

PROGRAMMING TO ADDRESS
VIOLENCE
AGAINST WOMEN

8 CASE STUDIES
VOLUME 2

PROGRAMMING TO ADDRESS
VIOLENCE
AGAINST **WOMEN**

8 CASE STUDIES
VOLUME 2



CONTENTS

	Dedication	ii
	Acknowledgements	iii
	Foreword	iv
1	INDONESIA: Ending Violence Against Women and Keeping the Faith	1
2	ALGERIA: Creating a National Resolve to Eradicate Violence Against Women	9
3	INDIA: Violence Against Women—Societal Concern, Public Health Crisis	17
4	ZIMBABWE: Evolution of a Domestic Violence Bill	25
5	SRI LANKA: Building the Gender-Responsive Psychosocial Well-Being of Individuals and Communities Affected By the Tsunami	33
6	HONDURAS: Changing Minds and Uprooting Domestic Violence Through Police Training	39
7	NEPAL: Overcoming Violence Against Women Through An Integrated and Community Based Approach	45
8	GUATEMALA: Empowering Women Through National Policy and Local Solutions	53

DEDICATION

This publication is dedicated to our estimable colleagues Mr. Adnane Souilah, who provided invaluable input to the Algeria case study, Mr. Kamel Sait and Mr. Mustapha Benbara all of whom tragically perished during the attack on the United Nations Offices in Algiers on the 11th of December 2007. We also recognize the courage of the survivors who have persevered in the face of adversity.

ACKNOWLEDGEMENTS

This review was conducted through the Gender, Human Rights and Culture Branch with the coordination support of UNFPA's Country Technical Services Teams (CSTs). The contributors who provided written submissions, comments and feedback to form the basis for the case studies are: Ms. Faiza Benhadid (CST Amman), Mr. Adnane Souilah (Algeria), Dr. Ouahiba Sakani (Gender Focal Point Algiers), Mr. Luis Mora (CST Mexico), Ms. Kiran Bhatia (CST Kathmandu), Dr. Dalila Alloula (Algeria), Dr. Faiqa Medjahed (Algeria), Ms. Luisa Eugenia Morales Modenesi (Guatemala), Ms. Nadine Gasman (Guatemala), Ms. Patricia Diaz (Guatemala), Ms. Marcela Suazo (Honduras), Mr. Hernando Clavijo (Honduras), Ms. Maritza Elvir (Honduras), Ms. Dhanashri Brahme (India), Ms. Sangeeta Mansharamani (India), Anuradha Rajan (India), Ms. Gondan Puti Renosari (Indonesia), Ms. Rizvina Dealwis (Sri Lanka), Ms. Sudha Pant (Nepal), Ms. Gift Malunga (Zimbabwe), Ms. Phyllis Munyama (Zimbabwe), Anna Rueben-Mumba (Zimbabwe), Dr. Lindsay Edouard (New York), Ms. Azza Karam (New York), Ms. Maria Jose Alcala (New York) and Ms. Aminata Toure (New York).

Special thanks are owed to UNFPA staff in Country Offices in Indonesia, Algeria, India, Zimbabwe, Sri Lanka, Honduras, Nepal and Guatemala, who have demonstrated their commitment to combating violence against women and have taken the time to document these very important initiatives.

Thank you also to Ms. Fauvette van der Schoot for providing the English translation of the Algeria Case Study and Mr. Tomas Jimenez Araya for providing the English translation of the Guatemala Case Study.

Ms. Dina Deligiorgis and Ms. Leyla Sharafi, in the Gender, Human Rights and Culture Branch, provided key technical inputs to the publication and coordinated the writing and production process.

Ms. Christine Dinsmore and Ms. Barbara Ryan edited the publication.

FOREWORD

It gives me great pleasure to introduce this publication, the second volume in a series which strives to provide support and inspiration to all prevention and response efforts addressing violence against women. These good practices come from our country offices, where UNFPA is committed to keeping the issue of violence against women a priority as a major human rights and health concern.

The right to live free of violence and discrimination is the right of every human being. Yet, this right is being violated on a massive and systematic scale. Violence against women continues in every part of the world, limiting social and economic progress and harming families, communities and nations.

Perhaps no other service provider has as great of an opportunity to aid women survivors of violence as health care workers. For some women, the chance to visit a health clinic may be their only hope to end the abuse. Continuing to link sexual and reproductive health services to address violence against women, including for prevention and diagnosis, counseling and referrals, is a critical strategy which must be maximized.

Over the years, we have seen significant efforts being undertaken by governments, NGOs, women's groups and other networks to address violence against women. This work by different actors has enabled a better understanding of the nature and scope of violence and of its impact on women and societies. Legal and policy frameworks for addressing such violence have been established at both the international and national levels, covering many forms of violence in the public and private spheres. Yet while progress has been made, much greater action is needed before there can be an end to the suffering.

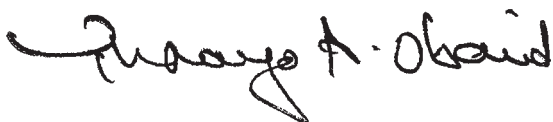
The United Nations system is committed to intensified, coordinated, and urgent action to help governments prevent, punish, and eliminate violence against women. The United Nations Secretary General recently launched the campaign *UNITE to End Violence Against Women*, while the United Nations Interagency Network on Women and Gender Equality Task Force on Violence Against Women commenced a joint programming initiative in 10 countries. The United Nations Trust Fund to Eliminate Violence Against Women began its thirteenth grantmaking year by continuing to fund innovative and catalytic projects which strive to make violence against women history.

