SECTION 3.5. SECTOR-SPECIFIC PROGRAM ELEMENTS

Addressing GBV through Development and Peacebuilding Programs in Crisis and Conflict Contexts

Analytical Services IV Indefinite Delivery Indefinite Quantity (IDIQ) Contract No. 7200AA19/D00006/7200AA20F00011

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### ACRONYMS AND ABBREVIATIONS

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>CARE-GBV</td>
<td>Collective Action to Reduce Gender-Based Violence</td>
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<tr>
<td>CEDAW</td>
<td>Convention on the Elimination of All Forms of Discrimination against Women</td>
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<td>CRSV</td>
<td>Conflict-related sexual violence</td>
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<td>CSO</td>
<td>Civil society organization</td>
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<td>CVP</td>
<td>Center for Conflict and Violence Prevention</td>
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<td>FGM/C</td>
<td>Female genital mutilation/cutting</td>
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<tr>
<td>GBV</td>
<td>Gender-based violence</td>
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<tr>
<td>IPV</td>
<td>Intimate partner violence</td>
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<tr>
<td>LGBTQI+</td>
<td>Lesbian, gay, bisexual, transgender, queer, and intersex people, and those of other diverse sexual orientations and gender identities</td>
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<td>MHPSS</td>
<td>Mental health and psychosocial support</td>
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<td>MRP</td>
<td>Marawi Response Program</td>
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<td>SCR</td>
<td>Security Council Resolution</td>
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<td>SOGIESC</td>
<td>Sexual orientation, gender identity, gender expression, and sex characteristics</td>
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<td>USAID</td>
<td>United States Agency for International Development</td>
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Introduction

This brief describes why USAID’s development and peacebuilding programs in crisis and conflict contexts should address gender-based violence (GBV) and details specific strategies for doing so. Program examples are provided to illustrate how the strategies can be incorporated into programs in crisis and conflict settings, and links to tools and resources are provided for additional information.

This brief is part of the Foundational Elements for Gender-Based Violence Programming in Development, which include core principles, program elements (prevention, risk mitigation, response, enabling environment), and process elements. Ideally, readers will familiarize themselves with these sections of the Foundational Elements before reading this brief. At a minimum, readers should be familiar with the following sections before reviewing this brief:

- Section 1.0. Introduction
- Section 3.2. Program Elements: Risk Mitigation
- Section 4.0. Process Elements:
  - Values, Organizational Culture, and Leadership (Program Example: A Framework for Safeguarding Program Participants)
  - Strategic Planning and Design (Gender Analysis and Referral Network Mapping)
The strategies described in this brief are organized by levels of the socio-ecological model: individual, interpersonal, community, and structural. Effective GBV interventions typically include strategies that address multiple levels of the socio-ecological model.

Each strategy is also labeled as prevention, risk mitigation, response, or enabling environment.
Why Crisis and Conflict Programs Should Address GBV

Conflict-affected and fragile states often have high risk for and incidence of gender-based violence (GBV) (Nordås and Cohen 2021, USAID 2016). GBV can be used by conflicting groups to demonstrate force, control territory, seize resources, and destabilize communities (Futures Without Violence 2017). GBV, particularly sexual violence, is a tactic of war that violent groups use to initiate, build, and maintain membership. For example, gangs in the Northern Central American countries sometimes use sexual violence and femicide as a form of intimidation or vengeance (Knox 2019, Boerman, and Knapp 2017). Trafficking of women and girls for forced marriage or for profit can ensure loyalty and provide revenue for violent groups (Futures Without Violence 2017, Nagel 2021). GBV is also a tool of genocide and social control. For instance, sexual violence has been used in efforts to destroy entire ethnic, religious, and political communities in Rwanda, Bosnia, and Chile, respectively. Conflict-affected contexts with heightened power disparities and socioeconomic inequalities, militarization, and an influx of crisis response providers can facilitate sexual exploitation and abuse (Vahedi et al. 2021, IOM 2019).

Conflict redefines people’s material realities, enabling individuals and institutions to exploit gendered inequities and increasing the vulnerability to GBV that women and other groups deprived of power experience. A study in Uganda found that girls were more likely to experience sexual exploitation and early marriage following the unexpected conflict-related death of a family member or another person who provided financial stability (Mootz et al. 2017). In post-conflict Bosnia, institutionalized social norms dictate that male war veterans are given employment preference. This discrimination in the labor market increases women’s economic dependence on male breadwinners, thereby heightening their vulnerability to GBV (Kostovicova et al. 2020). These effects at the household level are compounded by post-conflict economic policies that deepen women’s socioeconomic marginalization by restricting access to social welfare and entrenching poverty and joblessness (Kostovicova et al. 2020).

