



**REPUBLIC OF ZAMBIA**

**GENDER IN DEVELOPMENT DIVISION**

**CABINET OFFICE**

**National Action Plan on Gender-Based Violence  
(NAP-GBV)  
2008-2013**

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## List of Acronyms

ALANGIZI	-	Alangizi National Association of Zambia
CDC	-	Curriculum Development Centre
CCJP	-	Christian Commission for Justice and Peace
CSO	-	Central Statistics Office
FAWEZA	-	Forum for Women Educationalist of Zambia
GFP	-	Gender Focal Point
GIDD	-	Gender in Development Division
GRZ	-	Government of the Republic of Zambia
LAZ	-	Law Association of Zambia
LRF	-	Legal Resources Foundation
MCDSS	-	Ministry of Community Development and Social Services
MIBS	-	Ministry of Information and Broadcasting Services
MLGH-	-	Ministry of Local Government and Housing
MLSS	-	Ministry of Labour and Social Security
MOE	-	Ministry of Education
MOFED	-	Ministry of Finance and Economic Development
MOH	-	Ministry of Health
MOLA-	-	Ministry of Legal Affairs
MSTVT	-	Ministry of Science, Technology and Vocational Training
MYSCD	-	Ministry of Youth, Sport and Child Development
NGOs	-	Non Governmental Organisations
NGOCC	-	Non Governmental Organisation Coordinating Committee
NLACW	-	National Legal Aid Clinic for Women
PHRC	-	Permanent Human Rights Commission
UNZA	-	University of Zambia
VSU	-	Victim Support Unit
WFC	-	Women's Finance Cooperative
WiLDAF	-	Women in Law and Development in Africa
WLSA -	-	Women in Law in Southern Africa
YWCA	-	Young Women's Christian Organisation
ZARD	-	Zambia Association for Research and Development
ZCEA	-	Zambia Community Education Association
ZLDC	-	Zambia Law Development Commission
ZPS	-	Zambia Police Service

# **NATIONAL ACTION PLAN ON VIOLENCE AGAINST WOMEN AND CHILDREN IN ZAMBIA 2008-2013**

## **1. ZAMBIA COUNTRY SITUATION**

### **1.1. Socio-demographic issues**

According to the Living Conditions Monitoring Survey (LCMS) 1V of 2004 about 68% of the population of Zambia live below the national poverty line, earning less than K111747 per month. The persistently high income poverty observed in 2004 is in sharp contrast to the rapid acceleration in economic growth experienced in 1999. This implies that the country's improved economic performance over recent years has not translated into significant decline in poverty. The CSO report of 2002/2003 Adverse human welfare indices, such as reduced access to nutritionally adequate food basket, child and adult malnutrition, insufficient access to education and health facilities and the resultant reduction in life expectancy are some of the challenges faced in the development process of the country. Fiscal stability is overshadowed by a high domestic debt estimated at twenty percent of GDP while budgetary interest payments take up about sixteen percent of the planned expenditures for the National Development Plan 2006-2010.

According to the 2001/2002 demographic and health survey, more than a quarter of Zambian adolescents have had a child. Despite this, the percentage of girls reaching grade 7 improved from 57 per cent in 1990 to 75 per cent in 2004. The net primary school enrolment rate for girls increased from 69 per cent in 2001 to 75 per cent in 2003, while the rate for boys remained at 71 per cent from 1990 to 2003. Declines in infant and child mortality may be attributed to increased access to family planning services, antenatal care and under-five health care clinics. The under-five mortality rate decreased from 191 deaths per 1,000 live births in 1992 to 168 in 2002. During the same period, the infant mortality rate declined from 107 deaths per 1,000 live births to 95.

The population of Zambia which was 9.4 million in 2000 of which 51% were women is expected to reach 15.3 million by 2015. The contraceptive prevalence rate increased from 26 per cent in 1996 to 34 per cent in 2002. The total fertility rate declined from 7.2 children per woman in 1980 to 6.0 children per woman in 2000. More than half the population is under the age of 25. The unmet need for Family Planning is 23%.

The maternal mortality ratio increased from 649 deaths per 100,000 live births in 1996 to 729 in 2002, in part due to an increase in the number of women delivering at home without skilled attendants. Access to health services at the community level, especially access to emergency obstetric care, is poor. The percentage of births attended by skilled personnel declined from 51 in 1992 to 43 in 2002.

The HIV/AIDS pandemic has become one of the major causes of illness and death in Zambia. It is impeding development efforts. According to the ZDHS, HIV prevalence in the general population was estimated at sixteen per cent of Zambians aged 15-49. There is a higher prevalence of HIV among women (18% compare to men, 13%). Girls aged 15-24 are four times more likely to be infected than boys in the same age group. The gender dimension of HIV and AIDS has exacerbated the problem of poverty among

women in the age group of 24-29. Poor women are more susceptible to gender based violence and unprotected sex and therefore more vulnerable to HIV and AIDS.

Nearly a quarter of all Zambians living with HIV/AIDS are under the age of 25, and young people aged 14 to 24 account for half of all new HIV/AIDS cases. Zambia is faced with the “triple threat” of HIV/AIDS, food insecurity and weakened government capacity to deliver basic social services

## 1.2. Gender in the context of Development

The Government of the Republic of Zambia (GRZ) has stressed that meaningful development cannot take place without addressing the fundamental gender issues and particularly those of women’s empowerment that continue to constrain development. Three out of the eight Millennium Development Goals (MDGs), namely promotion of gender equality, reduction of child mortality and improving maternal health, represent a global commitment to addressing gender issues that affect women directly. Addressing gender equality and women’s empowerment is, therefore, central to the attainment of the MDGs.

Institutionalised gender inequality reflected in the low status and limited opportunities for women and adolescent girls. In spite of the relatively higher percentage of women (51%) of the country’s total population, their participation in the development processes remains low. Cultural and traditional practices continue to infringe on the rights of women and girls, and gendered power relations at all levels and in all spheres of life poses serious impediments to the advancement of women.

Women are poorly represented in all spheres of decision-making. The proportion of seats held by women in Parliament in 2004 was 14% and 12% in 2006 which is below the 30% and 50% recommended by SADC and AU respectively.

The country has a dual legal system based on both statutory and customary laws, and while statutory laws provide for more equality for women such as inheritance and the control of and access to such productive resources as land and credit<sup>1</sup>, the day to day life of a majority of the Zambian population is governed by the local courts that administer customary laws, which is primarily based on in male power, authority, and domination over women.

HIV/AIDS has a disproportionate impact on the lives of women and girls as women/girls carry the brunt of the burden in caring for people living with AIDS and for orphans while also securing a livelihood for the household. AIDS increases women and girls vulnerability to poverty and vice versa. It also decreases inter-generational transfer of life skills and knowledge about agriculture and other livelihoods, and reduces adult labour resulting in lower agriculture production and increased food insecurity. The link between Poverty, gender inequality and HIV/AIDS is inseparable.

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<sup>1</sup> See, for example, the “Report of the National Conference: Women’s Property Rights and Livelihoods in the Context of HIV and AIDS.” Edited by K. Izumi, FAO, Zambia, 2006.

Gender-based violence (GBV) infringes upon the rights of women and girls and diminishes their abilities to protect themselves against HIV. The GBV is a result of unequal power relations between men and women and a reflection of the low status and negative attitudes towards women. According to a GIDD report<sup>2</sup> of 2000 violence against women and children is linked strongly to the socio-economic situation of the households where such violence takes place, with a high correlation between GBV and poverty.

Women continue to be underrepresented in technical and vocational education (TVE) programmes, where they make up less than 20% of enrolments, and are mainly involved in the traditional females' occupations, such as hairdressing, secretarial work, health care, hotel work, garment manufacture, and home economics. Specialised programmes geared to the industrial sector, such as mechanics, electrical and civil engineering, are still dominated by male students. Limited employment or cash generation opportunities have also retarded development of men but more so of women.

## **2. Justification/ Rationale**

### **2.1 *Gender-Based Violence (GBV) as a Global Health, Human Rights, and Development Problem***

Violence against women is a global health, human rights, and development issue that transcend geography, class, culture, age, race and religion to touch every community in every corner of the globe. It has been estimated that at least one in every three women around the world has been beaten, coerced in to sex, or otherwise abused in her lifetime. The public health implications of this violence are enormous: according to a World Development report, violence “is more serious a cause of death and incapacity among women of reproductive age as cancer, and greater cause of ill-health than traffic accidents and malaria combined.”<sup>i</sup> It drains a country's resources and handicaps women's ability to contribute to social and economic progress.

Yet, in spite of the overwhelmingly negative impact of violence against women on individuals and societies, it is often sanctified by customs and reinforced by institutions that limit women's rights, their decision-making power, and their recourse to protection from violence. As such, violence against women is both an outcome and an expression of women's subordinate status in relation to men in societies around the world. The United Nations Declaration on the Elimination of Violence against Women has defined violence against women as “any act of gender-based violence that results in, or is likely to result in, physical, sexual, or psychological harm or suffering to women, including threats of such acts, coercion, or arbitrary deprivation of liberty, whether occurring in public or private life.” The UN Declaration makes the link between gender-based oppression and violence against women clear in emphasizing that violence against women is “a manifestation of historically unequal power relations between men and

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GRZ (2000) Technical Committee Report on Strengthening of Laws, Enforcement Mechanisms, and Support Systems on GBV<sup>2</sup>

women, which have led to the domination over and discrimination against women by men and to the prevention of the full advancement of women.”<sup>ii</sup>

Wherever women are oppressed by their gender roles, children may be at increased risk of violence. Article 19 of the CRC defines violence against children as “all forms of physical or mental violence, injury and abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse.” It also draws on the definition of violence in the 2002 *World Report on Violence and Health*: the intentional use of physical force or power, threatened or actual, against a child, by an individual or group, that either results in or has a high likelihood of resulting in actual or potential harm to the child’s health, survival, development or dignity.

### *Violence against children*

In turning to the issue of violence against children, it is important to note that where violence against women is prevalent, both girls and boys are likely to suffer increased levels of violence. Children who live in violent households, for example, are at greater risk of infant and early-child mortality either due to neglect or to direct exposure to violence. The seriousness of this cannot be underestimated: in some settings around the world, violence among parents has been shown to be one of the single most important precursors to child maltreatment fatalities. Children can further suffer a host of emotional and behavioral problems related to bearing witness to the violence.

Moreover, exposure to violence in the natal home reinforces trans-generational violence, leading to a cycle of violence that undermines the future generations in any society. To the extent that parents’ interactions serve as a prototype for their children, observing violence may influence how a child will engage in relationships later in life: research has illustrated that girls who are exposed to physical violence between their parents in childhood are considerably more likely to be victimized by an intimate partner as an adult; boys who are exposed are considerably more likely to become adult perpetrators of violence.

In any society where violence and discrimination against women are tacitly condoned or explicitly enforced, both boys and girls are not able to enjoy their full rights to safety and security. When children do not have the benefit of protective relationships in the family and/or the community, exposure to stress in the form of violence can disrupt physical and psychological development, leading to greater susceptibility to longer-term health problems. This, in turn, places substantial social and economic burdens on the society, resulting in slowed progress. On the other hand, healthy, educated, and empowered women are more likely to have healthy, educated, and confident sons and daughters who can become active and productive members of society.

## **2.2. The Gender Dimensions of Gender-Based Violence (GBV)**

“Gender” refers to the socially determined differences between men and women. These differences encompass roles, responsibilities, opportunities, privileges, expectations, and limitations prescribed to males and to females in any culture: they are socially

constructed, context based, and learned through socialization, and they determine many aspects of relationships between males and females as well as among females and among males. Although gendered roles and responsibilities can change over time within and across cultures, they are often deeply rooted in long-standing assumptions societies hold about women, men, boys, and girls. In virtually every society around the world, these assumptions tend to reinforce patriarchal norms and values, or systems by which males hold more power than females in both private and public domains and, to differing degrees, exercise this greater power as a basic entitlement.

To the extent that gender roles are used to both preserve and maintain women's subordinate status in relation to men, gender has been identified as one of the most important underlying factors promoting violence against women: in fact, violence against women is often referred to as "gender-based violence."

The links between gender-based violence against women and increased risk of violence for girls is straightforward: girls, like their sisters, mothers, grandmothers, and aunts, are at direct risk of gender-based violence resulting from discrimination. In fact, a recent global analysis of violence against women conducted by the UN specifically identifies girls as one of the subgroups of females most prone to being targeted for violence because of the double vulnerability of gender and young age.

The link between gender-based violence against women and violence against boys is less direct, but no less significant. Whereas women and girls may be vulnerable to violence due to socially determined power differentials between males and females that increases their risk of violence and limits their options to overcome or address it, boys may be victims of violence based on widely shared expectations of masculinity.

Where traditional norms of masculinity are associated with characteristics such as aggressiveness, competitiveness, dominance, strength, courage and control, boys who do not manifest these qualities may be at greater risk of being exposed to violence committed against them by other boys and by men, and in significantly fewer cases, by women. In some school settings, for example, boys are targets for corporal punishment that is used as a way to build their immunity to fear. In addition, the process of acculturating to masculine standards of behavior may pit boys against boys, putting them at risk of peer violence: not surprisingly, one of the greatest causes of mortality of adolescent boys globally is homicide, and particularly of violence involving weapons.

### **2.3. Impact of Violence on Social Development: Meeting the Millennium Goals**

In addition to the well-documented short- and long-term physical and mental impacts on women and children, violence incurs considerable social and economic costs to individuals, such as personal insecurity, lost income, and productivity. The violence also has significant costs for the economies of developing countries because of its strain on healthcare and judicial systems, lower worker productivity and incomes, and lower rates of accumulation of human and social capital. Indirect costs such as the value of foregone



earnings in both paid and unpaid work as a result of absenteeism related to violence may also be significant.<sup>iii</sup>

Clearly, Gender-Based Violence (GBV) is an outcome of and a contributor to individual poverty, as well as the impoverishment of communities and States. The Millennium Declaration (2000)—to which Zambia is party—recognizes this link, particularly in relation to violence against women: it acknowledges that in order to achieve the Millennium Development Goals, it is necessary to “combat all forms of violence against women and to implement the Convention on the Elimination of All Forms of Discrimination Against Women.” In fact, Gender-Based Violence (GBV) negatively impacts the achievement of the Millennium Development Goals, not only to the extent that gender equality is cross-cutting priority in all eight of the MDGs, but also in terms of the direct impact that Gender-Based Violence (GBV) has in realizing six of those goals.

