft

### 1.1 Scope

Page 1, paragraph 5:

To add on the second sentence at the end: *“or, socially accepted, reinforced by discriminative social and cultural norms and religious beliefs.*'

After 'until recently, violence against women and girls has also been largely invisible within (...)’ to add: *“in cases where violence has been visible, often limited allocation of resources and funding has failed to address identified issues”*.

Page 1, paragraph 6, second sentence: *“child maltreatment has lifelong negative consequence, including ill (include: mental and physical) health”*.

### 1.3 Overview of the Global situation

Page 4, paragraph 6 include: “young people, women and girls”

### Health consequences

Page 4, paragraph 2, to re-formulate to: “*women and girls exposed to violence experience a lack of sexual and reproductive health including* (…) and add: “*a lack of access to care and services*”.

Add as last sentence: all these physical health problems may have an effect on mental health.

**Goals:** broad agreements, but increase/ensure access to information and services is missing

Page 10 “*review (add: and update) legislation and policies, including a multi-sectoral approach to tackle VAWG*”.

... “*keep young people (add: especially girls) in secondary schooling*”.

### Global target

1) Countries will have a national action plan - include: “*in consultation with CSOs and a multi-sectoral approach to tackling VAWG*”.

### Preference targets:

objective 1, objective 1, target 1 and 3, objective 4

-.Ends.-

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2. “She has the right in her voice” (February, 2014) Progressio <http://www.progressio.org.uk/sites/progressio.org.uk/files/Pro-mag-Feb-2014.pdf> [↑](#footnote-ref-2)
3. “Women in fragile states: Why women’s voices must be heard” (March 2014) Progressio <http://www.progressio.org.uk/sites/progressio.org.uk/files/Women-and-fragile-states-briefing-2014.pdf> [↑](#footnote-ref-3)
4. WHO warns of imminent collapse of health care services in Yemen (April 2015) <http://www.emro.who.int/yem/yemen-news/who-warns-of-imminent-collapse-of-health-care-services-in-yemen.html> [↑](#footnote-ref-4)
5. The State’s legitimacy in fragile situations (2010) <http://www.oecd.org/dac/governance-peace/conflictandfragility/docs/the%20States%20legitmacy%20in%20FS.pdf> [↑](#footnote-ref-5)
6. Femicide: A Global Issue that Demands Attention (2013) <http://fbf7c7e20b173f4d238f-5912a34ad37e49172ffd347ffbe5002d.r41.cf1.rackcdn.com/Femicide%20A%20Gobal%20Issue%20that%20demands%20Action.pdf> [↑](#footnote-ref-6)
7. Social institutions and Gender Index: Malawi <http://genderindex.org/country/malawi#_ftnref42> [↑](#footnote-ref-7)
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9. Traditional leaders in modern Africa: can Democracy and the Chief co-exist? (2008) <http://www.gsdrc.org/go/display&type=Document&id=3153> [↑](#footnote-ref-9)
10. Domestic Abuse, Islamic Social Service Association <http://www.issaservices.com/issa/domesticabuse.html> [↑](#footnote-ref-10)
11. Faith-based organizations play a major role in HIV/AIDS care and treatment in sub-Saharan Africa, (February 2007) <http://www.who.int/mediacentre/news/notes/2007/np05/en/> [↑](#footnote-ref-11)
12. Sexualisation of young people (2010) <http://webarchive.nationalarchives.gov.uk/20100418065544/http://homeoffice.gov.uk/documents/Sexualisation-of-young-people2835.pdf?view=Binary> [↑](#footnote-ref-12)
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14. Rodríguez, Clemencia (2012) “From the Sandinista revolution to telenovelas: the case of Puntos de Encuentro” <http://bibliotecavirtual.clacso.org.ar/ar/libros/edicion/media/30chapter23.pdf> [↑](#footnote-ref-14)
15. Health and VAWG <http://thelondonvawgconsortium.org.uk/wp-content/uploads/2014/06/Good-Practice-Briefing-final-AVA.pdf> [↑](#footnote-ref-15)
16. What works to prevent partner violence? (2011) <http://r4d.dfid.gov.uk/PDF/Outputs/Gender/60887-PartnerViolenceEvidenceOverview.pdf> [↑](#footnote-ref-16)
17. International Migration and Gendered Axes of Stratification <http://www.unrisd.org/80256B3C005BCCF9/(httpAuxPages)/475FEA339FAF2596C125778800417FDC/$file/Pipervolint.pdf> [↑](#footnote-ref-17)
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