Forms of GBV that may be present prior to the onset of conflict, including intimate partner violence (IPV), sexual assault (USAID 2016), and physical and sexual violence against children and adolescents, can become more severe or prevalent in conflict-affected and fragile contexts (Devakumar and Palfreyman 2021, Women’s Refugee Commission 2016). For instance, a study in Timor-Leste found an association between men surviving torture and later perpetrating IPV (Rees et al. 2018). A study in Northeastern Ugandan communities affected by Karamajong cattle-rustling raids identified four conflict events that perpetuated GBV in the home and the community: (1) raiders committed conflict-related sexual violence (CRSV) in the form of rape and abduction for sexual exploitation; (2) looting of resources resulted in poverty, sexual exploitation and abuse, and physical and psychological violence in the home; (3) death of a protective person, such as a parent or husband, increased social and economic vulnerability, sexual violence, exploitation, early marriage, and violence against widows and their families to seize their land (See Section 3.5. Sector-Specific Program Elements: Land and Property Rights); and (4) militarization of the community created a power differential, wherein police officers were able to sexually exploit impoverished or marginalized women and adolescent girls in exchange for provision of basic needs or protection. All these experiences resulted in sexual violence, which was then associated with physical violence in the home (Mootz et al. 2017).
Additionally, deterioration of the rule of law, normalization of the use of violence, and proliferation of small arms among civilians can facilitate cycles of opportunistic violence. Further, conflict-related deterioration of political and social institutions results in impunity for a spectrum of GBV, such as early marriage, domestic violence, and female genital mutilation/cutting (FGM/C) (IOM 2019, What Works to Prevent Violence et al. 2017). Corrupt or coerced government agents responsible for handling GBV cases may leak information to criminal groups or extort or otherwise re-victimize survivors (Knox 2019). Trauma from witnessing or being forced to perpetrate violence can increase the likelihood of perpetrating violence in the future (Futures Without Violence 2017). Weakened protective factors, such as access to education, economic stability, social networks, and safety nets, further heighten risk of GBV in conflict-affected contexts and hamper development efforts (IOM 2019, Karuhanga Atuhaire et al. 2018, McEvers and Garsd 2015). Failure to provide justice for survivors of GBV and include them in peace processes is also linked to ineffective post-conflict recovery (IOM 2019).

Men, boys, and people of diverse sexual orientation, gender identity, gender expression, and sex characteristics (SOGIESC) living in fragile settings experience a range of forms of GBV, including “sexual violence, executions, kidnappings, starvation, enforced disappearances, domestic violence, harassment based on gender, forced and early labor, and homophobic violence” (Kiss et al. 2020). Nearly half of surveyed men living in a conflict-affected region of Sudan had experienced or directly witnessed sexual violence against a man (Nagai et al. 2008). Luo men in Kenya have been targeted for sexual violence as a way to emasculate them, delegitimize them for leadership, and drive political violence (Auchter 2017). People of diverse SOGIESC in Central America are at heightened risk of violence, hate crimes, and extortion by criminal groups and authorities (Knox 2019, Davis 2020), and are also often marginalized from family and institutional support systems they might otherwise turn to for survival (Davis and Stern 2019). Moreover, people of diverse SOGIESC often face barriers to reporting and seeking help that are rooted in transphobia and homophobia, such as laws criminalizing homosexuality; extortion; fear of further violence from family, community members, service providers, and institutions; and internalized homophobia (Kiss et al. 2020) (See Section 3.4. Sector-Specific Program Elements: Democracy, Human Rights, and Governance).

**Conflict-Related Sexual Violence (CRSV)**

The term “conflict-related sexual violence” refers to rape, sexual slavery, forced prostitution, forced pregnancy, forced abortion, forced sterilization, forced marriage, and any other form of sexual violence that is directly or indirectly linked to a conflict. That link may be evident in:

- The profile of the perpetrator, who is often affiliated with a state or non-state armed group, which includes terrorist entities
- The profile of the victim, who is frequently an actual or perceived member of a political, ethnic, or religious minority group or targeted based on actual or perceived sexual orientation or gender identity
- The climate of impunity, which is generally associated with state collapse, cross-border consequences such as displacement or trafficking, and violations of a cease-fire agreement