### **3. Statement of the problem**

#### **3.1 Prevalence, Forms and Patterns of Gender-Based Violence (GBV) in Zambia**

According to the Beijing +10 Shadow Report produced by the Zambia Association for Research and Development and the Non-Governmental Organization Coordinating Council, “violence against women and girls is rampant in Zambia”, and includes “battery [domestic violence], murder, sexual abuse and exploitation, rape, defilement, incest, forced prostitution, sexual harassment, sexual cleansing, assault, and other forms of violence.

Women and girls in Zambia experience violence that comes in all forms and patterns. Physical and sexual violence are very common. the latest ZDHS reported that 53% of women interviewed reported experiencing some form of battering and a quarter of them having experienced physical abuse within the 12 months preceding the survey. Women currently or previously married were more likely to have been physically abused than women who never married and girls 15-19 represented the cohort most likely to have experienced abuse within the 12 months preceding the survey.<sup>3</sup> More recently, studies on gender-based violence call attention to the sexual abuse of girls, a crime fuelled by misconceptions about “virgin cure” for STIs and AIDS. YWCA studies have shown incest to be a hidden but pervasive problem in Zambian society.<sup>4</sup>

The ZDHS also concluded that fifteen percent of Zambian women reported sexual violence in the context of an intimate partnership. Fewer than 25 percent of Zambian women interviewed believed that a married woman could refuse to have sex with her husband, even if he had been demonstrably unfaithful and was infected with HIV. Only 11 per cent thought that a woman could ask her husband to use a condom in these circumstances.<sup>v</sup>

Some of these other forms of violence, according to experts convened by GIDD in the March 2007 Lusaka meeting, include virginity testing, initiation practices, early/child marriage, property grabbing, widow inheritance, economic discrimination

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<sup>3</sup> ZDHS 2001-2002

<sup>4</sup> op.cit.

Economic violence comes in the form of denial of access to and control over productive resources particularly land and widow dispossession among others. This increases their susceptibility to HIV infection because women are sometimes forced to remain in a 'risky' relationship because of their economic dependence on men. Their vulnerability to the impacts of HIV/AIDS is also increased as cases of property grabbing worsen their poverty situation.

Sexual harassment in the workplace interferes with a woman's economic independence, as standing up against it or failure to positively react to sexual advances can lead to job loss. There is need to document incidents of sexual harassment in the workplace and other forms of GBV such as sexual coercion, trafficking of women and girls to determine the extent of the problem.

Studies<sup>5</sup> show that many Zambian women perceive gender based violence to be normal and acceptable. This, combined with negative attitudes of the police and consequences of reporting, results in non-reporting of cases of violence.

There is weak enforcement of laws against sexual and domestic violence because there are no specific laws and policy guidelines on domestic violence and because women are ignorant of the existence of laws criminalizing sexual and domestic violence. Marital rape is a common phenomenon and has not yet been accepted as an issue neither has it been recognized as a criminal act.

Despite establishment of victim support units in some districts in Zambia, counseling services for girls and young women who have experienced domestic and sexual abuse are either inadequate or not available in some places

Factors contributing to these forms of violence include cultural practices, religious beliefs, and lack of information about and protection of basic human rights all contribute to attitudes and behaviors that promote discrimination against women and exacerbate women's risk of exposure to violence.

Other factors that put women and girls at risk include disability, poverty, migration, urbanization, and low levels of education, and traditional norms and practices.

#### **4. Government and other stakeholders Response to GBV prevention**

##### **4.1. Formulating Policies and establishing Mechanisms**

Since the International Women's Year in 1975, Zambia, like many other African countries, has taken measures to advance the status of women. The Zambian government has also taken up the issue of protecting and promoting the rights of children. To this end, the Government has signed and ratified all relevant major international instruments, including the Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW) and the Convention on the Rights of the Child (CRC), and is a signatory to the African Charter on Human and People's Rights (ACPHR), the African Charter on the Rights and Welfare of the Child, as well as the Southern African Development Community (SADC) Declaration on Gender and Development and its addendum on the "Prevention and Eradication of Gender-Based Violence (GBV)."

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In order to fulfill the obligations outlined in these instruments, treaties, and agreements, Zambia has established several key institutions, including the Gender in Development Division (GIDD), the Zambia Women's Parliamentary Caucus (ZWPC), the Human Rights Commission (HRC) and the Police Victim Support Units (VSU). In 1994, Zambia adopted a National Child Policy, National Action Plan (NAP) and National Youth Policy, which was revised in 2004. These frameworks constitute core guidelines for improving the welfare and quality of life of children as well as protecting their survival and developmental rights.

Zambia also adopted in March 2000 a National Gender Policy, which identifies Gender-Based Violence (GBV) as a major priority area of concern. In 2006, the Government adopted the Fifth National Development Plan (2006-2010) which outlines Zambia's development program for the next five years. In the FNDP, gender has been mainstreamed with the existing macro and sectoral policies and programs. The FNDP also has a separate chapter on gender that allows for easy budgeting and program implementation.

Zambia is a dualist State in that it integrates two legal systems – statutory and customary law. At the statutory level, the Zambian Constitution encompasses many rights, including those prohibiting discrimination on the basis of gender. Likewise, the Penal Code prohibits sexual violence, rape, incest, defilement, neglect and/or desertion of children, coercion, discrimination and other associated abuses. It prohibits offences that endanger life or health, assaults causing bodily harm, and unlawful compulsory labor. The Juvenile Act of 1956 provides for care and protection of children, whilst Section 46 prohibits cruelty to children by parents and guardians.<sup>v</sup>

#### **4.2. Response to legal reform**

The Penal Code Amendment Act, Act No. 15 of 2005 domesticates, in part, the Convention on the Rights of the Child and provides stiffer penalties aimed at deterring offenders. The Amendment Act also implements some provisions of the Convention on the Elimination of All Forms of Violence Against Women (CEDAW), as they relate to sexual offences against women. Act No. 15 provides the following amendments:

- Introduces the offence of sexual harassment
- Stiffens the penalty of indecent assault by making it a felony and extending the protection under the section to the boy child
- Makes it an offence to prescribe the defilement of a child as a cure for an ailment
- Introduces the offence in respect of trafficking of children
- Introduces a penalty for a person who conducts, or causes to be conducted on a child a harmful cultural practices
- Prohibits the disclosure of information in relation to persons who access information or documentation in the course of duty performed in relation to sexual offences
- Introduces an offence in relation to child pornography
- Provides that where children commit offences under the Act the children will undergo counseling or perform community service.

Steps are being further taken to enhance the existing framework in order to improve protections related to Gender-Based Violence (GBV) in Zambia. A Proposed Sexual Offenses and Gender Violence Bill is currently being considered. This is a significant opportunity for progress in national law. This Action Plan is suggesting that vigorous actions be taken to continue the process of consultations on the Bill and to advocate for its enactment.

#### **4.3. NGO/government partnerships in response to GBV**

In addition to the importantly policy and advocacy work of GIDD, government partners, and others, most anti-violence initiatives in Zambia take place at the **tertiary or operational response level**. These are often limited in scope, and are the result of the efforts of individual NGOs. Some examples of these initiatives include the Young Women's Christian Association's Lusaka-based women's shelter, country-wide drop-in centers (serving women and children), and three children in crisis transit homes (serving children); Women in Law in Southern Africa's legal aid services; and the Lusaka-based Child Help Line (in process of start-up). There are a number of NGOs focusing on health services for women and adolescent girls, but very few of them specifically address the issue of violence.

The Police Victim's Support Unit, which was established in 1994 but started operating fully in 1998 and is now in every province in the country, is an example of model systemic reform. The national training program at the Police Training College has incorporated issues of gender violence in the curriculum/syllabus aimed at sensitizing law enforcement officers about gender violence and how to deal with such cases. However, data collected by the VSU is not comprehensive enough, and resources allocated to the VSU are limited, as is the capacity of the VSUs outside of Lusaka to conduct investigations and outreach in their respective provinces.

The Zambia Society for the Prevention of Child Abuse and Neglect has supported forensic examination trainings for medical workers. Currently, there are three centers in Zambia using a holistic approach to address sexual and other forms of Gender-Based Violence (GBV). The Lusaka One-Stop Center based at the University Teaching Hospital (UTH) is modeled from similar centers in South Africa and Namibia. It is a pilot program offering comprehensive services to survivors/victims of child sexual abuse—including psychosocial, legal, and health response--in “one-stop.” The gender-based violence committee coordinated by CARE has set up additional Coordinated Response Centers in Lusaka and Chipata that also offer comprehensive services to survivors/victims, but that differ from the UTH One-Stop center in scope as they cover all other forms of gender-based violence, such as domestic violence, property grabbing, etc.

YWCA has several programs that aim to empower women with legal and human rights information in order to enable them confront violence and abuse directed toward them. Psychosocial counseling, social and legal advice are available. YWCA also runs 11 Drop-in-Centers (DIC) throughout the country, a shelter for battered women located in

Lusaka (Laweni House), and the Child in Crisis Centre continues to expand as demand for its services grows. The YWCA has a general communication and advocacy program focusing on human rights issues as they relate to women and children. Appropriate referrals are made to organizations with specific expertise, for example, Kara Counseling, Victim Support Unit, Legal Aid Clinic for Women, and Legal Resources Foundation, amongst others.

Plans are under way to intensify some of the GBV interventions through the GBV national action plan, while engaging significant stakeholders including traditional leaders at community level and parliamentarians at policy level.

The Ministry of Justice, in collaboration with GIDD and Women in Law and Development in Africa, has conducted widespread community consultations focusing on the need for anti-violence legislation, and is currently drafting a bill that aims to redress limitations in protections for women and children in the current legislation. Workshops were conducted with parliamentarians on the 2006 Proposed Sexual Offences and Gender Violence Bill prior to the last elections, and will be repeated with newly elected parliamentarians.

*In terms of **community mobilization**, FELAZ in collaboration with MMCI and leadership from the First Lady Mrs. Maureen Mwanawasa organized the June 2004 Symposium<sup>vi</sup>, which reinforced among policy makers, community leaders, and the public the urgent need to address the issue of GBV. With support from UNICEF and other partners, FELAZ and MMCI also spearheaded innovative music concerts with the underlying theme of GBV/HIV, and provided on-site services to survivors/victims. The President, His Excellency Mr. Levy Patrick Mwanawasa, SC, reiterated the need to have a law in place to protect women and children.*

As a member of the GBV partnership YWCA has developed core men's groups in Lusaka and Western provinces, each of which are being sensitized to undertake community mobilization.

CCZ is the largest interfaith Christian church membership group in Zambia, and is committed to raising the issue of GBV through its promotion of social justice, peace and development programs. One significant activity for 2006 was the gender audit, which specifically investigated churches' activities related to GBV prevention. CCZ also reaches out to male fellowship on issues of violence and GBV.

#### **4.4. Support by the United Nations Country Team (UNCT) and Bilateral agencies**

UNFPA and UNICEF in other parts of the country are engaged in multisectoral capacity building in Solwezi, where they have trained VSU officers, health care providers, magistrates, and local court judges.

UNFPA has a long standing comparative advantage in supporting the mainstreaming of GBV prevention in all its development assistance to government. Some of these include working through and within existing government institutions such as the GIDD, the ministry of health and also with NGOs to provide both financial and technical assistance

to integrate prevention interventions in mainstream programmes. For instances: Strengthening human resource capacity in the prevention of GBV, study in the social and cultural aspects of reproductive health and HIV/AIDS, implications for planning and programming; capacity building of health professionals in GBV case management, law enforcement agencies and the judiciary; A pilot project on GBV victim support facility and services is being implemented and the lessons learned are now being used to replicate the project in other districts; engaging women ministers and parliamentarians in advocacy for the prevention of GBV, and the reduction of HIV and AIDS among women and girls, in this regard two advocacy kits on GBV and HIV/AIDS were published and distributed to the network of women ministers and parliamentarians in Zambia to assist them with their work as advocates for women and girls empowerment.

Current efforts by the UNCT and bilateral agencies include a Joint Gender Support Programme (JGSP) to support the implementation of the national priorities of Zambia in the area of gender as required by the Fifth National Development Plan (FNDP - 2006-2010), and for the Government of Zambia to achieve the Millennium Development Goals (MDGs) on gender. The JGSP will be supported by multi-lateral and bilateral Cooperating Partners (CPs) in Zambia as guided by the Joint Assistance Strategy for Zambia (JASZ).

The JGSP will provide a holistic framework for the promotion of gender equity, equality and the empowerment of women in Zambia. The Programme will contribute towards strengthening national capacity to formulate, design and implement gender responsive policies and programmes; monitoring and evaluation; capacities for the collection, processing, storage and retrieval of sex disaggregated statistics at all levels within the priority sectors. It is hoped that this national action plan on GBV will be supported by the JGSP.

## **5. Specific Gaps and Challenges to be addressed**

In general, GBV programming in Zambia is in the early stages of development. Despite significant contributions by the government and by NGOs, large gaps remain in programming across all sectors. Some of the gaps identified are listed below:

### **5.1. Lack of Reliable Data**

There is a general lack of a GBV data collection and management systems that defines the kind of data to be collected and how this data will be managed. The situation is compounded by the lack of appropriate standardized data collection tools. The importance of which cannot be overemphasized because information from the data will improve planning and decision making for GBV prevention and response. The few NGOs engaged in GBV prevention interventions have their individualized data collection tools which make data analysis cumbersome. The Demographic and Health Survey in the 2006 survey included a set of questionnaire on GBV. This needs to be reviewed to determine the extent to which information on GBV could be generated. Standardizing data tools will strengthen capacity to evaluate progress made in GBV in a clear systematic way. It will also establish an understanding of the magnitude, trends and patterns of GBV that will improve future planning and programming. It is important that a module

questionnaire be developed on GBV and integrated in the demographic and health survey exercise.

