

NETWORK FOR STEPPING STONES APPROACHES

(NESA)

TRAINING OF DISTRICT HEADS OF DEPARTMENTS

OF

BUDUDA DISTRICT LOCAL GOVERNMENT

ON

SEXUAL GENDER BASED VIOLENCE (SGBV)

AT MASABA HILTON HOTEL MBALE,

UGANDA

FROM 28th to 30th JULY 2010

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NETWORK FOR STEPPING STONES APPROACHES - NESA

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ACRONYMS

ACAO....Assistant Chief Administrative Officer

CBO...Community Based Organization

FBO...Faith Based Organization

GBV....Gender Based Violence

IASC....Inter Agency Standing Committee

IRC....International Rescue Committee

NGO...Non Governmental Organization

SGBV...Sexual Gender Based Violence

TPO.....Transcultural Psychosocial Organisation

UN.....United Nations

UNFPA... United Nations Population Fund

UPE....Universal Primary Education

1.0 Introduction and Background

A three day workshop on Gender Based Violence (GBV) was organized by Transcultural Psychosocial Organisation (TPO), targeting selected District Heads of Departments of Bududa District Local Government and the police. The workshop was planned to respond on the increasing numbers of Gender Based Violence cases especially in the camps created by the landslides. The response workshop was basically the institution of Stepping Stones Approaches, the situation indicates that girls have become the most vulnerable category of people to GBV. The workshop was a residential one held at Mbale in Masaba Hilton Hotel. Participants were drawn from various sectors and departments to sit the holistic approach to handle GBV in the district.

2.0 Goal and Objectives

1. Facilitate sessions of SGBV/IASC guidelines in humanitarian settings.
2. Integrate and monitor Gender Based programming in any interventions to be implemented by the district.
3. Facilitate discussions on the role of the district stake holders in prevention, response and monitoring of SGBV incidents in disaster affected areas in Bududa District.

3.0 Opening Remarks

Using the training manual on interagency prevention and Response to Gender based violence and the Stepping Stones approach, a training package on communication and relationship skills, participants were put to task to identify their own adjectival names to be used during the training process, after which briefing remarks were given by the Coordinator of TPO Mr. Bukenya Sayyid. In his remarks, he pointed out that TPO as an Organization works with communities and the local government structures in areas related to capacity building, mental health and monitors abuse of children's rights, especially in schools.

He said that TPO works with religious leaders and groups that are set at grass root levels. Children who are at risk are taken care of by TPO especially those who were supported by Save the Children.

He cited the vulnerability of children to Sexual Gender Based Violence. For instance, parents stay in Bulucheke only to leave their children in Nametsi. That predisposes them to the youths who exchange food items for sex, since there is no food in the camps.

Later on, the workshop was officially opened by the Assistant Chief Administrative Officer Bududa District Local Government.

The Organization monitors Children who are at high risk of Sexual abuse and violence through clubs and by use of community structures such religious leaders, youth groups in the communities of Bulucheke and Nametsi.

This however was followed by the opening remarks made by Mr. Maya Simon who is the ACO of Bududa district LG. He thanked TPO for supporting the District especially during the Day of African Child. He pointed out that the law enforcers are not facilitated to respond to violence against children, since most of the donors have pooled out especially in supporting those displaced and are in the camps in Bududa. He later on opened the workshop officially.

4.0 Methodology

The GBV workshop was basically a participatory process. The training was handled through a presentation process of the topics discussed followed by questions and answers, sometimes the participants also took the opportunity to facilitate as a way of capacity building. Hand-outs were provided for reading after sessions, and illustrations could be done on the flipchart, like the problem tree which establishes the causes of GBV, consequences and perpetrators. Through role-plays and the Stepping Stones Approach of interactive work in improving communication and relationships, participants enacted how, if they continued having the same attitude of women being inferior to men, they would end up unhappy with unhappy families. Using the behavior change model of change participants, through discussion, were able to point out the need to respect their partners and support them because we are all equal. Other methods included small group work, individual work, games and exercises. Energizers could be instituted to enhance the learning process for participants and case studies were drawn locally.

Pertinent issues that needed clarification: the facilitator had to probe deeper so as to dig out the exact situation of an issue that would guide trainees on how to handle it when in their respective departments.

5.0 Training Content/Process (see training programme/curriculum)

Bellow is a description of the process based on the topics derived from the training curriculum.

