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## An Improvement Approach to Respond to Gender-Based Violence

Gender-based violence (GBV) is violence directed at a woman, man, girl or boy based on that person's sex, gender identity, or how that person meets or does not meet cultural norms of femininity or masculinity. Sexual, physical and psychological abuse are all forms of GBV. It encompasses a wide range of human rights abuses, including domestic violence (violence by a family member and intimate partner violence). Sexual violence is another form of GBV, and includes sexual abuse, rape, and forced prostitution. Human trafficking and harmful traditional practices, including child marriage, female infanticide, honor killings, female genital mutilation/cutting, and dowry-related violence, are also forms of GBV.

GBV is not only a women's issue, although girls and women are disproportionately affected by GBV. The [WHO estimates that at least one in three women globally will be beaten, raped, or otherwise abused](#) [1] during her lifetime, and it often happens while she's still a child. Yet men and boys are also subjected to GBV, and due to rigid gender norms in some parts of the world, men and boys can actually be less able to seek help as victims of GBV. Unequal power relations and traditional perceptions are major precursors for GBV.

The effects of GBV go further than just poor health outcomes for women, men, girls and boys; GBV thwarts development and prevents those affected from reaching their full human potential. Through the USAID ASSIST Project, we use [improvement methods](#) [2] to integrate GBV prevention and response strategies into our improvement activities. Preventing and responding to GBV can be critical for achieving better outcomes for many services.

The first step in [gender-responsive programming](#) [3] is to understand the local beliefs, cultural norms and the context in which programs are implemented to be able to develop culturally-sensitive and relevant strategies to overcome gender-related issues and barriers thwarting improved health outcomes. That means analyzing where violence is occurring and where it has the potential to occur in order to adequately prevent and respond to GBV. Working to sensitize communities to the harmful effects of GBV on individuals and its detrimental impact on families and communities is also critical. During gender trainings, first sensitize staff to the negative health outcomes of GBV and the local prevalence of such violence. We then work with implementing partners and stakeholders to design local solutions to address gender-related issues, including relating to GBV.

### Addressing GBV through Improvement

#### 1. Identify gender-related issues affecting women, men, girls, and boys (gender analysis)

Conducting a [gender analysis](#) [4] is a process that identifies the gender inequalities, constraints, and opportunities that can contribute to or affect health and project outcomes and helps program staff understand in what ways the experiences of men and women differ, and how they are similar. It is an important component of gender integration by highlighting the distribution of power and resources based on gender norms in different communities. We utilize gender analysis to identify and understand the differences, and the impact of differences, on the lives and health status of women, men, girls, and boys including:

- Access to resources
- Knowledge, beliefs and perceptions,
- Practices and participation
- Legal rights and status
- Power, control and decision-making

Through conducting a gender analysis, issues related to gender-based violence are identified, including the prevalence of sexual violence against women, men, girls, and boys; intimate partner violence; child marriage; female genital mutilation/cutting; feticide; and the ability of survivors to access services and for services to respond adequately to the needs of patients.

## **2. Collect and analyze sex-disaggregated and gender-sensitive indicators where appropriate**

[Sex-disaggregated data and gender-sensitive indicators](#) [5] identify quantifiable differences between women and men and between girls and boys and measure changes in the status and role of males and females over time. This can include identifying the prevalence of GBV and the impact of GBV on outcomes. These gender-responsive indicators allow vital information about existing gaps and issues make it possible to adapt programs to meet the unique needs of women, men, girls, and boys. It is critical to disaggregate data by sex and age where appropriate in order to expose gender-based differences. It is also important to use gender-sensitive indicators that track males' and females' access to, utilization of, and retention in services separately to be able to identify and address any issues, such as GBV, which causes them to be less likely to access or benefit from services, or to have poorer outcomes or results. While identifying gaps in access or retention in services of males and females could alert a team to an underlying issue related to GBV, gender-sensitive indicators can directly inform staff about the prevalence of GBV.