## **5.2. Insufficient policies and laws to address the problem:**

- There is no common definition of various gender based violence offences, allowing judges wide interpretation, often leading to inconsistent court decisions and/or decisions that exemplify traditional attitudes that blame the survivor/victim.
- There is no specific domestic violence legislation, such that despite amendments to the penal code enhancing protections for women and children, many perpetrators of intimate partner violence typically act with impunity.
- Customary law often overrides statutory law, such that even where statutory law provisions might protect a survivor/victim, customary law and practice prevail. At the local level survivors'/victims' families more often opt for compensation through customary courts rather than pursuing criminal proceedings through the penal system. Customary law has not been codified in order to better assess its, response to GBV issues/cases.
- There are no policies across health, psychosocial, or legal sectors mandating coordinated, prompt and supportive services to survivors/victims, nor standardized data collection to monitor GBV incidents and/or adequacy of response.
- Parliamentarians and other government officials have limited knowledge about the prevalence and roots of Gender-Based Violence (GBV).

## **5.3. Inadequate human Resources and capacity to manage cases of GBV**

Relevant sectors do not have the technical, logistic, or financial and human resource capacity to adequately monitor and respond to the preventive as well and the management of GBV.

### *a). Psychosocial Support*

With respect to the provision of psychosocial support, most social workers from the relevant institutions have no specific training in addressing GBV cases, and have little institutional support. While social workers are expected to monitor and report on cases, they do not send reports in a regular or prompt manner to the MCDSS. Some experts maintain that the psychosocial sector is “the weakest of all” sectors in addressing GBV issues in Zambia. Counseling services are not widely available. Social workers have large caseloads and extremely limited resources, resulting in difficulties in providing adequate services to survivors//victims.

### *b). Health response to GBV*

The health sector does not have a policy or guideline on health sector response to gender-based violence, nor do the health professionals adequate capacity to routinely identify and manage cases of GBV. Most hospitals and clinics lack adequate drugs, equipment and supplies to diagnose or treat problems associated with GBV. Survivors/victims have to pay for medical forensic examination where such a service is available, which are difficult to access outside Lusaka. There is no standard medical response outside of the One Stop

Centers, nor is post-exposure prophylaxis (PEP) routinely available to sexual assault survivors/victims.

Recently, however, the Gender in Development Division (GIDD) with the support of UNFPA initiated a process for the development of relevant protocols and guidelines for the management of GBV case, and with the active involvement of other partners such as CARE International, three tools were produced. What now remains is to integrate them in the operational guidelines for health service delivery, and the operational procedures of the judiciary and the justice system.

*c). Legal and judiciary constraints for dealing with GBV cases*

While there is no specific legislation on GBV, The Penal Code<sup>6</sup> provides for the definitions and penal sanctions for offences against morality. These include the offences of rape which is covered in sections 132-134, abduction (section 135-136), defilement (section 138, 139 and 158) and incest (section 159, 161, 163). The penal provisions are quite stiff with maximum jail terms of life imprisonment for rape, seven years for abduction and life imprisonment for defilement and incest on female girls aged less than twelve years old. It has been argued that while cases of murder and aggravated robbery are committed to the high court for trial, all offences against morality are not thus giving the impression that cases against morality are minor offences since they are tried before the magistrates. And since magistrates have a limited sentencing jurisdiction, the maximum penalties have never been given to any convict in Zambia. Although magistrates have the authority to relay the records to judges of the High Court, (High Court Act, Cap 27 of the Laws), for higher sentences, they rarely ever did so. These are some of the issues that need to be addressed in order to encourage survivors/victims of GBV to seek redress and to deter GBV perpetrators from committing GBV related crimes. In addition, there is need to enhance the capacity of members of the judiciary and the criminal justice system with the requisite knowledge, information, skills and experience to render the expeditious handling of cases of GBV.

There is also legal provision against the harmful cultural practices. Section 157 provides that “any person who conducts or causes to be conducted a harmful cultural practice on a child commits a felony and is liable upon conviction to imprisonment for a term of not less than fifteen years and may be liable to imprisonment for life”. Section 157(2) defines harmful cultural practices and these include sexual cleansing, female genital mutilation or an initiation ceremony that results in injury, the transmission of an infectious disease or life threatening disease or loss of life to a child but does not include circumcision on a male child.

*d). Security and Protection:*

While the Victim Support Unit (VSU) represents a significant step forward in police response to GBV crimes, there is a need to extend the operation of VSUs to police posts where the majority of the population can access them. VSUs suffer logistics, transport, and manpower problems, especially in the provinces. VSU officers have limited training in addressing various types of violence against women and children, interview offices may not be private, etc. There are not private rooms where survivors/victims are interviewed, and insufficient numbers of same-sex police officers to conduct interviews. Few officers are specialized to differentially address specific types of GBV, such as domestic violence.

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<sup>6</sup> Chapter 87 of the Laws of Zambia



*e). Lack of adequate strategy for community mobilization and behavior change communication to prevent GBV*

In terms of **community mobilization** information on gender-based violence is not properly accessed by a large number of women in particular and communities in general, especially in rural areas. There is a need for the media to be fully involved at all levels to ensure that information is accessed at community as well as national level. The media are not sufficiently trained in order to sensitize, build capacity, and foster closer collaboration between women's groups and organizations working with women and children, as well as activities around mobilization of men, since the directorate for gender cannot do it alone.

*f). Additional gaps identified include:*

- Coordination and strategic planning among NGOs
- Development of programming outside of Lusaka, and major towns along the line of rail
- Research
- Monitoring and Evaluation
- Male Involvement Programming except for the YMCA and YWCA which is also limited
- Technical and Financial support at all levels

## **6. Opportunities**

There are a number of opportunities to take this action plan forward. These include the following:

- The availability of an operational National Gender Policy and Implementation Plan
- The amendment of the Penal Code
- The National Action Plan for reducing HIV/AIDS among women and girls
- The availability of an operational , Reproductive Health Policy, and HIV/AIDS Policy
- A Draft Bill on Domestic Violence
- Commitment for support by the UNCT, Bilateral and Multilateral agencies in the country through the proposed Gender Sector Programme (GSP) and other donors.
- Several studies and analysis on GBV, HIV/AIDS and Gender and Rights issues by NGOs and the UN are currently available

## **The National Gender Machinery**

### **Institutional Framework for National Gender Machinery**

The Gender in Development Division (GIDD), serves as the National Gender Machinery (NGM) in Zambia. It is located in the Cabinet Office, Office of the President. The NGM operates through an institutional framework for coordinating the

implementation of the National Gender Policy (NGP) and other gender related activities in the nation. The framework consists of the Parliamentary Committee on Legal Affairs, Governance, Human Rights, and Gender Matters, the Gender Consultative Forum (GCF); Gender in Development Division (GIDD) at Cabinet Office under the Office of the President; Gender Focal Points in Planning Units of the line ministries, provincial planning units and District Development Coordinating Committees. In addition to the above, there is also collaboration between Government and the Cooperating partners, NGOs as well as informal structures such as the Gender Forum and the Women Parliamentary Caucus.

The mandate of the National Gender machinery is to coordinate, monitor and evaluate the implementation of the National Gender Policy in order to achieve full and equal participation and benefit of both females and males in the socio-economic and political development of Zambia. The mandate of the Division has therefore, has been broadened and is not only limited to women's issues but both women and men. This is to be achieved mainly through the mainstreaming of gender into macro and sectoral policies and programmes of line ministries, and other institutions of government, the private sector, the civil society, traditional rulers and the public at large.

GIDD is therefore strategically positioned to coordinate the National Plan of Action on Gender –based violence.

## **7. PURPOSE OF THE NATIONAL PLAN OF ACTION (NAP)**

This Plan of Action has been developed to facilitate implementation of the recommendations made in several national policies, plans of actions and reports that have been developed in the last decade. These include the National Gender Policy and implementation Plan; the National Action Plan for the reduction of HIV/AIDS among women and girls, the report of the Technical Committee on the strengthening of Laws, Enforcement Mechanisms and Support Systems relating to Gender-Based Violence and others as referenced in section 6 of this Plan. The action plan also serves as a resource mobilization tool for implementation of focused and coordinated action to eliminate gender-based violence in Zambia. It is a living document which will be reviewed as and when necessary to take care of the emerging issues

## **8. GOAL**

The goal of the National Action Plan is to eliminate gender-based violence (GBV) in holistic, systematic, complementary and comprehensive manner through multi-sectoral, and multi-dimensional approach, and to provide appropriate care and services to survivors of GBV.

### **Overall Outcome**

The overall outcome is an efficient, effective coordinated effort leading to the elimination of GBV in Zambia.

## **OBJECTIVES**

1. Reform, Strengthen and Implement Relevant Laws and Policies for the prevention of Gender-Based Violence (GBV), ensuring accordance with international requirements and standards.
2. Ensure the Zambian population is aware that Gender-Based Violence (GBV) is wrongful behavior and a criminal act.
3. Build capacity of the relevant sectors (Health, Education, Social welfare, the judiciary and the justice system, NGOs) for mainstreaming GBV prevention and case management interventions in their policies, plans and programmes.
4. Offer comprehensive and ethical response to survivors/victims.

### **Strategic Areas of Focus**

The factors that contribute to the high prevalence of multiple forms of Gender-Based Violence (GBV) in Zambia require responses that target various levels of prevention. Implementing simultaneous strategies to reduce and eliminate Gender-Based Violence (GBV) across all three levels of prevention is critical to any lasting effort toward its eradication.<sup>vii</sup> The national action plan will focus its interventions around the following broad areas:

1. Ensure the review, adoption and implementation of protective **laws and policies**;
2. Advocacy/IEC/BCC and community mobilization and awareness raising for the prevention of GBV
3. Build capacity of relevant sectors (health, legal/justice, security, education, and social welfare **systems**) for the development and implementation of comprehensive services for the management and care of survivors/victims of GBV in order to address immediate consequences as well as to reduce the likelihood of long-term negative effects related to victimization, as well as survivors'/victims' vulnerabilities to future incidents of violence.

#### **8.1. Review, adaptation, formulation, and ensuring the implementation of protective laws and policies**

Gender-based violence is a practice that is located and manifested in the family, the community and the state. The family socializes its members to accept hierarchical relations between the sexes and power over the allocation of resources. The community's structures (economic, cultural, and religious) provide the mechanisms for perpetuating male control over women including control over their sexuality, whereas the state legitimizes the proprietary rights of men and women by providing legal basis for these institutions to function through the enactment and endorsement of discriminatory laws including customary laws.

Violence against women and girls must be recognized as a fundamental violation of their human rights, including rights to life and security of person and the right to enter into marriage only with full consent of intending parties, as well as rights indirectly violated, such as the right to a standard of living adequate for health and well-being of oneself and

one's family, the right to be free from discrimination and the right to equal protection before the law.<sup>viii</sup> A foundation of all promising interventions to prevent Gender-Based Violence (GBV) is attention to the impact of socially determined gender roles in the perpetration of violence and an increased understanding of Gender-Based Violence (GBV) as a human rights problem that is detrimental to the community as a whole, and which should be taken into account in all protective laws and policies.

Reforming, Strengthening and Implementing Relevant Laws and Policies includes measures at the broadest level to ensure rights are recognized and protected through international, statutory, and traditional laws and policies. Examples include:

- Intensive advocacy for law reform targeting legislators, policy makers, and other stake holders
- Substantive and procedural law reform
- Supporting policy development through GIDD and within relevant ministries
- Human rights education with policy implementers and traditional and community leaders
- Advocacy targeting legislators and other policy makers
- Budget allocation for implementation of laws and policies

**Objective:** To review, strengthen and implement relevant Laws and Policies for the prevention of Gender-Based Violence (GBV), ensuring accordance with international requirements and standards.

### **Outcomes**

- Gender sensitive legislation and procedures on GBV are in place and protect the rights of women and children
- The legal justice system is strengthened and GBV cases are expeditiously handled by judges, prosecutors, lawyers and there is general improvement in the conditions of service of magistrates and judges;

### **Outputs**

- I. Increased availability and accessibility to relevant gender sensitive legal instruments and procedures on GBV;
- II. Increased advocacy for legislation which will allow survivors to gain easier access to legal processes;
- III. Increased knowledge of stakeholders on GBV related laws, and legal consequences of GBV;
- IV. Increased reinforcement of existing legislation and periodic review of its effectiveness, with specific focus on prevention of violence, protection of survivors, prosecution and/or rehabilitation of offenders;

### **Activities**

1. Review and assess existing legal instruments and procedures on GBV; (in areas not covered by previous assessments)
  - Conduct a study into current legal and constitutional provisions against GBV and recommend needed legal reforms;
  - Review powers of the magistrates to enable them pass stiffer sentences
  - Assess capacity of local NGOs to offer legal and paralegal support to GBV victims/survivors and families;
  - Assess relevance of traditional court system in the adjudication of GBV cases at the local level;
2. Undertake intensive advocacy for legislative and policy reform
  - Advocate for the incorporation of provision for compensation to victims/survivors of GBV
3. Reinforcement of existing legislation and periodic review of its effectiveness
  - Enforce procedures that ensure that offenders and perpetrators are duly punished in line with existing laws.
  - Organize training workshops for judges, magistrates, prosecutors, lawyers and the police on the emotional, psychological dimensions of GBV vis a vis the victim/survivors and how to deal with such cases;
  - Quarterly review of prevention of violence, protection of survivors, prosecution and / or rehabilitation of offenders;
3. Establish institutional and legal framework for GBV redress (Both short/medium term)
  - Prioritize GBV and sexual offence cases at the courts and enforce the need for timely adjudication of all GBV cases including any backload of cases.
  - Build networks of judges, prosecutors, police and traditional systems to ensure that existing laws relating to GBV are upheld.