The term also encompasses trafficking in persons for the purpose of sexual violence or exploitation, when committed in situations of conflict (UN Peacekeeping 20 n.d.).
GBV destabilizes communities and increases individual vulnerability, which in turn, diminishes community and state security (Karuhanga Atuhaire et al. 2018). For example, violence against women and girls may exacerbate state fragility and militarized violence (CARE et al. 2018). Countries with high levels of GBV have an increased likelihood of experiencing conflict and have worse relations with their neighbors (Herbert 2014). GBV and gender-based marginalization also create conditions where joining violent extremism organizations or other violent movements is a favorable option given untenable conditions at home or limited economic, educational, or political prospects within existing social structures (Phelan 2020). USAID’s *Theories of Change and Indicator Development in Conflict Management and Mitigation* names countering GBV as a critical aspect of addressing trauma and cycles of aggression, which are identified as key drivers of conflict (USAID 2010). Gender inequality and inequities that exist before conflict develops underlie GBV (Karuhanga Atuhaire et al. 2018). They are maintained through power, structural inequalities, and pervasive harmful gender norms, such as laws and customs that limit women’s access to and control of land, or that frame GBV as a private matter governments are not obligated to prevent.

GBV and its effects on individuals and communities are a threat to durable peace, stability, and development in conflict-affected contexts (IOM 2019). At the same time, the changes to institutions and social norms that result from conflict can offer openings to restructure societies so that all people may live free from GBV (CARE et al. 2018). Addressing the many forms of GBV through USAID’s crisis- and conflict-related programming is critical to mitigating harm, helping communities heal, preventing future cycles of violence, and creating stable, inclusive, and thriving societies post conflict.
How Crisis and Conflict Programs Can Address GBV

These are strategies for integrating GBV prevention, response, and mitigation into USAID development programs in crisis- and conflict-affected settings. For guidance on addressing GBV in humanitarian settings, see *Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action: Reducing Risk, Promoting Resilience and Aiding Recovery* (GBV Guidelines 2020).

**Strategy #1: Take a gender-inclusive and intersectional approach to assessing GBV risk during conflict**

Program elements: prevention, risk mitigation, response  
Levels of socio-ecological model: individual, structural

Following USAID’s commitment to inclusive development (USAID 2018), projects in conflict-affected settings should consider and address how people’s multiple identities place them at particular risk for experiencing different forms of GBV. USAID should work with an inclusive range of local stakeholders to conduct gender analyses that are gender expansive and intersectional so that interventions are responsive and attuned to the different manifestations of GBV in a community. Taking a gender-expansive approach means being inclusive of people of different gender identities and expressions (Human Rights Campaign n.d.). This approach enables USAID and implementing partners to prevent, mitigate, and respond to violence against women and girls, as well as violence targeting men, boys, and people of diverse SOGIESC in each context. Taking an intersectional approach means considering how power imbalances and overlapping forms of oppression can affect an individual’s risk and experience of GBV before, during, and after conflict, and empowering people with different social identities (Government of the UK 2019) (see Section 2.0. Core Principles: Intersectional).

USAID and implementing partners should check that programs begin with an accurate and comprehensive understanding of the ways that certain groups in each context face heightened and specific vulnerability to forms of GBV. Programs should understand how belonging to multiple marginalized or oppressed groups compounds risk of violence. When designing programs, they need to collaborate with local GBV and human rights organizations that work with the specific groups being targeted and engage the community in the design process.
Strategy #2: Create strong, accessible GBV response services and systems that will be resilient before, during, and after conflict

It is critical to provide rights-based, survivor-centered healthcare and mental health and psychosocial support (MHPSS), legal services, and other social services, including shelter (see Section 2.0. Core Principles and Section 3.3. Program Elements: Response), regardless of whether violence occurs as a tactic of conflict or a consequence of the damage conflict inflicts on communities (Government of the UK 2019). GBV response services operating in conflict-affected contexts or fragile states should be integrated with or connected to other local services, flexible and adaptive to shifting conflict dynamics, trauma informed, gender sensitive, and inclusive of and responsive to people’s intersectional identities (CARE et al. 2018, Kiss et al. 2020). Nonexistent and insufficient services reduce the legitimacy of governments and can exacerbate mistrust of states seeking to prevent conflict escalation or build post-conflict peace (CARE et al. 2018). Therefore, programs should support governments in developing and strengthening GBV response services such as health, MHPSS, access to justice, legal recourse, reparations, and trauma-healing interventions. For more information on GBV response services, see Section 3.3. Program Elements: Response and how to integrate mental health and psychosocial interventions in GBV programs in low-resource settings (CARE-GBV 2022).