5.1 *Gender/ Gender Based Violence; INTRODUCTION*

Through illustrations on flip chart followed by discussions, participants were enabled to reflect on sex vs gender and their difference; how possessing power is abused to cause gender based violence; and how this is common in African societies where the male is dominant. Definition of human rights and its observance was also handled satisfactorily. Among the rights identified were the right to associate, right of worship, right to health, right to freedom of opinion, right

to education and right to sexual orientation. However this last one was contentious because it appeared strange and new to some participants. It was also noted that for every act of GBV there is a perpetrator and a survivor or victim.

The participants went through the process of defining survivor, victim and perpetrator: the survivor being one who has overcome abuse and is moving on positively with hope while the victim is still to recover. Perpetrator being one or situations that encourage sexual gender based violence.

Participants with the help of facilitators went on to define GBV as abuse of power based on gender. It involves some type of force including threats and coercion.

MULTI SECTORAL PREVENTION AND RESPONSE TO GBV

There were various types of GBV mentioned in the course of the session, some of them included sexual gender based violence, physical violence, emotional violence, economic violence and harmful traditional practices. Participants were provided with the opportunity to consider how these are prevalent in Bududa and several examples were cited including a young lady who had just fallen victim of SGBV and had to be taken to hospital by a doctor participant and TPO.

Causes and contributing factors were delved into during the sessions. The root causes of GBV lie in a society's attitude towards and practices of gender discrimination, role, responsibilities, limitations, privileges and opportunities afforded to an individual according to gender - ie society's disrespect towards women, lack of belief in equality of human rights, lack of value of women.

Contributing factors were discussed as being alcohol/drug abuse, war and displacement, poverty, but all poor women are not victimized by forced prostitution or sexual exploitation. It was noted that for every act of GBV there is a perpetrator and a survivor or victim.

The consequences of GBV were numerous and included fatal outcomes, acute physical results like injury, shock, disease and disability, chronic and reproductive: like eating disorders, drug abuse, chronic pain, miscarriages, unsafe abortion and there were also emotional consequences like post traumatic stress, depression, anxiety and fear.

The workshop provided the opportunity to discuss what help a survivor might require and the following were discussed by participants with the guidance of the facilitators.

Health: emergency contraception. Treating injuries and STIs

Security: reporting to police, investigate case, arrest perpetrator, file charges

Psycho-social: emotional support and counseling, income generation, skills training programs

Legal: justice, formal and traditional, as in case of Luo with Kony problem, appropriate laws and accountability

In the training there was time to discuss **guiding principles** that must guide the work of all actors when assisting survivors. They are three: **safety, confidentiality and respect**

Prevention of SGBV is seen as a long-term process and requires good monitoring so that strategies can be changed over time to maximize effectiveness

In the introduction to multi-sectoral action, the following were observed: that successful criminal **prosecution** requires good police investigation, good forensic evidence, emotional support for the survivor through the process

Effective **prevention** must include: security, identify and remove risks, justice, legal environment, public health education and psychosocial /community awareness about GBV and changing attitudes. This process, it was noted, needed to be properly coordinated to serve as one body with the same objectives. Participants were also taken through the process of establishing procedure for reporting and referrals

5.2 GBV in emergency Situations

While considering GBV in emergency situation, trainees were guided to readily prepare for response with defined approaches.

As regards responding to GBV in emergency situations, collective effort mechanism was considered.

Through a participatory process, the following strategies were identified in relation to emergency preparedness and planning trainees will consider to institute.

- ✓ Visiting the location that has been hit by disaster
- ✓ Assessing the Risk to life to those affected.
- ✓ Magnitude/rate of death/destruction and identifying the injured
- ✓ Re-allocation of those at risk, looking at the ages, gender, sex etc.
- ✓ Rescue the lives that are at extreme risky situation.
- ✓ Create Communication systems to create systematic service delivery to the affected area.
- ✓ Distinguish the affected persons in terms of Number, Sex and ages.
- ✓ Hold a meeting/conference for planning, raise resources, establish coordination systems, set structures and identify spokes persons.

- ✓ Advocate for Human Rights Based Approach through conducting dialogues at district level.
- ✓ Advocate for the wellbeing (needs) of women and children in terms of GBV.
- ✓ Mobilize resources to meet the needs of those affected.
- ✓ Continue having review meetings to assess the impact of intercession that will help in drawing better interventions.