## **Indicators**

1. Number of legislative instruments passed at Parliament which relates to prevention and prosecution of GBV
2. Number of judges, magistrates, prosecutors, lawyers including those operating at the local courts trained on issues of GBV and on how to deal with victims/survivors during court proceedings
3. Number. of booklets/handouts of simplified current and new GBV law produced, printed and disseminated
4. No. of Workshops on the GBV related law held for members of the judiciary
5. Level of increase in reported cases of GBV and sexual offence cases
6. Level of increase in number of cases of GBV and sexual offence cases adjudicated per year
7. Level of increase in convictions of perpetrators of GBV
8. Number of perpetrators serving appropriate sentences
9. Increased confidence and clients satisfaction in the justice system

## **8.2. Advocacy, IEC/BCC and community mobilization and awareness rising for the elimination of GBV**

The main purpose for this component is to provide a comprehensive behavior change communication framework on gender-based violence that will address diverse audience needs in order to eliminate gender-based violence in the country.

Advocacy/IEC strategies and actions are considered pivotal for creating and sustaining an enabling political, economic and social environment for the implementation of the GBV-NAP.

The design and implementation of Advocacy/IEC strategies within the framework of the action plan will support and encourage changes in knowledge, attitudes and behavior at all levels, particularly within political and decision-making groups, and lead, among others, to revisions and modifications in the existing legal, policy and normative framework. Activities will center on building and strengthening local capacity to understand the root causes of GBV and promote gender equality measures and monitor changes in the environment.

The first step in the process will be to identify and prioritize the issues which are at stake and design strategies to address them. Key institutions and/or groups within government and civil society – e.g., political and traditional leaders, members of parliament, civil servants, NGO and private sector leaders, academics, the media will be sensitized and trained to enhance their capacity to advocate for the implementation of the NAP, at national and provincial levels. Support will also be provided for the development and dissemination of promotional materials, strengthening networks and coalitions, and increasing media coverage (e.g., radio, press, television) of selected issues.

Careful attention will be taken at the beginning of the implementation of the NAP to the development of appropriate baseline data for monitoring progress toward increasing public awareness on issues of GBV and mobilizing resources.

Audience segmentation and targeting will be in use to capture all age groups, policy makers, traditional leaders and professionals. Many communication channels will be used and will include: peer education; mass media; traditional folklore; public forums; sessions at workplace and community gatherings; and interpersonal communication and counseling. Participatory mechanisms will be used to generate and develop IEC/advocacy messages and materials.

GIDD will have overall responsibility for coordination of Advocacy/IEC activities. An Advocacy/IEC Sub-Committee should be set up to assist GIDD with the development of materials for use in the advocacy/IEC activities, and to provide technical direction.

Widespread Community Mobilization and Individual Behavior Change will be undertaken. This includes raising overall community awareness, mobilizing community-based efforts, providing support for evidence-based advocacy; and conducting mass media campaigns that improve knowledge, attitudes, and practices of community members. A key aspect of community mobilization is involving the media to ethically and accurately report on violence issues.

**Objective:** To ensure that the Zambian population is aware that Gender-Based Violence (GBV) is wrongful behavior and a criminal act.

**Outcome:**

Zambian women, children, and vulnerable groups are assertive to issues of GBV and proactive in the prevention of GBV.

**Outputs:**

- I. Increased availability of accurate and reliable information on GBV related issues
- II. Increased level of awareness about GBV and its consequences by all members of the Zambian community
- III. Increased availability of accurate and reliable information on security and protection facilities at national and decentralized levels;
- IV. Increased knowledge of stakeholders on security and protection issues within various levels of the country;
- V. Level of increase in reported cases of GBV and related sexual offences
- VI. Increased awareness on negative effect and impact of GBV leading to behavioral change
- VII. Increased involvement and participation of community leaders in GBV related discourses and dialogues
- VIII. Enhanced capacity of Media to provide appropriate reportage on GBV at all levels
- IX. Increased collaboration among NGOs/CBOs in rallying around issues of GBV,

**Activities**

- Undertake a Knowledge, Attitude, and Practices survey (KAP) at the beginning of the implementation phase to determine the baseline for monitoring progress of implementation, and subsequent KAP every three years
- Develop an advocacy/IEC/BCC strategy in support of the implementation of the GBV-NAP;
- Develop and standardize Information Education and Communication materials on GBV;
- Translate the simplified GBV related laws/articles into local dialects and dissemination at all levels community level;
- Undertake awareness raising campaigns addressing gender relations that focus on men, youth and other target groups
- Use of educational entertainment or ‘edutainment’ programs (radio, television soap operas) to share key messages with the audience
- Use of community-wide meetings, knowledge-building workshops, peer group discussions, and drama to challenge gender inequities related to Gender-Based Violence (GBV)
- Awareness raising through seminars and workshops with students, their parents, teachers, government officials, and NGOs in relation to Gender-Based Violence (GBV) in schools
- Building capacity of rural communities so that they are sensitized/aware of Gender-Based Violence (GBV) and subsequently able to address and mitigate the impact of shame and stigma on individual survivors/victims, families, and communities
- Engaging traditional and other leaders in attitude and behavior change efforts
- Involve the media in sensitizing the community on the prevention and dangers of Gender-Based Violence (GBV)

- Conduct Media campaigns, community level advocacy campaigns (durbars, billboards, advertisements, local song and drama performances on prevention of GBV )
- Advocate for the incorporation of issues of GBV and its implication in school curriculum, and incorporate prevention interventions in GBV related sessions
- Ensure sustained community mobilization throughout the implementation of the NAP
- Establish and engage male action groups, and youth groups in GBV prevention interventions

#### **. Indicators**

1. A comprehensive Advocacy, IEC/BCC developed, circulated and implemented
2. Number of awareness campaigns organized
3. Number of NGO/CBOs, Media agencies trained in advocacy for the prevention of GBV and in gender sensitive messaging and reporting on GBV issues
4. Level of commitment by communities in identifying and reporting cases of GBV
5. Number of GBV prevention committees constituted and trained in all provinces districts communities with reports on activities
6. Number of GBV networks per each province established operational
7. Inventory of logistics supplied; field workers motivated and regular reporting frameworks in place and being used
8. Number of IEC materials using verbal or visual messages on GBV produced and disseminated

### **8.3. Build capacity of relevant sectors (health, legal/justice, education, welfare for the development and implementation of comprehensive services for the management and care of survivors/victims of GBV in order to address immediate consequences as well as to reduce the likelihood of long-term negative effects related to victimization, as well as survivors'/victims' vulnerabilities to future incidents of violence.**

There is a shortage of competent human resources in all sectors relevant to the GBV National Action Plan (medical, legal, psychosocial, protection/security). There is need therefore to build the capacity of institutions organizations and individuals that will be engaged in the implementation of one or more aspects of this national action plan. For cost effectiveness and relevance, in-country short and focused training programmes should be conducted to ensure that participants acquire the necessary skills to implement the programme effectively in their respective sectors. Training that should cut across all implementing agencies should such as gender analysis in relation to the various sectors , mainstreaming techniques with emphasis on mainstreaming gender in planning and programming processes should be well coordinated and delivered through available national institutions with the relevant technical competencies. This strategic area of focus will examine each of the key sectors below and propose the types of interventions for capacity building aimed at achieving the objectives below.



## **Objectives**

1. Build capacity of the relevant sectors (Health, Education, Social welfare, the judiciary and the justice system, NGOs) for mainstreaming GBV prevention and case management interventions in their policies, plans and programmes.
2. Offer comprehensive and ethical response to survivors/victims.

### **8.3.1. Psychosocial**

the primary aim of this sector is to Provide the critical and required psychosocial support for victims/survivors of GBV. In addition to physical injuries, GBV victims/survivors experienced psychological trauma (such as stigma, family rejection for the victim and children born out of rape, marital separation, fear, and mental depression). Indeed, rape violates the privacy of the victim, destroys self-esteem and creates fears that need to be assuaged. Psychosocial support could help the victim to regain self-esteem and become an active member in the development process. International and local NGOs and women centers in parts of the country are providing psychological assistance to GBV survivors e.g. through advocacy for improved service and by training of counselors. However they lack the requisite technical as well as logistical capacity to effectively implement their programmes. They also lack the relevant tools and guidelines to attend to clients and to coordinate their efforts more efficiently. There is need to assess the capacity needs of these institutions and organizations in order to provide meaningful support to strengthen them

## **Outcomes**

- Psychosocial support for victims and families is available in provinces, districts and communities.
- Trauma Counselling services and all other forms of counselling are available at all levels especially at the grassroots and is being accessed by victims;
- There are referral systems in place for victims to receive medical and judicial redress;

## **Outputs**

- I. Needs assessment reviews and research conducted and existing community networks strengthened;
- II. Increased availability and utilization of credible assessments/survey reports and recommendations on critical traditional, cultural and psychosocial issues relating to GBV;
- III. Increased awareness on negative effect and impact of GBV leading to behavioral change
- IV. Reduced stigmatization of GBV survivors and families;
- V. Enhanced capacity of local NGOs, Traditional Authority/Local Systems, Networks, personnel and individuals to provide psychosocial support at the national, provincial, district and community levels;
- VI. Enhanced Capacity of counselors to ensure effective counseling of both victims and perpetrators
- VII. Enhanced capacity of Media to provide appropriate reportage on GBV at all levels

VIII. Increased and improved availability of psychosocial support facilities including safe havens and referral systems nationwide;

### **Activities**

1. Baseline surveys and reviews especially in the areas that are not yet covered by previous assessments;
  - Assess the psychosocial perception of offenders and men in GBV and rape in Zambia; and
  - Prioritize psychosocial needs in the area of behavioral change and trauma healing including traditional trauma counseling.
3. Conduct Trainer of Trainers workshop in Trauma Counseling
4. Establishment of an effective referral network and linkages
  - Establish one vibrant GBV network per district;
  - Establish linkages between community, health clinics/centers, police stations and courts;
  - Provide social rehabilitation programmes
  - Develop and utilize a psychosocial monitoring and evaluation plan to include (Field visits, workshops and review meetings, Joint field assessments; reporting, inventory of equipment, financial audit).
5. Capacity building and Educational Enhancement: (**medium term**)
  - Review and standardize training manuals/materials on GBV (NGO and National training manuals);
  - Provide standard basic packages for training various groups which set minimum standards and training times.
  - Develop a work plan for the training of different groups
  - Conduct school educational programs (Train number of teachers in each district in coping mechanisms for psychosocial support);
  - Conduct training for Media personal on GBV and on effective ways of reporting towards preventing stigmatization, creating greater awareness and information sharing.
6. Development of Psychosocial Support Facilities
  - Renovate and equip existing safe home/women's centers;
  - Construct and equip new safe home facilities in districts which lack those facilities;
  - Provide and equip counselors for each safe home
  - Set up counseling programs to rehabilitate adult and juvenile perpetrators.

### **Indicators**

1. Needs assessment conducted on GBV, and reports (disaggregated by sex) disseminated to all relevant stakeholders
2. Number of public and media awareness campaigns on GBV;

3. All provincial and local authority offices have Gender Focal Persons in their districts
4. Number of persons trained in trauma counseling and the trained persons replicating the training in other places
5. Production, dissemination and utilization of GBV protocol and guidelines
6. Number of safe havens established and psychosocial support centers strengthened equipped and operational
7. Inventory of logistics supplied; field workers motivated and regular reporting frameworks in place and being used
8. Number of GBV referral hospitals district clinics resourced with required equipments and medicines
9. Regular National, Provincial and District level conferences and lectures on GBV convened
10. -Monitoring Evaluation framework and tools developed and adopted for psychosocial activities

### **8.3.2. Health**

Sexual and Gender Based Violence has numerous consequences, including physical injury, psychosocial trauma, and unwanted pregnancies including unwanted teenage pregnancies, fistulae and HIV/AIDS infection. International and local NGOs are supporting government in responding to the immediate health and psychological needs of many members of the community including women and girls who are survivors of GBV. For example, in rural areas, the distance from scattered towns and villages to health facilities is not easily bridged. Therefore, treatment is often provided at a late stage, leading to frequent health complications. Some GBV survivors opt to stay in their communities due to the inaccessibility to care. In most areas, physician assistants, nurses and midwives are operating the clinics and health centers. In general, GBV services are supposed to be free of charge in many public hospitals and the hospitals make referrals of GBV survivors to other sectors (police, psychosocial and legal). However, it is the choice of the family or the survivors to decide to pursue redress. Awareness about the individual's rights is very important in the context of referrals.