All programs should take care not to exacerbate conflict or the vulnerability of at-risk groups. Therefore, it is critical to implement risk-mitigation practices that are sensitive to conflict-affected areas and provide response services, such as healthcare and MHPSS, to program staff and program participants (Swiss Agency for Development and Cooperation 2008). When projects address the needs of stigmatized groups, such as former combatants, children born from CRSV, or survivors of GBV, participants’ confidentiality must be protected to prevent further marginalization or violence (UN Women 2019). Programs should not advertise benefits based on survivor status or identity group. Instead, broader community development projects should be implemented to address survivor-specific needs. Staff and participants may face physical safety risks, as well as secondary trauma or re-traumatization.

Implementing broader community development projects can also address survivor-specific needs (Swiss Agency for Development and Cooperation 2008). Work with communities throughout design, implementation, and assessment to develop conflict-responsive and context-informed and -tailored systems to protect survivors’ safety. For example, protection mechanisms, such as police or courts, often lack the capacity to respond to cases where gangs control territory or have leverage over officials (KIND 2017). Strategize with communities to increase the accessibility of services and provide shelter and security to survivors and their families in unique conflict-affected areas. Make protection and shelter services linguistically appropriate and inclusive of people of diverse SOGIESC, youth, and persons with disabilities (OutRight Action International 2021). In contexts with ongoing security risks, increase the duration of survivor and witness program eligibility beyond the criminal sentencing period (KIND 2017). Provide options for relocation for GBV survivors and families outside of conflict zones or countries, when necessary (KIND 2017).
Strategy #3: Incorporate gender-sensitive trauma-healing services into conflict prevention and response programming

The Bureau for Conflict Prevention and Stabilization’s 2020 Disrupting the Cycle of Violence: Using Trauma-Informed Approaches to Build Lasting Peace highlights the importance of including trauma healing in conflict prevention and response programming (USAID 2021). Assume that people of all genders may be survivors of a range of violence throughout their lives, such as child abuse and neglect, IPV, previous episodes of civil conflict, forced perpetration of violence, and other forms of violence, such as racism or classism, based on their identity groups or social locations (Brush 2019). Consider how these experiences affect GBV perpetration, victimization, and armed conflict. Work with survivors to identify which forms of violence have caused the most harm and are in the most urgent need of healing, instead of automatically prioritizing CRSV.

It is important to design trauma-healing programs that are inclusive of and responsive to the different experiences survivors have in processing trauma, displaying symptoms, and seeking help (Kiss et al. 2020). This includes but is not limited to internalization of trauma, which often leads to anxiety and depression, and externalization of trauma, which often leads to substance abuse and high-risk behavior, including violence perpetration (Kiss et al. 2020). Implement promising approaches to healing trauma and rebuilding healthy coping mechanisms, such as cognitive behavioral therapy, yoga, mindfulness, or the Common Elements Treatment Approach (USAID 2021). Confidentiality procedures should be put in place. Take care to provide healing modalities that are culturally relevant and will not re-traumatize or alienate already marginalized groups. For instance, spiritual and family-based models that might be highly relevant and effective for heterosexual and cis-gender survivors could cause additional harm to people of diverse SOGIESC or religious minority survivors (Fensham 2021).

Strategy #4: Address drivers of GBV and conflict to deter radicalization

GBV and gender-based marginalization may contribute to conditions where joining violent extremist movements is a favorable option given untenable conditions at home or limited economic, educational, or political prospects within existing social structures (Phelan 2020). Programs can work with government and civil society organizations (CSOs) to help prevent GBV and the growth of violent extremist movements. This may include strengthening family structures, implementing school-based prevention programs, supporting community policing, and expanding meaningful education and employment opportunities (KIND 2017).
Strategy #5: Protect combatants’ human rights during demobilization, and assist in recovery and reintegration

Demobilization programs provide financial and other resources and skills training for return to civilian life. These programs should address the needs of women and girls to decrease their vulnerability to sexual exploitation and abuse upon return to their home communities. Demobilization programs should also be aware of boys’ and men’s vulnerability to violence and uphold their rights after the conflict. For example, during demobilization, boys and men who were combatants with Boko Haram in Nigeria experienced lack of due process, long-term detention, torture, and abuse (Crisis Group 2020). USAID should help prevent state-perpetrated GBV by articulating clear expectations for the treatment of former combatants.