5.3 GBV guidelines in humanitarian settings.

The session was handled by the Coordinator of TPO and in the presentation; participants were given a highlight on the agencies that handle humanitarian issues. The agencies that are mandated to handle humanitarian involvement under the United Nations considerations include:

World Health Organization who handle issues concerned with Health,

United Nations Population Fund handles GBV interventions,

United Nations International Children's Fund that focuses on Child protection, Education, water and sanitation,

United Nations High Commissioner for Refugees which register, manages and relocates refugees,

World Food Programme that provides relief in terms of food items

Then the International Committee of the Red Cross saves lives through providing first aid and blood donation to those affected.

As part of the United Nations, the Inter Agency Standing Committee (IASC) was created which comprises of;

Save the Children,

World Vision,

International Rescue Committee (IRC) and

the Child Fund International.

The IASC had defined roles in relation to humanitarian response as stated below:

5.4 Roles of the Inter Agency Standing Committee –IASC.

Like part of the UN, the Agency acts as;

- ✓ A forum for coordination of humanitarian intrusion.
- ✓ Decision making body for the key UN and none UN partners.
- ✓ It develops humanitarian policies in relation to the rights of the minorities.
- ✓ Identifies gaps in deferent thematic areas and
- ✓ Advocates for effective humanitarian principles.

5.4.1 IASC Guidelines on SGBV in Humanitarian settings.

The participants were taken through a road map on specific guidelines based on IASC interventions on GBV in humanitarian situations.

The following are some of the key guidelines that were identified;

- ✓ Proper Coordination of service delivery. As service providers, this principle will help trainees to handle SGBV related issues in their district.
- ✓ Assessment, monitoring and mainstreaming of GBV interventions. Stake holders are obliged to carry out an assessment that will be utilized during GBV response plans as a strategy to be used and mainstreamed in Government programs.
- ✓ Safe/adequate and accessible water sources to avoid coercion from the men due to long distances. It was identified that women fall victims of SGBV due to the inadequacy in resources that predispose them to men who skillfully seduce them with intense of having sex with them.
- ✓ Legal social protection services reflected by direct involvement of the police. During the discussion, the police were revealed as stakeholders who should be of great need in reducing SGBV, however, in Bududa the police tend to ignore such cases as the request for facilitation to handle such cases.
- ✓ Have adequately trained Human resource. While handling SGBV, the persons administering SGBV cases need to be well conversant with the approaches to be instituted to the perpetrators while considering the rights of the victims.
- ✓ Usable shelter among others. The response teams to SGBV in the camps need to design shelters that do not instigate and prompt males to take chance by means of vindictiveness to force women into sex.

5.5 Causes/Effects and contributing/perpetrating factors to GBV

- Contributing/perpetrating factors to GBV in Bugisu for instance include alcohol, during the “Imbalu” (traditional male circumcision) and the method of counseling given by elders after circumcision is geared towards instigating one to get a woman. The Community Development Officer was given the task to design programmes that educate the general public through the participation of all stakeholders involved.

- During the discussions, participants pointed out that in Bugisu, there is a high rate of polygamy, and the act predisposes females to sexual violence by their spouses as a team. Trainees agreed that using a Stepping Stones approach, strategies shall be designed to curb down this incidence of SGBV in Bududa.
- Peer pressure was cited as one of the causes of GBV especially in the camps. With the low income levels and low bargaining power of the girls, they become vulnerable as they are easily lured by boys.
- Lack of respect for human rights. GBV is also manifested in gender roles at the house hold level i.e., men feel an inferiority complex when they get women who have more powers than them, men dictate when they have power especially in economic terms. However the pressure comes from the society to influence men to violate on their wives.
- Rights violation was seen as a common issue. Perpetrators of GBV have continued to abuse the rights of children. It was cited that a disabled young girl was raped by a man in the camp.
- Limited support from the law enforcers has provided avenues for the occurrences of GBV especially in the camps in Bududa. This factor was emphasized by the police representative who told participants that there is limited facilitation in terms of transport to enhance their ability to effect a response to SGBV cases.

5.6 *Strategies*

The following strategies were agreed upon in response to GBV, both in disaster situations and in the entire community.

- i. Participants accepted to put up coordination mechanisms for different actors to respond to GBV effectively.
- ii. To build the capacity of stakeholders in their respective departments through provision of relevant knowledge and skills to respond to GBV in Bududa.
- iii. Develop and enforce bye laws that shall be utilized to handle perpetrators and respect the rights of the vulnerable persons to GBV.
- iv. Embrace UPE by encouraging parents to take children to school and orient the head teachers to respond to GBV. There is need to prepare children in a clear direction other than following the societal norms. This should be considered as a means to reduce GBV.
- v. Empower the vulnerable persons by use of Drama and the media to respond to their needs and claims that they put across.