Some of health facilities in Zambia provide antibiotics to prevent STI and, treat with PEP to prevent HIV/AIDS when the survivors visit the health facility within 72 hours after rape. Pregnancy tests and emergency contraceptives are also provided. Tetanus and hepatitis B vaccines are given during the course of treatment to prevent survivors from attracting tetanus or hepatitis. So far, more than

Health professionals do not routinely try to identify the survivors of GBV. There is no available data on how many health professionals have received training in clinical management of GBV cases. The lack of capacity in terms of medical personnel and basic equipment are impediments to fully take into account the needs of victims who often live in remote and inaccessible areas. In order to respond to the victims' immediate needs, health structures must be available and equipped while health personnel must be properly trained. Sexual and gender-based violence prevention and response demands that the

health system should be well capacitated with the requisite knowledge, skills, equipment and logistic support. The Forensic Department of the University Teaching Hospital especially need to be strengthening in order to be able to conduct DNA tests for rape cases. Currently all samples are sent to South Africa and according to the VSU it takes years for a couple of results to be returned thus contributing to the delay in process rape cases

## **Outcomes**

- Medical referral centres are available and equipped to handle GBV cases;
- Victims of GBV receive the needed medical attention and medication;
- GBV Survivors treated based on the National GBV management guidelines

## **Outputs**

- I. Reports on needs assessment / reviews and research prepared and disseminated;
- II. Standardized guidelines and information packages developed;
- III. Increased awareness and knowledge of stakeholders on health effects, needs and support for GBV victims in line with agreed and accepted health protocols;
- IV. Increased capacities of Government, NGOs, CBOs and individuals in dealing with health needs of GBV;
- V. Improved, equipped and functional medical infrastructures available at all levels to handle *clinical aspects of* GBV
- VI. Increased service provision with linkages to psychosocial and legal needs of victims;
- VII. Increased
- VIII. Increased availability of counseling services on GBV, STDs and HIV/AIDS;

## **Activities**

1. Health and medical reviews/assessments on GBV in (in areas not covered by previous assessments)
  - Review/assessment of who is doing what and where at all levels;
  - National assessment on health effects of GBV victims;
2. Awareness creation and counseling on health aspects of GBV
  - Community level sensitization meetings on the health effects of GBV including transmission of HIV/AIDS and other STDs for health personnel;
  - Sensitization on the health needs of GBV victims and where to secure health support for victims;
  - Community level awareness creation on available referral clinics
  - Health providers to provide standardized information and link to health services.
3. Clinical management of GBV
  - Distribution of Reproductive Health kits
  - Training, Training of Trainers on health sector response to GBV
  - Incorporating aspects of clinical management of GBV in the curricula of health and medical professionals

- Provide logistic support, equipment and medical supplies
4. Strengthening health facilities to deal with GBV cases
    - Refurbish and equip health centers and clinics
    - Logistics support for health facilities;
    - Provide equipment and medical supplies to provide quality care to GBV survivors.
    - Strengthen the Forensic Department of the University Teaching Hospital (UTH) to be able to perform DNA tests
    - Provision of rape kits to health centers: direct and free medical treatment for victims nationwide including treatment or prophylaxis for sexually transmitted infections, post-exposure prophylaxis for HIV when indicated and when the victim reports on time (72 hours following rape), provision of emergency contraception, provision of vaccines (Hepatitis B, Tetanus Vaccine).
    - Identify health facilities for enhancement and conduct focus trainings to handle cases of GBV
  5. Provide counseling support services in clinical and referral hospitals
    - Recruit, train and resource counselors/psychologists for clinical and referral hospitals.
  6. Capacity Strengthening and enhancement (Both Short/Medium term)
    - Strengthen the capacity of health workers through appropriate training to respond to GBV cases including medical services and forensic evidence for GBV victims in all 15 provinces;
    - Training workshops for 150 community health care workers/traditional healers (10 per province) on response to GBV in all 15 provinces;
    - Training workshops for 150 medical counselors to provide support for victims.

## **Indicators**

1. All available health-related assessments reviewed and presented as baseline information
2. Training modules designed, disseminated and in use by health training centers
3. Number of copies of national GBV Health Workers Training Manuals published and disseminated
4. Number of traditional and opinion leaders (both male and female) trained as GBV advocates
5. Number of Trainings conducted for health workers in all referral hospitals,
6. Number of trainings on clinical management of GBV and Rape provided
7. Number of referral hospitals in the strengthened equipped and functional
8. Level of increase in medical supplies to referral clinics and centers at all levels

9. Number of GBV victims who receive free medical care in all hospitals and clinics
10. National clinical GBV guidelines disseminated and operationalized
11. GBV referral linkages established at all levels

### **8.3.3. Security and protection**

There is weak enforcement of laws against sexual and domestic violence because there are no specific laws and policy guidelines on domestic violence and because women are ignorant of the existence of laws criminalizing sexual and domestic violence. Marital rape is a common phenomenon and has not yet been accepted as an issue neither has it been recognized as a criminal act.

The lack of security and protection of civilians create an environment where perpetrators are not denounced for fear of reprisal. As a result, a number of victims do not seek justice and so suffer from psychological and physical injuries in silence. Public institutions need to be sensitized about their rights to security and protection and on the existing laws and procedures relating to security and protection.

The Community Service Directorate has introduced a new user friendly concept of policing which involves the public in crime protection, while sensitizing them on the dangers of crime and how to tackle incidence of silence crime such as GBV.

The Victim Support Unit is one of the main units in the Directorate, and it provides invaluable assistance to victim/survivors of GBV, but also elderly women who are abused and wrongfully accused of, for instance witch craft and subjected to violence. The VSUs are located in the police stations and there are over 300 stations that have at least a victim support officer. However they need to be strengthened so that they can operate effectively. The VSUs require logistical support including transportation, institutional and human resource capacity building.

### **Outcomes**

- Regular assessments are undertaken on level of security and protection for women and girls;
- There is massive support among media organizations on campaigning against GBV;
- Schools and teachers are involved in promoting healthy learning environment free of GBV;
- School pupils are participating in peer counseling and education programs;
- Schools include reproductive health and GBV in their life skills manual as a module;
- Designated safe havens are available for the rehabilitation of GBV survivors.

### **Outputs**

- I. Increased awareness of the available security and protection provisions for women and children;
- II. Increased and institutionalized school and peer education programs on GBV;

- III. Enhance capacity of local traditional systems to support and protect victims of GBV
- IV. Enhanced capacity of National Police to enforce laws on GBV and provide support to victims and decentralized Victim support Units;
- V. Increased and improved community level security and detention systems;
- VI. Available safe homes for survivors of GBV building on existing initiatives;
- VII. Increased number of safe homes in urban and rural areas
- VIII. Standardized monitoring and evaluation tools developed.

### **Activities**

1. Conduct assessments and surveys – (in areas not yet reached by previous surveys/assessments)
  - Identify and analyze existing reports on security/protection facilities;
  - Development of standardized tools for collecting information on the security and protection mechanisms in place at the province and district levels;
  - Assessment of staff, civil society including NGOs and communities;
  - Assess the status of existing correctional facilities in the country.
2. Create awareness and advocate for effective protection of women and children
  - Identify other (including traditional) means of information-sharing and utilize them
  - Create public awareness on citizens protection acts and instruments including the penal code amendment Law;
  - Advocate for compliance and implementation of international instruments (Convention on the Elimination of all forms of Discrimination Against Women (CEDAW)).
3. Capacity enhancement
  - Train local traditional systems, groups and organizations to enforce protection and security systems against GBV;
  - Train the Zambia National Police on judicial/law enforcement and correctional centers personnel on international human rights standards and applicable national laws;
  - Strengthen existing NGOs such as YWCA to scale up safe homes
  - Strengthen the logistical capacity of the VSUs to enable them to provide timely and efficient services to the communities and the victim/survivors of GBV( at least one motorcycle for each VSU)
  - Establish, staff and equip Victim Support Units in each province/district
  - Create link direct link between VSUs and safe homes;
4. Establish prevention/security mechanisms and monitoring systems to identify risks in communities for GBV to occur;
5. Identify existing initiatives of safe homes and enhance their capacities
6. Establish national format of medical record for GBV survivor for all levels of Health Centre service

7. Establish communication and reporting of GBV cases within communities
8. Establish youth centers and organize youth programmes against GBV and (Both short/medium term)
  - Youth centers established and equipped and resourced;
  - Youth centered activities developed.
9. Conduct school protection and education programs (Both short/medium term)
  - Child protection awareness and sensitization in schools;
  - Education of girls'/boys' and youth against GBV and (Peer Educators);
  - Institutionalize school debates and competitions on GBV and prevention and advocacy;
  - Develop training manual for schools on gender-related issues including GBV
  - Advocate for the mainstreaming of gender/GBV issues in the school curricula
  - Training of teachers and educational institutions on how to effectively tackle sexual and gender based violence in schools and public institutions;
  - MOE to develop code of conduct for teacher school administration to reflect GBV
  - Revise school curriculum to reflect gender equality and ensure gender sensitivity;
  - Train PTAs on Code of Conduct
  - Establish monitoring systems to identify risks in schools and prevent opportunities for teachers to sexually exploit or abuse students.
1. Establish youth centers and organize youth programmes against GBV and (Both short/medium term)
2. Conduct school protection and education programs (Both short/medium term)

### **Indicators**

1. Number of GBV cases reported by communities
2. Assessments undertaken with recommendations - these should only be undertaken in or areas not yet reached.
3. Radio, television and public organizations participating on campaigns on citizen protection acts
4. Number of school pupils participating on GBV and peer counseling and education programs
5. Number of teachers trained in and applying their skills on GBV detection and prevention
6. Number of school pupils receive life skills in reproductive health and GBV
7. Number of youth friendly centers operationalized
8. Number of community police officers(men and women) trained in GBV gender related issues (short, medium and long term)
9. Level of improvement in police systems and procedures in community policing



## 9. Coordination and Implementation of the National Action Plan

All anti-violence interventions will be implemented under the general framework of the National Action Plan under the motto “one **leader**, one **team**, and one **program**.”

- **One leader:** Under the umbrella of GIDD, with the Directorate of Social, Legal and Governance providing secretariat support to the general coordination of the Plan
- **One team:** A coalition of actors culminating in the building and promoting of a strong effective partnership between government and international NGOs, UN agencies, and other multi-sectoral stakeholders.
- **One program:** The National Action Plan (NAP) to Address Gender-based violence in Zambia provides the framework within which all major activities related to prevention and response of violence against women and children are outlined.

While the implementation of the various aspects of the Plan will be done by identified stakeholders that are engaged in GBV prevention, management, and care within the context of their respective programs and responsibilities, the Gender in Development division will assume the overall coordination of the implementation of this National Action Plan (NAP). It will work closely with development partners who are supporting programmes on GBV to ensure programme success. The Gender Division will also spearhead the mobilization of resources for implementation of the NAP. Other specific tasks required for effective coordination will include:

- Set up a Coordinating Advisory Committee (CAC) for the NAP on Violence against Women and Children (GBV) to be chaired by GIDD to provide guidance and suggestions on the modalities for bridging the various supports in ways that will benefit survivors/victims
- Set up from among the GBV Partnership, and GFPs technical committees as and when necessary, to provide technical advice for the coordination and implementation of the NAP.
- Providing technical assistance from in and outside of GIDD
- Develop and sustaining a dynamic data base on GBV-NAP as well as other gender related programmes in the country.
- Develop a Monitoring and Evaluation Plan for, and monitor all GBV programme interventions
- Develop and implement an advocacy strategy in collaboration with implementing partners in support of the GBV-NAP.
- Coordinate and harmonize all research activities including data collection in relation to the GBV-NAP
- Disseminate analytical and consolidated progress reports on the implementation of activities of the NAP and related programmes
- Document and disseminate lessons learned and “best practices on interventions including relevant data from the data-base through a quarterly news letter or magazine

- Strengthen its Gender Focal Points forum, and create technical committees on key critical thematic areas to assist the division in the execution of its tasks...
- Create gender focal point committees within the decentralized structures at provincial and district levels to ensure that issues of gender and GBV-NAP are addressed not only at the central levels but also at the grassroots level in line with the principles of the Decentralization Policy.

In view of the additional tasks and new challenges with respect to GBV-NAP, GIDD will require some capacity building in terms of human resource, equipment and training. Training will be required for all the staff members in management and organizational skills, advocacy, and monitoring and evaluation, as these are core functions of the division in all aspects of their coordination role. GIDD will need to strengthen its Information Resource Center, and in particular ensure the operationalization of its data – base, in order to document information on existing and past sectoral programmes/activities with relevance to gender in general and GBV in particular.

### **Outcomes**

- Gender and Development Division systematically and proficiently coordinating monitoring and evaluating the implementation of GBV interventions nationwide and
- Multi-sectoral and inter-agency procedures, practices and reporting on GBV are established;
- Effective Information Management Systems (IMS) for GBV available and used in Zambia
- Data on GBV stored in data bank, used and updated regularly
- M&E framework developed and adapted

### **Outputs**

- I. Strengthened Gender and Development Division (GIDD) and its Taskforce/Technical Committee and operationalized in all provinces and districts
- II. Improved information and data management systems on GBV with GBV included in other National and local authority reporting systems;
- III. M&E framework and standardized tools compatible with other Monitoring and Evaluation framework (PRS-GBV developed and disseminated
- IV. Improved Inter-agency, inter-governmental and inter-ministerial partnerships on GBV prevention, management and care;
- V. Extended and strengthened GBV networks to at all local administrative and community levels with linkages to national level
- VI. Acceptable Code of Conduct for GBV established and enforced
- VII. Improved inter-agency coordination, management and monitoring systems on GBV
- VIII. Increased participation of decision makers of relevant sectors and actors in GBV activities and programmes;

### Activities:

- Establish mechanisms for ensuring complementarity through mapping, checking and controlling replication and overlapping of projects and activities among agencies and partners through effective communication on GBV activities and work plans;
- Purchasing of data processing equipment and facilities for National, Province and Community Networks;
- Establish stronger networks and partnerships among UN Agencies, INGOs and Local NGOs;
- Community organization and mobilization activities;
- Information, ideas and experience-sharing among agencies and partners at all levels;
- Strengthen networks and partnerships among community levels networks;
- Conduct information-sharing/best practices workshops between stakeholders to enhance partnerships to tackle GBV (Both short/medium term)
- Develop gender/child sensitive monitoring indicators;
- Decentralization of supervision on GBV at community levels;
- Train partners and stakeholders in the use of M & E tools;
- Establish and enforce acceptable code of conduct for GBV actors;

### Indicators

1. Multi-sectoral and inter-agency procedures, practices, reporting forms established in writing and agreed by all sectors
2. Information Management Systems (IMS) for GBV in Zambia in place
3. Use of common indicators
4. GBV data bank, templates established, used and updated regularly
5. Community information centers established and operational
6. M&E framework developed and adopted
7. Gender and child sensitive tools and indicators developed and adopted
8. Number of joint activities/networking meetings organized
9. Level of information sharing and management among agencies, partners and sector ministries
10. Number of joint field visits to local authority levels
11. Number of GBV related networks and taskforce established and functioning
12. Proportion of key actors who participate in regular GBV working group meetings

## 10. Implementation Strategies/approaches

Several areas of special consideration when developing programming are outlined below. These areas should be incorporated into all violence against women and children prevention and response strategies, as part of implementing the NAP.