Combatants are exposed to high levels of violence, including through witnessing, experiencing, or being forced to perpetrate GBV that require tailored trauma-healing approaches. Male and female former combatants in Liberia who had experienced sexual violence during conflict reported worse mental health outcomes than both noncombatants and former combatants who had not experience sexual violence (Johnson et al. 2010). Particularly in communities where women have begun to fulfill traditionally masculine roles in the absence of men who left to join armed movements, loss of a weapon or uniform can exacerbate feelings of powerlessness and anxiety (CARE et al. 2018). Thus, it is critical that trauma-healing services and substance-abuse treatments be accessible to former combatants both for their own recovery and to help prevent an increase in GBV upon return.

Strategy #6: Implement norms-shifting GBV prevention activities in conflict-affected communities

Address social and gender norms, attitudes, beliefs, and power relations that facilitate GBV throughout stages of conflict (see Section 3.1. Program Elements: Prevention: Transformed Attitudes, Beliefs, and Norms). Given their dynamic nature, social norms that influence GBV-related behaviors during peacetime have the potential to shift drastically during conflict-affected times (Brown et al. 2020). Implementing norms-shifting interventions to form new protective norms or shift existing norms around GBV can have lasting effects on communities affected by violence. For example, the Communities Care program in Somalia demonstrated positive changes to social norms that had previously sustained sexual violence and other forms of GBV in conflict settings (UNICEF 2018). Among the norms that shifted were perceptions that husbands have the right to use violence against their wives, the use of violence to protect family honor, and negative reactions toward sexual violence survivors (UNICEF 2018).
Norms-shifting programs should take a holistic view and address the continuum of GBV that occurs in peacetime, conflict, and post conflict. Programs can further address the ways gender roles in communities may shift because of conflict—for example, the reintegration of former combatants or displaced persons (Sitkin et al. 2019, CARE et al. 2018). As a result, GBV prevention programs that employ norms-shifting strategies to work with men should be attuned to local conflict dynamics (Sitkin et al. 2019). Power and position are critical factors in how norms are formed, upheld, and enforced. Programs should assess how conflict and instability may empower some and marginalize others (Myrttinen 2018). Norms-shifting programs should also address the ways that conflict-related violence, trauma, and shame are often situated on top of experiences of violence during childhood and adolescence (Brush and Miller 2019).

### Strategy #7: Empower grassroots women’s rights organizations, youth-led organizations, and other local human rights groups and advocates before, during conflict, and after conflict

USAID and implementing partners should empower grassroots women’s rights; youth-led; lesbian, gay, bisexual, transgender, queer, and intersex people, and those of other diverse sexual orientations and gender identities (LGBTQI+); and other human rights organizations. This helps ensure that those GBV affects the most and who have local expertise define priorities and lead initiatives in conflict and fragile settings so that a range of perspectives is taken into account, diverse needs are met, and programs do no harm (Ryan 2019) (see Section 2.0. Core Principles: Led by Women’s Rights Organizations and Other Local Groups Working on GBV and Human Rights). This is particularly important in conflict settings, where global security discourse may contradict local knowledge and violence dynamics. For example, in Kenya, addressing violent extremism as part of the Women, Peace, and Security agenda has marginalized and shifted funding away from grassroots women’s organizations, empowered men and elites, and increased the vulnerability of Muslim women. USAID should take care to listen to the concerns and priorities of local survivor and advocacy groups in addressing GBV while programming in conflict and fragile states (Aroussi 2021). Additionally, USAID and implementing partners should engage grassroots organizations that work on GBV, particularly as it affects marginalized communities, in identifying the links between GBV and other conflict and security concerns, as well as shaping global security discourse.

USAID should also invest in and support local movements by taking precautions to minimize the heightened GBV and related safety risks activists and organizations based or working in conflict-affected or fragile contexts face (see Section 3.4. Program Elements: Enabling Environment: Invest in Women’s Rights Organizations). GBV is often used to intimidate and silence women engaged in peacebuilding, human rights advocacy, and political change. For example, Colombian women who advocate for land rights or for victims of conflict have been targeted for sexual assault and harassment (Karuhanga Atuhaire et al. 2018). Importantly, interventions should address the forms of political GBV women, youth, and other targeted groups engaged in leadership and societal transformation experience in person and online before, during, and after conflict (see Section 3.5.: Sector-Specific Program Elements: Democracy, Human Rights, and Governance).
USAID should take into consideration the additional risks to safety that GBV creates for organizations run by and for women, people of diverse SOGIESC, youth, and other marginalized groups. As part of efforts to solidify in-groups and out-groups, build nationalism, and distract from other human rights abuses, governments and conflicting groups may target people of diverse SOGIESC or women’s groups that challenge the status quo. USAID can support such groups to conduct GBV risk assessments, integrate space for adaptation in response to safety risks into funding requirements, and provide funding for security and resilience measures (Crisis Group 2020). Rapid-response funding should be adaptive to gendered security threats, come with minimal administrative burden, and incorporate avenues for cancellation of activities due to escalation of conflict-related GBV (OutRight Action International 2021). One example of this is USAID’s Human Rights Support Mechanism (Freedom House 2022).