- vi. Report cases of GBV to respective personalities for immediate response.

5.7 Stakeholder SGBV service/ response

Different stakeholders were identified both at district, Sub County and community and their expected involvement and response to GBV. (Find attached stakeholder SGBV service response table)

5.8 Monitoring of GBV activities

- ✓ SGBV activities shall be monitored using a multispectral approach i.e. using different departments in the district.
- ✓ Integration of activities to the department work plans - e.g. integration of SGBV into development plans in the district, was agreed as the main strategy to respond to the high rates of SGBV in Bududa district and programmes such as CAIIP (Community Agriculture Infrastructure Improvement Program) were seen as entry points for integration.
- ✓ Develop checklist to harmonize implementation of SGBV interventions. Participants identified the District Community Development Officer as the spin-around person to come up with the checklist that monitors the implementation process of SGBV response activities in the district.
- ✓ Using the Media to fit the limited resource envelope, by use of radios/news papers. In the due course, with the limited resources, trainees agreed that local media houses and the news paper producers around shall be utilized to help in the monitoring and dissemination of information on SGBV interventions in the district.
- ✓ Networking with other NGOs, CBOs on service mapping. The Community Development Officer was given the task to come up with a list of service providers including CSOs i.e., NGOs, FBOs, and CBOs who shall be involved to respond to SGBV and, in turn, develop a referral system on SGBV in the district.
- ✓ Conduct priority ranking on people involved and number of times of the activity done.
- ✓ Training of stakeholders on SGBV activities. While strengthening response to GBV, trainees identified that building the capacity of stakeholders should be considered as a mechanism for effective implementation of the design.
- ✓ Develop SGBV work plans set in place, as they carry on their respective departmental duties. Trainees were told to consider SGBV as a cross cutting issue in that, it should appear in all their development plans.
- ✓ Periodic evaluation. Meaningfully, the district departmental heads ought to have review meetings, to asses the level of their involvement in SGBV response.

Towards the end, participants were tasked to consider to make a project life cycle of GBV and with the help of a diagram the following were discussed: needs assessment, identification of problems, definition of project goal and strategy, project objectives and indicators, activities and work plan, M and E, recording system, budget and continuous monitoring and evaluation.

6.0 Achievements

- ✓ There was an increase in knowledge about sexual gender based violence among participants as reflected in the daily and final evaluation. As the days progressed, all participants were able to contribute to discussions and offer case studies
- ✓ Participants demonstrated skills in conducting sessions on sensitive issues like SGBV. Their practical demonstration in class during sessions was testimony to this
- ✓ Some participants changed their attitudes towards partners and found out that GBV is not only about beating their partners but also that denial of love, money and affection is violence
- ✓ Attitudes towards sexual minorities started to change. Originally, most participants didn't want the subject mentioned considering it an aberration or taboo. However on the 3rd day, they were saying people ought to discuss it with the view of assisting those involved.

7.0 Constraints/Challenges

- ✓ Failure to appreciate the rights of the minority. Participants felt that rights of the minority tend to instigate horrific characters in the society e.g. the prostitutes. For instance, men who act as if he is a female called Nambozo was a point of focus.
- ✓ Trainees' have limited knowledge and skills on policy formulation especially on GBV. Participants were not familiar with Policies that administer GBV directly.
- ✓ Participants have limited knowledge on the Monitoring tools for GBV activities. This challenge limits the expected output of the trainees as they respond to GBV.
- ✓ Lack of effective community based facilitators on GBV interventions. TPO has set its implementation systems at grass root levels. However, they need to be reinstated to allow effective service delivery, especially in response to GBV.

8.0 Way Forward/Recommendations

- ✓ TPO needs to train/build the knowledge and skills of communities & partners continuously to mitigate the effects of GBV, targeting Child Protection, especially in camps

- ✓ Need to train SGBV facilitators who will be working with communities. These facilitators will be assisting the district heads
- ✓ As a strategy to streamline GBV into district development plans, departments need to conduct radio talk shows and conduct drama shows to create awareness on GBV. A local group supported by an experienced trainer could be engaged.
- ✓ All departments have to design approaches to concretely streamline GBV keys issues into government structures.
- ✓ Provide back up support to the community structures, e.g. women, youths, to enhance their participation to report cases of SGBV.
- ✓ Systems need to be established on the occurrences of GBV at Sub-County to the District levels.

Appendices

- ✓ Training programme
- ✓ *Stakeholder SGBV service/ response table*
- ✓ Attendance
- ✓ Participants Action Plan