### *Using multi-sectoral and multidisciplinary approaches*

In addition to addressing Gender-Based Violence (GBV) at these multiple levels of prevention, it is also important to institute **multisectoral** approaches. Programming

experiences have revealed that no one sector or agency working in isolation can make an impact with its prevention and response activities. At minimum, services to address Gender-Based Violence (GBV) must be the outcome of coordinated activities between the constituent community, the national government, health and social services, and legal and security sectors.”<sup>ix</sup> The multisectoral model calls for holistic inter-organizational and inter-agency efforts across multiple sectors. It is characterized by the full engagement of government leaders and the local community, as well as **interdisciplinary and inter-organizational cooperation, collaboration, and coordination**. The goal of collaborative efforts is to create synergy among all stakeholders and to avoid the duplication of efforts.

*Promoting and protecting human rights.* Violence against women and children must be recognized as a fundamental violation of their human rights, including rights to life and security of person and the right to enter into marriage only with full consent of intending parties, as well as rights indirectly violated, such as the right to a standard of living adequate for health and well-being of oneself and one’s family, the right to be free from discrimination and the right to equal protection before the law.<sup>x</sup> A foundation of all promising interventions to prevent violence against women and children is attention to the impact of socially determined gender roles in the perpetration of violence and an increased understanding of violence against women and children as a human rights problem that is detrimental to the community as a whole. To avoid responses that focus initiatives on girls and women solely as “victims,” it is essential to focus on gender relations between men and women and boys and girls and to address patriarchal attitudes and behaviors that reinforce the notion that violence against women and children is acceptable.

*Promoting participatory processes that engage all stakeholders.* Widespread reform must be instituted from both the *top down as well as bottom up*. Activities that mobilize citizens of communities *and* engage leaders in the community and in institutions are critical to changing attitudes and behavior. All planning and implementation of programming and advocacy must include participatory processes that engage communities, including survivors/victims. Without support from the public sector and/or community leaders, interventions may not be taken seriously, and at times, not fully carried out. It also is important to ensure that strong alliances are formed with Zambia’s community-based organizations, tapping into the wealth of knowledge they have gained working against violence against women and children.

*Working with men.* Working with men is an important factor in preventing violence against women and children. Gender inequitable attitudes can be unlearned and thereby contribute to healthier relationships. Throughout society and the community in general, men are seen as leaders and are a major force for change. Evidence suggests that coalition building and advocacy are also successful strategies for working with men.

*Targeting youth.* Programs that work with young men and women have demonstrated more dramatic and sustainable changes in attitudes about the acceptability of gender-based violence. Evidence suggests that youth are more open to change, including their

attitudes and behavior regarding violence<sup>xi</sup>, gender roles, and masculinity norms. Schools are a key entry point for sensitization, through school curricula as well as youth groups, theatre, etc. Strategies related to working with youth are most successful when they also engage older community members and leaders.

*Researching promising programming approaches.* There are many gaps in our understanding of the pervasiveness and character of violence against women and children in Zambia. Research is needed to better understand the perpetuation and impact of violence against women and children. There is also a need to undertake operations research to assess the effect of different programmatic approaches on preventing and reducing violence against women and children and on changing social norms that are tolerant of violence within relationships and in the society. The emerging evidence on the relationship between violence and women's and girls' risk of HIV also indicates that this is a critical area for more focused research.

*Ensure sustainability through gender- and gender-based violence responsive budgeting at the national and local levels.* Policy reform, systems change, behavior change, and community mobilization are complex and lengthy processes that are influenced by many other factors that are difficult to control in the short term. Reducing the prevalence of violence against women and children requires that the State prioritizes the attention and resources needed at all levels to tackle it with the seriousness and visibility necessary. At the most essential level, the State must create sustained budgeting mechanisms.

#### *Advocacy and Communication*

Advocacy is the foundation of addressing GBV. It involves speaking up and drawing attention to the issue of GBV and directing decision makers towards the solution. Advocacy must be prioritized, both to ensure ongoing attention and funding to the issue and to draw attention to particular cases in which international intervention is warranted. An advocacy plan shall be developed and this will help to conduct national advocacy and media campaigns on key issues of GBV relating to laws, compliance and procedures for the reporting of GBV, and also attitudinal change towards negative sexual behaviors. Communication strategies to be used shall include media campaigns of all forms TV and radio adverts, talk shows, posters, bill boards, music and dramas in both mainstream media and also on the internet.

### **11. Resource Mobilizations**

Mobilization of internal and external resources by participating agencies and other partners is crucial to the implementation of core components of the GBV POA. The government will support the adoption of the GBV National Action Plan and incorporate it in its budget. It is important to make it mandatory to explore other options for partnerships in and outside the country. Consequently, with the leadership of the government, the private sector and donors, common financing schemes will be set up, monitored and expanded. At national and community levels, community financing scheme will be strengthened to support GBV interventions and fund raising activities.

The Joint Funder Support Programme (JGSP) involving the UNCT and bilateral agencies is working on framework to provide financial and technical assistance for the promotion of gender equity, equality and the empowerment of women in Zambia. The Programme will contribute towards strengthening national capacity to formulate, design and implement gender responsive policies and programmes; monitoring and evaluation; capacities for the collection, processing, storage and retrieval of sex disaggregated statistics at all levels within the priority sectors. It is hoped that this national action plan on GBV will be supported by the JGSP.

Human and institutional resources will be mobilized from public and private sectors, training institution, and professional bodies to support service delivery, research and capacity building.

## **12. Monitoring and Evaluation**

After the adoption and launch of the National Action Plan, the implementation of the activities outlined herein will be monitored and evaluated throughout the stipulated time frame of 2008-2013.

Lack of adequate and relevant data and inconsistent levels of reporting across sectors highlights the fact that coordination needs to be prioritized in all GBV prevention and response efforts. Capacity will be built in all sectors to ensure confidentiality, reliable data collection, processing, analysis, dissemination and management, as well as to monitor and evaluate interventions in order to measure impact.

The indicators formulated in the Plan will be used to assess the implementation of the NAP activities. In the early stage of implementation, progress will be monitored more frequently to ensure rapid startup and address any obstacles or delays in the implementation process through monthly reporting by all stakeholders. When the implementation of all activities is well underway the progress will be monitored every three months. Information will be analyzed over time to identify trends, problems, issues and best practices. Monitoring and evaluation will also assess the level of impact of programs on survivors/victims – also taking into account program results and impact on communities. Reports will be distributed to all stakeholders including communities and local authorities. Periodic reviews and evaluation will be undertaken and regular reports will be used to update the NAP.<sup>xiii</sup>

**NATIONAL ACTION PLAN FOR THE ELIMINATION OF GENDER-BASED VIOLENCE 2008-2013**

**GOAL:** The goal of the National Action Plan is to eliminate gender-based violence (GBV) in a holistic, systematic, complementary and comprehensive manner through multi-sectoral, and multi-dimensional approach, and to provide appropriate care and services to survivors of GBV.

**STRATEGIC AREA OF FOCUS 1: Review, adoption and implementation of protective laws and policies**

**OBJECTIVES:** To review, strengthen and implement relevant Laws and Policies for the prevention of Gender-Based Violence (GBV), ensuring accordance with international requirements and standards.

TOTAL BUDGET FOR THIS STRAGTIC AREA IS

US\$

OUTCOME	OUTPUTS	ACTIVITIES	INDICATORS	MOV	RESPONSIBLE PARTNERS	TIME FRAME	BUDGET US\$
<p>-Gender sensitive legislation and procedures on GBV are in place and protect the rights of women and children</p> <p>- The legal justice system is strengthened and GBV cases are expeditiously handled by judges, prosecutors, lawyers and there is general improvement in the conditions of service of magistrates and judges;</p>	<p>1. Increased availability and accessibility to relevant gender sensitive legal instruments and procedures on GBV</p>	<p>-Review and assess existing legal instruments and procedures on GBV; (in areas not covered by previous assessments)</p> <p>- Conduct a study into current legal and constitutional provisions against GBV and recommend needed legal reforms;</p> <p>-Assess capacity of local NGOs to offer legal and paralegal support to GBV victims/survivors and families</p> <p>- Develop and Enact Sexual Offenses and GBV Bill</p> <p>- Undertake intensive advocacy for legislative and policy reform</p>	<p>-Legislation on GBV enacted and copies of law available in seven languages and distributed to key stakeholders and community leaders through trainings</p> <p>- Number of legislation reviewed for gender sensitivity</p> <p>- Assessment report with recommendations available and implemented</p> <p>- Number of booklets/handouts of simplified current and new GBV law produced, printed and disseminated</p> <p>- No. of Workshops on the GBV related law held for members of the judiciary</p> <p>Level of increase in reported cases of GBV and sexual offence cases</p> <p>- Level of increase in number of cases of GBV and sexual offence cases adjudicated per year</p> <p>Level of increase in convictions of perpetrators of GBV</p> <p>- Number of perpetrators serving appropriate sentences</p> <p>Increased confidence and clients satisfaction in the justice system</p>	<p>Ministry of justice Reports and legal documents/ inventories National and local courts' Reports</p> <p>Ministry of justice</p> <p>GIDD annual reports</p> <p>Law Reform Commission</p> <p>GIDD annual reports</p>	<p>Ministry of Justice</p> <p>Law Reform Commission</p> <p>NGOS</p> <p>GIDD</p>		
	<p>2 Increased advocacy for legislation which allow survivors to gain easier access to legal processes;</p>	<p>- Reinforcement of existing legislation and periodic review of its effectiveness</p> <p>- Enforce procedures that ensure that offenders and perpetrators are duly punished in line with existing laws.</p> <p>- Organize training workshops for judges, magistrates, prosecutors, lawyers and the police on the emotional, psychological dimensions of GBV vis a vis the victim/survivors and how to deal with such cases;</p> <p>- Quarterly review of prevention of violence, protection of survivors, prosecution and / or rehabilitation of offenders;</p>					




NATIONAL ACTION PLAN FOR THE ELIMINATION OF GENDER-BASED VIOLENCE 2008-2013							
<b>GOAL: The goal of the National Action Plan is to eliminate gender-based violence in a holistic, systematic, complementary and comprehensive manner through multi-sectoral, and multi-dimensional approach, and to provide appropriate care and services to survivors of GBV.</b>							
<b>STRATEGIC AREA OF FOCUS: Review, adoption and implementation of protective laws and policies</b>							
<b>OBJECTIVES: To review, strengthen and implement relevant laws and policies for the prevention of Gender-Based Violence (GBV), ensuring accordance with international requirements and standards</b>							
Total Budget for this thematic area				US\$			
OUTCOME	OUTPUTS	ACTIVITIES	INDICATORS	MEANS OF VERIFICATION	RESPONSIBLE PARTNERS	Time frame	Budget US\$
<p>- Gender sensitive legislation and procedures on GBV are in place and protect the rights of women and children</p> <p>- The legal justice system is strengthened and GBV cases are expeditiously handled by judges, prosecutors, lawyers and there is general improvement in the conditions of service of magistrates and judges;</p>	<p>3. Increased knowledge of stakeholders on GBV related laws, and legal consequences of GBV;</p> <p>4 Increased reinforcement of existing legislation and periodic review of its effectiveness, with specific focus on prevention of violence, protection of survivors, prosecution and/or rehabilitation of offenders;</p>	<p>-Quarterly review of prevention of violence, protection of survivors, prosecution and/or rehabilitation of offenders;</p> <p>4. Establish institutional and legal framework for GBV redress (Both short/medium term)</p> <p>-Prioritize GBV and sexual offence cases at the courts and enforce the need for timely adjudication of all GBV cases including any backload of cases</p> <p>--Build networks of judges, prosecutors, police and traditional systems to ensure that existing laws relating to GBV are upheld.</p>	<p>Level of increase in reported cases of GBV and sexual offence cases</p> <p>-Level of increase in number of cases of GBV and sexual offence cases adjudicated per year</p> <p>- Level of increase in convictions of perpetrators of GBV</p> <p>- Number of perpetrators serving appropriate sentences</p>	<p>Ministry of justice Reports</p> <p>National and local courts Records</p> <p>Ministry of justice Reports and legal documents</p> <p>GIDD annual reports Law Reform Commission Reports</p> <p>GIDD annual reports</p>	<p>MOLA</p> <p>ZLDC</p> <p>LAZ</p> <p>CCJP</p> <p>NGOS</p> <p>WILSA</p> <p>WILDAF</p> <p>GIDD ZPS</p>		

NATIONAL ACTION PLAN FOR THE ELIMINATION OF GENDER-BASED VIOLENCE 2008-2013							
GOAL The goal of the National Action Plan is to eliminate gender-based violence in a holistic, systematic, complementary and comprehensive manner through multi-sectoral, and multi-dimensional approach, and to provide appropriate care and services to survivors of GBV.							
STRATEGIC AREA OF FOCUS 2: Advocacy/IEC/BCC and Community Mobilization and awareness rising for the prevention of GBV							
OBJECTIVES: To ensure that the Zambian population is aware that Gender-Based Violence (GBV) is wrongful behavior and a criminal act.							
Total Budget for this thematic area							
OUTCOME	OUTPUTS	ACTIVITIES	INDICATORS	MEANS OF VERIFICATION	RESPONSIBLE PARTNERS	Time frame	BUUDGET US\$
Zambian women, children, and vulnerable groups are assertive to issues of GBV and proactive in the prevention of GBV.	1. Increased availability of accurate and reliable information on GBV related issues 2. Increased level of awareness about GBV and its consequences 3. Increased availability of accurate and reliable information on security and protection facilities at national and decentralized levels;	- Undertake a knowledge, attitude, and practices survey (KAP) at the beginning of the implementation phase to determine the baseline for monitoring progress of implementation  - Develop an advocacy/IEC/BCC strategy in support of the implementation of the GBV-NAP;  - Develop and standardize Information Education and Communication materials on GBV prevention, protection and on issues of security	A comprehensive Advocacy, IEC/BCC developed, circulated and implemented  Number of awareness campaigns organized	Advocacy BCC/IEC Strategy Document at GIDD and at other partner organizations	GIDD , Relevant sectoral ministries a  CSO MIBS  NGO partners		

**NATIONAL ACTION PLAN FOR THE ELIMINATION OF GENDER-BASED VIOLENCE 2008-2013**

**GOAL:** The goal of the National Action Plan is to eliminate gender-based violence in a holistic, systematic, complementary and comprehensive manner through multi-sectoral, and multi-dimensional approach, and to provide appropriate care and services to survivors of GBV.