Strategy #8: Strengthen access to justice for GBV by addressing conflict-related barriers and creating gender- and conflict-sensitive institutions

USAID and implementing partners should support government institutions and CSOs engaged in oversight or survivor accompaniment through criminal justice processes. Confirm that survivors are treated with dignity, their safety is guaranteed, justice institutions are inclusive, and survivors are provided with the necessary resources to access justice and rebuild their lives. Work with formal and informal community-based reconciliation and transitional justice mechanisms to create processes that are gender sensitive (CARE et al. 2018). Provide training for officials so that justice system personnel who are in contact with survivors treat them with dignity (UN Women 2019). Officials should use trauma-informed and survivor-centered practices (see Section 2.0. Core Principles: Survivor-Centered) when working with survivors and collaborate with MHPSS specialists to develop strategies for survivors’ safety and resilience (Swiss Agency for Development and Cooperation 2008). Address the additional stigma survivors of hate crimes against people of diverse SOGIESC and survivors of reproductive crimes may face. Where possible, connect survivors to justice and recovery resources, regardless of their social location within a conflict. Due to the heightened rates of domestic violence in conflict and post-conflict contexts (USAID 2016), it is critical to support survivors’ access to divorce, child custody, land rights, and economic opportunity, in addition to ensuring prosecution of perpetrators (CARE et al. 2018).
Strategy #9: Implement gender-sensitive security sector reform to create and strengthen safeguards against GBV

Program elements: prevention, risk mitigation, response

Levels of socio-ecological model: structural

USAID should support governments so that efforts to rebuild or reform weakened or illegitimate security sectors consider GBV risks and needs. For instance, schools are often main sites of multiple forms of violence, including sexual extortion of learners perpetrated by educators or administrators, sexual assault and harassment of learners traveling to or from school, gang recruitment, and violent extremist messaging and intimidation (KIND 2017, Crisis Group 2018, UNESCO and UNICEF 2019) (See Section 3.4. Sector-Specific Program Elements: Education). Plan for the ways that institutional integrity may be compromised or the security sector may be a perpetrator of violence. For example, some participants in USAID’s El Salvador Rapid Education and Risk Analysis felt that police and military presence in and around schools either had a neutral effect or worsened security (Education in Crisis and Conflict Network 2016). It is critical to work with communities to build agency, identify security risks and priorities, develop safety and security assessments, and strengthen resilience and protective mechanisms for GBV. Other intervention approaches can create institutional policies and cultures where GBV is less likely to thrive. These approaches include (1) providing training on gender norms, gender equality and equity, and GBV prevention, mitigation, and response; (2) increasing women’s representation in positions of influence in security forces; (3) implementing codes of conduct that articulate zero tolerance and consequences for sexual extortion and abuse; and (4) creating or strengthening civilian oversight bodies (Crisis Group 2020, Brown et al. 2020, Pospisil and Bell 2018) (See Section 3.4. Sector-Specific Program Elements: Democracy, Human Rights, and Governance; and Section 4.0. Process Elements: Values, Organizational Culture, and Leadership).

Strategy #10: Support economic reform policies to reduce risk of GBV before, during, and after conflict

Program elements: prevention, enabling environment

Levels of socio-ecological model: structural

USAID can support economic reform policies in post-conflict and fragile settings that reduce economic dependence on potential perpetrators of GBV and vulnerability to exploitation and abuse. Specific strategies have cross-sectoral application and include strengthening property rights, improving marginalized groups’ access to employment in the formal economy, strengthening social safety nets and education opportunities, and preventing sexual exploitation and abuse (KIND 2017, Aroussi 2021, Kostovicova et al. 2020) (See Section 3.5. Sector-Specific Program Elements: Economic Growth and Trade).
Strategy #11: Create legal frameworks that provide inclusive, comprehensive, and consistent protections against GBV

USAID and implementing partners should assist governments and CSOs to ensure that legal mechanisms protect against all forms of GBV committed by state and non-state actors. Verify that legal definitions of GBV are accurate and do not overlook local manifestations of violence. For example, during the Pinochet dictatorship in Chile, rape was deployed to systematically destroy leftists, regardless of their race, ethnicity, religion, or national group. Under conventional definitions, these crimes cannot be prosecuted as genocide (Sitkin et al. 2019). Work with survivors’ movements to update legal definitions to reflect survivors’ experiences, even when they do not fit within conventional categories (Sitkin et al. 2019).