## **3. Identify gender-related gaps and issues affecting women, men, girls, and boys in the program and propose gender-related changes to test to overcome gaps**

Through analyzing data, gaps in access, retention or outcomes can be identified. In these cases, it's extremely important to do further research to determine what is causing the gap and to make adjustments to the service or intervention in order to benefit males and females equitably. We use improvement methods to find innovative and workable solutions to address gender-related issues affecting health outcomes, including issues related to GBV. This is done by evaluating the different conditions of women and men, including changes over time, and digging deeper to further define the root problems of these differences. We work with local implementing partners to develop local solutions and changes to test, to monitor outcomes by sex, and to characterize these results through quantitative measures.

For example, in a household economic strengthening program for vulnerable children and families, program staff noticed that retention rates of mothers in savings groups was low, which in turn affected the ability of these mothers to pay for schooling or food for their children. After investigating why that was, the team realized that there has been an increase in violence against women in the program by their male partners, a negative unintended consequence. The team immediately began to research the underlying reasons for the increase in violence, in order to then propose a change to test to overcome the barrier or issue causing poorer outcomes.

## **4. Implement gender-related changes and monitor indicators over time to determine whether the change is an improvement**

Once gender-related aims are developed, the next step is to propose gender-related changes to test to overcome gaps. It is helpful to first review changes related to gender with people experienced in gender issues to ensure that changes are not reinforcing traditional gender norms or causing other adverse events.

## **5. If effective, scale up to other facilities; document and share learning**

Through monitoring indicators over time, we are able to determine whether a change is an improvement. If a change is found to yield better results, then it is appropriate to scale up the intervention to other facilities and to [document](#) [6] and [share](#) [7] this learning so other sites can benefit from it.

## **Resources to Learn More**

- [The United States Strategy to Prevent and Respond to Gender-Based Violence](#) [8]
- [USAID's Strategy to Prevent and Respond to Gender-Based Violence](#) [9] ( 2-page flyer)
- [USAID Guide to Programming Gender-Based Violence Prevention and Response Activities](#) [10]
- [The Crucial Role of Health Services in Responding to Gender-Based Violence](#) [11], by the Interagency Gender Working Group and Population Reference Bureau
- [Applying Gender-Integrated Strategies and Approaches to Addressing Gender-Based Violence in India](#) [12], by the Public Health Foundation of India, Measure Evaluation, the International Center for Research on Women, and the Health Policy Project

[Gender](#) [13]

[Gender-based Violence](#) [14]

**ASSIST publication:** no

[Method descriptions](#) [15]

[English](#) [16]



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<https://www.usaidassist.org/resources/improvement-approach-respond-gender-based-violence>

**Links**

- [1] [http://www.who.int/gender/violence/who\\_multicountry\\_study/en/](http://www.who.int/gender/violence/who_multicountry_study/en/)
- [2] <https://usaidassist.org/topics/improvement-science>
- [3] [https://usaidassist.org/sites/assist/files/assist\\_gender\\_integration\\_approach\\_feb2013\\_0.pdf](https://usaidassist.org/sites/assist/files/assist_gender_integration_approach_feb2013_0.pdf)
- [4] [http://pdf.usaid.gov/pdf\\_docs/pdacx964.pdf](http://pdf.usaid.gov/pdf_docs/pdacx964.pdf)
- [5] <https://usaidassist.org/resources/gender-considerations-monitoring-and-evaluation>
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- [12] [http://www.healthpolicyproject.com/pubs/382\\_GenderBasedViolence.pdf](http://www.healthpolicyproject.com/pubs/382_GenderBasedViolence.pdf)
- [13] <https://www.usaidassist.org/topics/gender>
- [14] <https://www.usaidassist.org/topics/gender-based-violence>

[15] <https://www.usaidassist.org/resource-type/method-descriptions>

[16] <https://www.usaidassist.org/language/english>