**STRATEGIC AREA OF FOCUS 1:**

**OBJECTIVES:** To ensure that the Zambian population is aware that Gender-Based Violence (GBV) is wrongful behavior and a criminal act.

**Total Budget for this thematic area**

OUTCOME	OUTPUTS	ACTIVITIES	INDICATORS	MEANS OF VERIFICATION	RESPONSIBLE PARTNERS	Time frame	Budget USD
- Zambian women, children, and vulnerable groups are assertive to issues of GBV and proactive in the prevention of GB	4. Increased knowledge of stakeholders on security and protection issues within various levels of the country  5. Increased Level of reported cases of GBV and related sexual offences	- Develop and standardize Information Education and Communication materials of GBV  - Translate the simplified GBV related laws/articles into local dialects and dissemination at all levels community level;  - Undertake awareness raising campaigns addressing gender relations that focus on men, youth and other target groups	- Number of NGO/CBOs, media agencies trained in advocacy for the prevention of GBV and in gender sensitive messaging and reporting on GBV issues  - Level of commitment by communities in identifying and reporting cases of GBV  - Number of GBV prevention committees constituted and trained in all provinces districts communities with reports on activities	IEC/BCC materials in circulation Ministry of Information, Media Agencies; NGOs; GIDD; All relevant Sectors	CAC  GIDD MIBS  Sectoral Ministries  NGOs.  Private sector organizations		

NATIONAL ACTION PLAN FOR THE ELIMINATION OF GENDER-BASED VIOLENCE 2008-2013							
GOAL: The goal of the National Action Plan is to eliminate gender-based violence (GBV) in a holistic, systematic, complementary and comprehensive manner through multi-sectoral, and multi-dimensional approach, and to provide appropriate care and services to survivors of GBV.							
OBJECTIVES: To ensure that the Zambian population is aware that Gender-Based Violence (GBV) is wrongful behavior and a criminal act.							
Total budget for this thematic area							US\$
OUTCOME	OUTPUTS	ACTIVITIES	INDICATORS	MEANS OF VERIFICATION	RESPONSIBLE PARTNERS	Time frame	Budget USD
Zambian women, children, and vulnerable groups are assertive to issues of GBV and proactive in the prevention of GB	<p>Increased Level of reported cases of GBV and related sexual offences</p> <p>-Increased awareness on negative effect and impact of GBV leading to behavioural change</p>	<p>-Community mobilization and awareness raising campaigns at national and decentralized levels</p> <p>-Use of educational entertainment or 'edutainment' programs (radios, television soap operas) to share key messages with the audience</p>	<p>-Number of campaigns organized</p> <p>-Level of community response</p> <p>-Number of GBV networks per each province established operational</p>	<p>-Activity reports</p> <p>- Courts' records</p> <p>-Printed materials</p> <p>Activity reports</p> <p>KAP Reports</p>	<p>-CAC</p> <p>GIDD Sectoral Ministries</p> <p>NGOs.</p> <p>Private sector organization</p>		

NATIONAL ACTION PLAN FOR THE ELIMINATION OF GENDER-BASED VIOLENCE 2008-2013							
GOAL: The goal of the National Action Plan is to eliminate gender-based violence (GBV) in a holistic, systematic, complementary and comprehensive manner through multi-sectoral, and multi-dimensional approach, and to provide appropriate care and services to survivors of GBV.							
STRATEGIC AREA OF FOCUS: Advocacy/IEC/BCC and Community Mobilization and awareness rising for the prevention of GBV							
OBJECTIVES: To ensure that the Zambian population is aware that Gender-Based Violence (GBV) is wrongful behavior and a criminal act.							
Total budget for this thematic area							US\$
OUTCOME	OUTPUTS	ACTIVITIES	INDICATORS	MEANS OF VERIFICATION	RESPONSIBLE PARTNERS	Time frame	Budget US\$
Zambian women, children, and vulnerable groups are assertive to issues of GBV and proactive in the prevention of GB	Enhanced capacity of media to provide appropriate reportage on GBV at all levels  Increased collaboration among NGOs/CBOs rallying around issues of GBV.	-Use of community-wide meetings, knowledge-building workshops, peer group discussions, and drama to challenge gender inequities related to Gender-Based Violence (GBV) - Awareness raising through seminars and workshops with students, their parents, teachers, government officials, and NGOs in relation to Gender Based Violence (GBV) in schools	Inventory of logistics supplied; field workers motivated and regular reporting frameworks in place and being used Number of IEC materials using verbal or visual messages on GBV produced and disseminated  Number of seminars/workshops organized	News papers footages. TV and radio programmes  Activity report  GIDD consolidated annual reports IEC/BCC materials  Activity report  GIDD consolidated annual reports	CAC,  MBIS  NGO and MEDIA partners  Sectoral Ministries		

**NATIONAL ACTION PLAN FOR THE ELIMINATION OF GENDER-BASED VIOLENCE 2008-2013**

**GOAL: The goal of the National Action Plan is to eliminate gender-based violence (GBV) in a holistic, systematic, complementary and comprehensive manner through multi-sectoral, and multi-dimensional approach, and to provide appropriate care and services to survivors of GBV.**

**STRATEGIC AREA OF FOCUS 2 : Advocacy/IEC/BCC and Community Mobilization and awareness rising for the prevention of GBV**

**OBJECTIVES: To ensure that the Zambian population is aware that Gender-Based Violence (GBV) is wrongful behavior and a criminal act.**

Total budget for this thematic area							US\$
OUTCOMES	OUTPUTS	ACTIVITIES	INDICATORS	MEANS OF VERIFICATION	Responsible parties	Time frame	Budget
Zambian women, children, and vulnerable groups are assertive to issues of GBV and proactive in the prevention of GB	Increased involvement and participation of community leaders in GBV related discourses and dialogues Enhanced capacity of Media to provide appropriate reportage on GBV at all levels	Building capacity of rural communities so that they are sensitized/aware of Gender-Based Violence (GBV) and subsequently able to address and mitigate the impact of shame and stigma on individual survivors/victims, families and communities  Engaging traditional and other leaders in attitude and behavior change efforts Involving the media in sensitizing the community on the prevention and dangers of Gender-Based Violence (GBV)	- Level of commitment by communities in identifying and reporting cases of GBV	Activity reports of implementing partners  GIDD consolidated annual reports  M&E Reports	GIDD and all NGO, Media partners  Relevant Sectoral Ministries  Community-based NGOs		
			- Number of GBV prevention committees constituted and trained in all provinces districts communities with reports on activities - Level of commitment by communities in identifying and reporting cases of GBV	Activity reports of implementing partners  GIDD consolidated annual reports Activity reports of implementing partners  GIDD consolidated annual reports			
			GBV cases reporting increased at district, provincial and national levels				

<b>NATIONAL ACTION PLAN FOR THE ELIMINATION OF GENDER-BASED VIOLENCE 2008-2013</b>							
<b>GOAL: The goal of the National Action Plan is to eliminate gender-based violence (GBV) in a holistic, systematic, complementary and comprehensive manner through multi-sectoral, and multi-dimensional approach, and to provide appropriate care and services to survivors of GBV.</b>							
<b>STRATEGIC AREA OF FOCUS 2 : Advocacy/IEC/BCC and Community Mobilization and awareness rising for the prevention of GBV</b>							
<b>OBJECTIVES: To ensure that the Zambian population is aware that Gender-Based Violence (GBV) is wrongful behavior and a criminal act.</b>							
<b>Total budget for this thematic area</b>							<b>US\$</b>
<b>OUTCOMES</b>	<b>OUTPUTS</b>	<b>ACTIVITIES</b>	<b>INDICATORS</b>	<b>MEANS OF VERIFICATION</b>	<b>Responsible parties</b>	<b>Time frame</b>	<b>Budget</b>
Zambian women, children, and vulnerable groups are assertive to issues of GBV and proactive in the prevention of GB	Increased collaboration among NGOs/CBOs in rallying around issues of GBV,	Conduct media campaigns, community level advocacy campaigns (durbars, billboards, advertisements, local song and drama performances on prevention of GBV)	Number of NGO/CBOs, Media agencies trained in advocacy for the prevention of	Activity reports of implementing partners  GIDD consolidated annual reports	GIDD and all NGO, Media partners;  Sectoral Ministries		
		Ensure sustained community mobilization throughout the implementation of the NAP	Level of commitment by communities in identifying and reporting cases of GBV	Activity reports of implementing partners  GIDD consolidated annual reports			
		Establish and engage male action groups, and youth groups in the GBV prevention intervention	Number of male action groups and youth groups engaged in regular community activities on GBV prevention	Activity reports of implementing partners  GIDD consolidated annual reports			

<b>NATIONAL ACTION PLAN FOR THE ELIMINATION OF GENDER-BASED VIOLENCE 2008-2013</b>							
<b>GOAL: The goal of the National Action Plan is to eliminate gender-based violence (GBV) in a holistic, systematic, complementary and comprehensive manner through multi-sectoral, and multi-dimensional approach, and to provide appropriate care and services to survivors of GBV.</b>							
<b>STRATEGIC AREA OF FOCUS: Building capacity of relevant sectors (health, legal/justice, education, welfare for the development and implementation of comprehensive services for the management and care of survivors/victims of GBV in order to address immediate consequences as well as to reduce the likelihood of long-term negative effects related to victimization, as well as survivors' vulnerabilities to future incidents of violence.</b>							
<b>OBJECTIVES: 1. Build capacity of the relevant sectors (Health, Education, Social welfare, the judiciary and the justice system, NGOs) for mainstreaming GBV prevention and case management interventions in their policies, plans and programmes. 2. Offer comprehensive and ethical response to survivors/victims.</b>							
<b>Total Budget for this thematic area</b>						<b>US\$</b>	
<b>OUTCOME PSYCHO-SOCIAL</b>	<b>OUTPUTS</b>	<b>ACTIVITIES</b>	<b>INDICATORS</b>	<b>MEANS OF VERIFICATION</b>	<b>RESPONSI BLE PARTNERS</b>	<b>Time frame</b>	<b>Budget US\$</b>
Psychosocial support for victims and families is available in provinces, districts and communities.	Needs assessment reviews and research conducted and existing community networks strengthened;	Undertake baseline surveys and reviews especially in the areas that are not yet covered by previous assessments;	Needs assessment conducted on GBV, and reports (disaggregated by sex disseminated to all relevant stakeholders	Implementation plans and activity reports	GIDD identifies ZARD WILSA Research institutions;		
Trauma Counseling services and all other forms of counseling are available at all levels especially at the grassroots and is being accessed by victims;	Increased availability and utilization of credible assessments/survey reports and recommendations on critical traditional, cultural and psychosocial issues relating to GBV;	Assess the psychosocial perception of offenders and men in GBV and rape in Zambia; and disseminate results to stakeholders for action	Number of public and media institutions awareness campaigns on GBV	Implementation plans and activity reports	MOCDCSS and GIDD		
There are referral systems in place for victims to receive medical and judicial redress	Increased awareness on negative effect and impact of GBV leading to behavioural change Reduced stigmatization of GBV survivors and families;	Prioritize psychosocial needs in the area of behavioural change and trauma healing including traditional trauma counseling	All provincial and local authority offices have Gender Focal Persons in their districts	All provincial and local authority offices Training Reports	\\ Relevant NGOs		
		Conduct Trainer of Trainers workshop in Trauma Counseling	Number of persons trained in trauma counseling and the trained persons replicating the training in other places		GIDD and relevant partners GIDD and relevant partners		



<b>NATIONAL ACTION PLAN FOR THE ELIMINATION OF GENDER-BASED VIOLENCE 2008-2013</b>							
<b>GOAL: The goal of the National Action Plan is to eliminate gender-based violence (GBV) in a holistic, systematic, complementary and comprehensive manner through multi-sectoral, and multi-dimensional approach, and to provide appropriate care and services to survivors of GBV.</b>							
<b>STRATEGIC AREA OF FOCUS: Building capacity of relevant sectors (health, legal/justice, education, welfare for the development and implementation of comprehensive services for the management and care of survivors/victims of GBV in order to address immediate consequences as well as to reduce the likelihood of long-term negative effects related to victimization, as well as survivors' vulnerabilities to future incidents of violence.</b>							
<b>OBJECTIVES: 1. Build capacity of the relevant sectors (Health, Education, Social welfare, the judiciary and the justice system, NGOs) for mainstreaming GBV prevention and case management interventions in their policies, plans and programmes. 2. Offer comprehensive and ethical response to survivors/victims.</b>							
<b>Total Budget for this thematic area</b>							
<b>OUTCOME PSYCHO-SOCIAL</b>	<b>OUTPUTS</b>	<b>ACTIVITIES</b>	<b>INDICATORS</b>	<b>MEANS OF VERIFICA TION</b>	<b>RESPONSIBL E PARTNERS</b>	<b>BUUD GET</b>	<b>Budget US\$</b>
<p>Psychosocial support for victims and families is available in provinces, districts and communities.</p> <p>Trauma Counselling services and all other forms of counselling are available at all levels especially at the grassroots and is being accessed by victims;</p> <p>There are referral systems in place for victims to receive medical and judicial redress;</p>	<p>Enhanced capacity of local NGOs, Traditional Authority/Local Systems, Networks, personnel and individuals to provide psychosocial support at the national, provincial, district and community levels;</p> <p>Enhanced Capacity of counselors to ensure effective counseling of both victims and perpetrators</p> <p>Enhanced capacity of Media to provide appropriate reportage on GBV at all levels</p>	<p>Establishment of an effective referral network and linkages</p> <p>Recruitment of personnel in relevant sectors and NGOs</p> <p>Establish one vibrant GBV network per district; Establish linkages between community, health clinics/centers, police stations and courts;</p>	<p>-Production, dissemination and utilization of GBV protocol and guidelines</p> <p>-Client satisfaction</p> <p>-Number of safe havens established and psychosocial support centers strengthened equipped and operational</p> <p>-Inventory of logistics supplied; field workers motivated and regular reporting frameworks in place and being used</p>	<p>Work plans of implementing agencies</p> <p>Records of attendance of clients</p>	<p>MOCDS GIDD Relevant sectoral ministries;</p> <p>NGOS, and other stakeholders</p>		