It is critical to assess and plan for the ways conflict may affect implementation of GBV laws. To protect themselves or their associates, public officials with connections to organized crime may resist strengthening legal codes related to GBV (Kostovicova et al. 2020). It could be necessary to apply political pressure or other leverage to align legal codes with human rights, despite pushback from officials who may be complicit in past or current violations. Legal reform efforts should provide sufficient resources for enforcement of the law and address barriers stemming from conflict and other contextual factors that can affect who receives adequate protection from GBV. The law should recognize violence against people of diverse SOGIESC as a form of GBV. Further, USAID programming can support repealing legislation that increases the vulnerability of at-risk groups to GBV, whether committed by family, community members, armed groups, or state actors (UN Women 2019, Crisis Group 2015).

Strategy #12: Create peacebuilding policies and practices that address GBV

USAID should support GBV prevention, risk mitigation, and response policies and structural change by encouraging the inclusion of GBV provisions in peacemaking, peacekeeping, and peacebuilding programming. For example, early warning systems should include indicators that monitor forms of GBV in addition to other markers of gender inequalities (Brown et al. 2020). Encourage use of definitions of GBV that are gender expansive and inclusive (Human Rights Campaign n.d.). Gender experts, female monitors and translators, and gender-sensitive dispute mechanisms can aid in making peace agreements accessible to survivors (Pospisil 2018). Women’s rights organizations and other local organizations working on human rights play a vital role in filling security, prevention, response, and justice gaps that result from conflict and state fragility (Saferworld 2021). In providing services to survivors and working for gender
justice across conflict lines, these organizations contribute substantially to peacebuilding efforts. Ensure that they are included in peacebuilding processes and in crafting, implementing, and monitoring peace agreements (Nagel 2021).

Evidence demonstrates that sexual violence committed by combatants against civilians is not inevitable in war (Wood 2014). Hold commanders responsible for leading institutions that do not perpetrate GBV. Peace agreements and transitional justice mechanisms should directly address GBV and counter impunity (USAID 2016). Governments and organizations should ensure that reconstruction resources are distributed with sensitivity to GBV (Mootz et al. 2017). Call on international, regional, and national frameworks for gender equality and freedom from violence, such as Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), United Nations Security Council Resolution (SCR) 1325, SCR 1820, SCR 1888, and SCR 2016 to help guide peacebuilding processes. Check that there is local funding and responsibility for implementing peacebuilding policies that are GBV responsive (CARE et al. 2018).
Program Examples

Example #1: Healthy Relationships for a Violence-Free Future

USAID’s Center for Conflict and Violence Prevention (CVP), through the Reconciliation Fund, has a 3-year activity (2020–2023) in Timor Leste implemented by World Vision. The activity, called the Healthy Relationships for a Violence-Free Future, uses a people–to–people approach to reduce the prevalence of GBV. The program wards off GBV through three components: (1) Prevention: focused on raising community awareness and promoting local solutions to address drivers of GBV and increase gender equity; (2) Strengthened capacity: focused on enhancing community service organizations and their ability to provide services; and (3) Advocacy: focused on advocating for stronger laws around preventing GBV, improved service provision, and engagement of faith and local leaders. To date, the program has trained 112 faith and community leaders on preventing GBV, established 24 Youth IMPACT clubs, and trained 627 youth on civic engagement, peacebuilding and conflict resolution, and building healthy and peaceful relationships. It also positions youth to develop service learning projects to address community conflict and violence issues.

