Taking Policy to Action Against GBV:
GBV, Policy Implementation, and International Development

SEPTEMBER 2010

This concept note on policy implementation and gender-based violence (GBV) is intended to inform a vision and action agenda for USAID and other international health and development support mechanisms. This brief addresses the question of how such mechanisms can assist governments and communities to take action on GBV while supporting local ownership in accordance with the Global Health Initiative, U.S. President’s Emergency Plan for AIDS Relief, and other international and national commitments.

The brief also reflects understanding gained through five years of policy implementation work on GBV and stigma and discrimination under the USAID | Health Policy Initiative—work focused on anchoring the response to reproductive health and HIV issues in the community to achieve comprehensive, effective, and sustainable solutions.

Gender-based violence is defined as: “Any harmful act that is perpetrated against a person’s will and that is based on socially ascribed (gender) differences between males and females.”

Interagency Steering Committee, UN, 2005

Turning policies into action is never an easy endeavor—particularly when dealing with complex issues like GBV. It is imperative to consider a framework for an international development response that is tailored to local conditions, aligned with international law, and effective in both providing high-quality health services to survivors of violence and addressing root causes to prevent GBV.

How: 3-step process of awareness raising, networking, and competency transfer

1. Awareness raising: Understanding the issue, local situation, laws, and policies; identifying key players; and fostering commitment to collective action.

2. Networking: Building social cohesion in a group or in a community; building alliances based on common action and shared common objectives; and fostering exchange between different levels of power (affected stakeholders, policymakers, community influencers, and implementers).

3. Competency transfer: Building capacities that include a combination of technical knowledge, organizational skills, and systems—including communication, coordination, planning, monitoring, decisionmaking, and financing systems.

Who: 3-stages of implementation: health sector strengthening, other sector coordination, and resilient community development

1. Health sector: Engaging all key areas of the health sector, including emergency to clinical to hospital to legal-medical to psychological services.

2. Other community sectors: Engaging law enforcement, organized civil society (including women and youth, survivor organizations, etc.), religious organizations, municipal authorities (local government), and social services.

3. Resilient communities: Building resilience by engaging vulnerable communities, including the marginalized and those poorly organized, to participate in the response.

TIPS

- A response that must address and change social norms needs to be anchored in the community: networking and systems development thus become key ingredients for sustainability.

- The local situation will determine final response needs and priorities; all things being equal, however, it is preferable to begin working with the health sector.
- It is most effective to begin working with allies and where there is a greater chance of success, and then to move on to addressing the more challenging areas in a step-by-step process.
- Throughout the process, it is important to build critical consciousness among stakeholders to understand and respond to GBV as rooted in gender and power inequalities and related to stigma and discrimination.
- Participatory processes of learning by doing together take time and resources—but are essential for effective responses to GBV.

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<th>An ANCHOREd Approach to GBV</th>
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<td><strong>Key Elements</strong></td>
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<td>Awareness Raising</td>
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<th>Key Elements for Stages of Implementation</th>
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<td><strong>Health Sector Strengthening</strong></td>
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<td>Understanding of GBV: sexuality, gender, and violence; as well as political and social context Identification of health needs and key stakeholders</td>
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<td>All health services (emergency response, clinic, and hospital) Service mapping and common action plan</td>
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<td>Protocols for identification, treatment, and referral Ongoing training for new staff</td>
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