I am proud to say that UNFPA is part of all of these efforts, including through its contribution to the interagency group—United Nations Action against Sexual Violence in Conflict—which utilizes the comparative strengths of each of its 12 United Nations agencies while encouraging them to speak with one voice on sexual violence in conflict and recovery settings. As a way forward, UNFPA will work through these mechanisms while continuing to support our national counterparts—particularly government partners, as demonstrated in the case studies in this publication.

Disseminating these good practices is one step towards sharing and learning from one another. In India and Nepal, national partners worked together to institutionalize a coordinated response to violence against women with a special focus on using the health system as an entry point. In Indonesia and Honduras police and faith based organizations were sensitized to respond adequately to end violence against women. In various countries, governments drafted and passed national legislation and policies such as the Domestic Violence Act in Zimbabwe and the National Strategy to Combat Violence Against Women throughout the Life Cycle in Algeria. In Guatemala, much progress was achieved through coordination and synergy between the national and local governments. In Sri Lanka the Government and national NGOs provided gender-responsive psychosocial support for women and communities affected by the tsunami. Throughout these efforts, UNFPA provided a strong supportive role to national governments and civil society.

I hope that these encouraging case studies provide some hope and guidance for ending impunity and the culture of silence surrounding violence against women.

I would like to especially acknowledge our country offices in Indonesia, Algeria, India, Zimbabwe, Sri Lanka, Honduras, Nepal and Guatemala as well as other colleagues for their contributions. Without them, this publication would not have been possible.



Thoraya Ahmed Obaid
Executive Director, UNFPA

1

INDONESIA: ENDING VIOLENCE AGAINST WOMEN AND KEEPING THE FAITH

In Indonesia, women's low social status, no different than in other parts of the world, compounded by religious and traditional stereotypes about gender fuels violence against women. Shame keeps it cloaked in secrecy.

The concept of gender-based violence, particularly domestic violence, often does not resonate within Indonesian society, and is not readily identified even among many victims themselves. Women who do recognize themselves as survivors of violence often remain silent because of the dishonour associated with this taboo. With conservatism on the rise, a majority religious population and a culture of silence on the issue, Indonesia required deliberation and sensitivity in confronting violence against women. UNFPA recognized the need to enlist progressive religious leaders and, along with the Ministry of Women's Empowerment, joined religious communities in a pilot project that provides services and shelter for abused women.

BACKGROUND

The social unrest in May 1998 during the anti-Soeharto demonstrations exacerbated violence against women with reported spikes in sexual assaults and rapes, especially of minority women.¹ As a result, the State and communities issued a declaration to put an end to violence against women and established the Zero Tolerance Policy. The following year, UNFPA in collaboration with the Ministry of Women's Empowerment and the United Nations Development Fund for Women (UNIFEM) endorsed 'Strengthening of Partnership between the Government and Non-governmental Organizations for the Management of Elimination of Violence against Women' under the Fifth UNFPA Country Programme of Assistance for Indonesia (1995-2000). This initiative established the first hospital-based women's crisis centre at Cipto Mangunkusumo Hospital in Jakarta. It also identified potential community-based (including faith-based) crisis centres for the prevention and treatment of violence against women.

The groundwork for ending gender-based violence was further solidified when UNFPA and the Ministry for Women's Empowerment collaborated to form the Interagency Network for the Prevention and Management of Violence against Women at Central and Local Levels, referred to as the 'VAW' project. Initially it was to be administered by three partners² in all areas covered by the Sixth UNFPA Country Programme of Assistance (2001-2005).

But obstacles both big and small impeded the original initiative. Promised funding did not materialize. Meetings and discussions with potential substitute donors proved fruitless. Some potential partners turned their attention away from issues pertaining to violence against women and instead focused on the promotion of democracy or response to and prevention of escalating acts of terrorism.

Despite these and other constraints, the Ministry of Women's Empowerment and UNFPA forged ahead to launch a modified programme with Puan Amal

¹ Office of the United Nations High Commissioner for Human Rights, *Integration of the Human Rights of Women and Gender Perspective: Violence against Women. Report of the Special Rapporteur on violence against women, its causes, and consequences, Ms. Radhika Coomaraswamy*, 11 January 1999.

² The National Commission for the Elimination of Violence Against Women and two nongovernmental organizations Rifka Annisa and Puan Amal Hayati were the projected implementing partners.

Conservative dictates occurred throughout Indonesia. The *shari'ah* (Islamic law) in Nanggroe Aceh Darussalam compelled women to wear *jilbab* (headscarf). In Yogya, young men from certain Islamic political parties conducted 'sweeps' of women who went out at night. And curfews for women were enforced in Padang (West Sumatera) and Makassar (South Sulawesi) where women were allowed out only if they were accompanied by *mahram* (close male relatives).³

IMPLEMENTATION

The original plan was to establish a programme with civil society organizations to provide community-based services in the areas covered by UNFPA's Country Programme of Assistance. For nearly three years, ongoing negotiations were conducted with po-

Locating a haven

While there are various faith-based institutions, such as mosques, Qur'anic recital groups and imam organizations, *pesantrens* were seen to be most effective in addressing violence against women because they are traditional Islamic institutions deeply rooted within the Indonesian society. They exist in

预览已结束, 完整报告链接和二维码

<https://www.yunbaogao.cn/report/index/report?rep>