Example #2: Harmonia Activity: Communities Stopping GBV

USAID/CVP’s Harmonia Activity applies a people–to–people approach to prevent GBV in Timor Leste by promoting more equitable gender dynamics and improving gender-sensitive health services for women in Emera and Liquica municipalities. The 3-year Harmonia Activity (2020–2023) is funded by the Reconciliation Fund and implemented by Asosiasaun Hamutuk Nasaun Saudave (HAMNASA). The activity shifts attitudes and social norms, and improves support to victims of GBV through two complementary areas: (1) community microplanning, which brings together an inclusive, intergenerational coalition of community members to openly discuss harmful social norms related to GBV and identify solutions that will lead to peace; and (2) training of health providers, which is focused on increasing awareness, knowledge, sensitivity, and counseling skills of health providers to more effectively support victims of GBV and increase referrals to support services. To date, community microplanning groups have been established in 31 villages. They have developed community action plans, held community awareness sessions for nearly 4,166 participants, and provided training on responding to GBV for more than 302 health care professionals.
Example #4: Marawi Response Program

The 5-year (2018–2013) Marawi Response Program (MRP) supports local communities to counter the threat of violent extremism in Marawi, the Philippines. MRP is funded by several USAID bureaus, including the Bureau for Conflict Prevention and Stabilization’s Reconciliation Fund, and Women Peace and Security Fund. The program is implemented by Plan International. While gender has been a cross-cutting initiative since the project’s inception, in its third year, MRP began to intentionally address GBV as a priority through four workstreams: (1) preventing GBV through awareness raising, (2) enhancing protection by improving services for GBV survivors, (3) positioning women and girls to advocate with government and other stakeholders to address GBV and prioritize solutions, and (4) strengthening community solidarity groups to act as change agents in responding to and preventing GBV. To date, the program has conducted training sessions on GBV prevention for 100 community members; strengthened referral pathways to address GBV cases and provided coaching to more than 60 stakeholders; issued seven microgrants benefiting 6,500 community members to support local service delivery for GBV survivors, address unreported GBV cases, raise awareness, and prevent GBV; conducted workshops for nearly 600 community solidarity group members on peacebuilding, GBV prevention, and other topics to build their capacity to serve as champions for GBV prevention; and linked community solidarity groups to government to sustain and institutionalize these structures and create local solutions to this challenge.

Example #3: Inter-Community Girls Empowerment Activity

The Inter-Community Girls Empowerment Activity, supported by CVP’s Reconciliation Program and Women, Peace and Security Fund, promotes gender equality and socioeconomic empowerment of young women in Egypt’s upper governorates of Minya and Qena. The activity also entails a component focused on reducing GBV and the harmful social norms and gender dynamics that contribute to violence against women and girls. The 3-year activity (2020–2023) is implemented by local NGO El-Nidaa and has three objectives: (1) cultivate community champions, (2) improve practical life skills for self-protection, and (3) increase inter-community cooperation. Regarding GBV prevention-specific initiatives, Objective 1 is to raise community awareness about various forms of GBV, including early and forced marriage, sexual harassment, and FGM/C, as well as promote gender equality and female empowerment more broadly. Objective 2 is to actively work to combat GBV and create solid bonds across communities. The activity is working towards the achievement of several expected results including, but not limited to, cultivating a cadre of community champions and peer mentors to support the inclusion of women and girls in society and the economy; developing a shared community vision that promotes cross-cultural understanding and combats violence against women and girls; increasing school retention rates for girls; and increasing the capacity of women and girls to start small businesses or participate in the workforce.
Tools and Resources


ACKNOWLEDGMENTS

This document was written by Heather Chantelois-Kashal, with support from other members of the CARE-GBV team, including Courtney McLarnon, Diane Gardsbane, Michele Lanham, and Fatima Saeed. The document was copyedited by Sarah Muthler and Jelena B. Simmons and designed by Jill Vitick and laid out by Miel Design Studio. Thank you to the USAID staff who provided review and input: Alayna Tetreault-Rooney, Jennifer Hawkins, Jamie Small, Luljeta Gjonbalaj, Magdalena Beaublanc, and Rashad Nimr; and to the Foundational Elements TAG members who provided feedback: Anjalee Kohli and Prabu Deepan.

SUGGESTED CITATION


REFERENCES


The goal of the Collective Action to Reduce Gender-Based Violence (CARE-GBV) activity is to strengthen USAID’s collective prevention and response, or “collective action” in gender-based violence (GBV) development programming across USAID. For more information about CARE-GBV, click [here](https://www.usip.org/sites/default/files/2021-08/sr_501-gender-based_violence_and_covid-19_in_fragile_settings_a_syndemic_model.pdf).

To learn more, please contact:

**Chaitra Shenoy, JD**
Contracting Officer’s Representative
Gender Equality and Women’s Empowerment Hub
[cshenoy@usaid.gov](mailto:cshenoy@usaid.gov)

**Diane Gardsbane, PhD**
Chief of Party
CARE-GBV
[diane@makingcents.com](mailto:diane@makingcents.com)