<b>NATIONAL ACTION PLAN FOR THE ELIMINATION OF GENDER-BASED VIOLENCE 2008-2013</b>							
<b>GOAL: The goal of the National Action Plan is to eliminate gender-based violence (GBV) in a holistic, systematic, complementary and comprehensive manner through multi-sectoral, and multi-dimensional approach, and to provide appropriate care and services to survivors of GBV.</b>							
<b>STRATEGIC AREA OF FOCUS: Building capacity of relevant sectors (health, legal/justice, education, welfare for the development and implementation of comprehensive services for the management and care of survivors/victims of GBV in order to address immediate consequences as well as to reduce the likelihood of long-term negative effects related to victimization, as well as survivors' vulnerabilities to future incidents of violence.</b>							
<b>OBJECTIVES: 1. Build capacity of the relevant sectors (Health, Education, Social welfare, the judiciary and the justice system, NGOs) for mainstreaming GBV prevention and case management interventions in their policies, plans and programmes. 2. Offer comprehensive and ethical response to survivors/victims.</b>							
<b>Total Budget for this thematic area</b>							
<b>OUTCOME PYSHO-SOCIAL</b>	<b>OUTPUTS</b>	<b>ACTIVITIES</b>	<b>INDICATORS</b>	<b>MEANS OF VERIFICAT ION</b>	<b>RESPONSI BLE PARTNERS</b>	<b>Time frame</b>	<b>Budget US\$</b>
<p>Psychosocial support for victims and families is available in provinces, districts and communities.</p> <p>Trauma Counselling services and all other forms of counselling are available at all levels especially at the grassroots and is being accessed by victims;</p> <p>There are referral systems in place for victims to receive medical and judicial redress;</p>	<p>Psychosocial support for victims and families is available in provinces, districts and communities.</p> <p>Trauma Counselling services and all other forms of counselling are available at all levels especially at the grassroots and is being accessed by victims;</p> <p>There are referral systems in place for victims to receive medical and judicial redress;</p>	<p>-Provide and strengthen social rehabilitation programmes</p> <p>Develop and utilize a psychosocial monitoring and evaluation plan to include (Field visits, workshops and review meetings, Joint field assessments; reporting, inventory of equipment, financial audit). Capacity building and Educational Enhancement: <b>(medium term)</b></p> <p>- Review and standardize training manuals/materials on GBV (NGO and National training manuals);</p> <p>- Provide standard basic packages for training various groups which set minimum standards and training times.</p>	<p>Number of GBV referral hospitals district clinics resourced with required equipments and medicines</p> <p>Regular National, Provincial and District level conferences and lectures on GBV convened</p> <p>Monitoring Evaluation framework and tools developed and adopted for psychosocial activities</p>	<p>GoRZ annual budgets.</p> <p>Sectoral budgets reflecting resource allocation for GBV-NAP</p>	<p>Move. GIDD. TWCA Relevant NGOs Sectoral ministries</p> <p>MOCDS</p>		

<b>NATIONAL ACTION PLAN FOR THE ELIMINATION OF GENDER-BASED VIOLENCE 2008-2013</b>							
<b>GOAL: The goal of the National Action Plan is to eliminate gender-based violence (GBV) in a holistic, systematic, complementary and comprehensive manner through multi-sectoral, and multi-dimensional approach, and to provide appropriate care and services to survivors of GBV.</b>							
<b>STRATEGIC AREA OF FOCUS: Build capacity of relevant sectors (health, legal/justice, education, welfare for the development and implementation of comprehensive services for the management and care of survivors/victims of GBV in order to address immediate consequences as well as to reduce the likelihood of long-term negative effects related to victimization, as well as survivors'/victims' vulnerabilities to future incidents of violence.</b>							
<b>OBJECTIVES: 3. Build capacity of the relevant sectors (Health, Education, Social welfare, the judiciary and the justice system, NGOs) for mainstreaming GBV prevention and case management interventions in their policies, plans and programmes.</b>							
<b>4. Offer comprehensive and ethical response to survivors/victims.</b>							
<b>Total budget for this thematic area</b>						<b>US\$</b>	
<b>OUTCOMES HEALTH</b>	<b>OUTPUTS</b>	<b>ACTIVITIES</b>	<b>INDICATORS</b>	<b>MEANS OF VERIFICATION</b>	<b>RESPONSIBLE PARTIES</b>	<b>Time frame</b>	<b>Budget US\$</b>
Medical referral centres are available and equipped to handle GBV cases;	Reports on needs assessment / reviews and research prepared and disseminated;	Conduct health and medical reviews/assessments on GBV in (in areas not covered by previous assessments)	All available health-related assessment and review reports available and presented as baseline information;	MoH Reports  Reports from other sectoral ministries	MoH  Other sectoral ministries		
Victims of GBV receive the needed medical attention and medication;	Standardized guidelines and information packages developed;	Undertake reviews and assessment of who is doing what and where at all levels;	Training modules designed, disseminated and in use by health training centers	NGOs' reports  GIDD's consolidated reports  M&E reports	NGOs  GIDD		

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<b>STRATEGIC AREA OF FOCUS:</b> Build capacity of relevant sectors (health, legal/justice, education, welfare for the development and implementation of comprehensive services for the management and care of survivors/victims of GBV in order to address immediate consequences as well as to reduce the likelihood of long-term negative effects related to victimization, as well as survivors'/victims' vulnerabilities to future incidents of violence.							
<b>OBJECTIVES:</b> 3. Build capacity of the relevant sectors (Health, Education, Social welfare, the judiciary and the justice system, NGOs) for mainstreaming GBV prevention and case management interventions in their policies, plans and programmes. 4. Offer comprehensive and ethical response to survivors/victims.							
Total budget for this thematic area							US\$
OUTCOMES HEALTH	OUTPUTS	ACTIVITIES	INDICATORS	MEANS OF VERIFICAT ION	RESPONSIBLE PARTIES	Time frame	Budget US\$
Medical referral centres are available and equipped to handle GBV cases;  Victims of GBV receive the needed medical attention and medication;	- Increased capacities of Government, NGOs, CBOs and individuals in dealing with health needs of GBV;  -Improved, equipped and functional medical infrastructures available at all levels to handle <i>clinical aspects of</i> GBV  - Increased service provision with linkages to psychosocial and legal needs of victims;	Conduct awareness creation and counseling on health aspects of GBV  Organize training for relevant personnel  Strengthen the Forensic Department of the University Teaching Hospital (UTH) to be able to perform DNA tests  Community level sensitization meetings on the health effects of GBV including transmission of HIV/AIDS and other STDs for health personnel;  Sensitization on the health needs of GBV victims and where to secure health support for victims;	Number of public and private institutions trained  - Number of traditional and opinion leaders (both male and female) trained as GBV advocates - Increased number of rape cases processes with forensic evidence in a timely manner;  - Number of Trainings conducted for health workers in all referral hospitals,  - Number of trainings on clinical management of GBV and Rape provided	Activity reports  GIDD consolidated reports  M& e reports	MoH;  Implementing agencies  GIDD		

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<b>NATIONAL ACTION PLAN FOR THE ELIMINATION OF GENDER-BASED VIOLENCE 2008-2013</b>							
<b>GOAL:</b> The goal of the National Action Plan is to eliminate gender-based violence (GBV) in a holistic, systematic, complementary and comprehensive manner through multi-sectoral, and multi-dimensional approach, and to provide appropriate care and services to survivors of GBV.							
<b>STRATEGIC AREA OF FOCUS:</b> Build capacity of relevant sectors (health, legal/justice, education, welfare for the development and implementation of comprehensive services for the management and care of survivors/victims of GBV in order to address immediate consequences as well as to reduce the likelihood of long-term negative effects related to victimization, as well as survivors'/victims' vulnerabilities to future incidents of violence.							
<b>OBJECTIVES:</b> 3. Build capacity of the relevant sectors (Health, Education, Social welfare, the judiciary and the justice system, NGOs) for mainstreaming GBV prevention and case management interventions in their policies, plans and programmes. 4. Offer comprehensive and ethical response to survivors/victims.							
<b>Total budget for this thematic area</b>						<b>US\$</b>	
<b>OUTCOMES HEALTH</b>	<b>OUTPUTS</b>	<b>ACTIVITIES years)</b>	<b>INDICATORS</b>	<b>MEANS OF VERIFICATION</b>	<b>RESPONSIBL E PARTIES</b>	<b>Time frame</b>	<b>Budget US\$</b>
Medical referral centres are available and equipped to handle GBV cases;  Victims of GBV receive the needed medical attention and medication;	Increased capacities of Government, NGOs, CBOs and individuals in dealing with health needs of GBV;  Increased availability of counseling services on GBV, STDs and HIV/AIDS;	Community level awareness creation on available referral clinics	Number of referral hospitals in the strengthened equipped and functional	Activity reports	MoH;  Implementin g agencies		
		Health providers to provide standardized information and link to health services.	Level of increase in medical supplies to referral clinics and centers at all levels	GIDD consolidated reports	GIDD		
		Clinical management of GBV Distribution of Reproductive Health kits	Number of GBV victims who receive free medical care in all hospitals and clinics National clinical GBV guidelines disseminated and operationalized	M& e reports			

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<b>STRATEGIC AREA OF FOCUS:</b> Build capacity of relevant sectors (health, legal/justice, education, welfare for the development and implementation of comprehensive services for the management and care of survivors/victims of GBV in order to address immediate consequences as well as to reduce the likelihood of long-term negative effects related to victimization, as well as survivors'/victims' vulnerabilities to future incidents of violence.							
<b>OBJECTIVES:</b> 3. Build capacity of the relevant sectors (Health, Education, Social welfare, the judiciary and the justice system, NGOs) for mainstreaming GBV prevention and case management interventions in their policies, plans and programmes. 4. Offer comprehensive and ethical response to survivors/victims.							
Total budget for this thematic area							US\$
OUTCOMES	OUTPUTS	ACTIVITIES	INDICATORS	MEANS OF VERIFICATION	RESPONSIBLE PARTIES	Time frame	Budget US\$
HEALTH	Medical referral centres are available and equipped to handle GBV cases;	Increased capacities of Government, NGOs, CBOs and individuals in dealing with health needs of GBV;	Conduct Training, Training of Trainers on health sector response to GBV	GBV referral linkages established at all levels;	Reports of the Ministry of Health and relevant partners  Standardized; Health Training modules;	MoH  Partners engaged in health related programmes	
	Victims of GBV receive the needed medical attention and medication;	Increased availability of counseling services on GBV, STDs and HIV/AIDS	Incorporate aspects of clinical management of GBV in the curricula of health and medical professionals  Provide logistic support, equipment and medical supplies  Strengthening health facilities to deal with GBV cases				

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<b>STRATEGIC AREA OF FOCUS:</b> Build capacity of relevant sectors (health, legal/justice, education, welfare for the development and implementation of comprehensive services for the management and care of survivors/victims of GBV in order to address immediate consequences as well as to reduce the likelihood of long-term negative effects related to victimization, as well as survivors'/victims' vulnerabilities to future incidents of violence.							
<b>OBJECTIVES:</b> 3. Build capacity of the relevant sectors (Health, Education, Social welfare, the judiciary and the justice system, NGOs) for mainstreaming GBV prevention and case management interventions in their policies, plans and programmes. 4. Offer comprehensive and ethical response to survivors/victims.							
Total budget for this thematic area							US\$
OUTCOMES	OUTPUTS	ACTIVITIES	INDICATORS	MEANS OF VERIFICATION	RESPONSIBLE PARTIES	Time frame	Budget US\$
<p>Medical referral centres are available and equipped to handle GBV cases;</p> <p>Victims of GBV receive the needed medical attention and medication;</p>	<p>Increased capacities of Government, NGOs, CBOs and individuals in dealing with health needs of GBV;</p> <p>Increased availability of counseling services on GBV, STDs and HIV/AIDS</p>	<p>Refurbish and equip health centers and clinics</p> <p>Provide Logistics support for health facilities;</p> <p>Provide equipment and medical supplies to provide quality care to GBV survivors.</p> <p>Provision of rape kits to health centers: direct and free medical treatment for victims nationwide including treatment or prophylaxis for sexually transmitted infections, post-exposure prophylaxis for HIV when indicated and when the victim reports on time (72 hours following rape), provision of emergency contraception, provision of vaccines (Hepatitis B, Tetanus Vaccine).</p>	<p>GBV referral linkages established at all levels;</p>	<p>Reports of the Ministry of Health and relevant partners</p> <p>Standardized; Health Training modules;</p>	<p>MoH</p> <p>Partners engaged in health related programmes</p>		



<b>NATIONAL ACTION PLAN FOR THE ELIMINATION OF GENDER-BASED VIOLENCE 2008-2013</b>							
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<b>STRATEGIC AREA OF FOCUS: Build capacity of relevant sectors (health, legal/justice, education, welfare for the development and implementation of comprehensive services for the management and care of survivors/victims of GBV in order to address immediate consequences as well as to reduce the likelihood of long-term negative effects related to victimization, as well as survivors'/victims' vulnerabilities to future incidents of violence.</b>							
<b>OBJECTIVES: 3.</b> Build capacity of the relevant sectors (Health, Education, Social welfare, the judiciary and the justice system, NGOs) for mainstreaming GBV prevention and case management interventions in their policies, plans and programmes. <b>4.</b> Offer comprehensive and ethical response to survivors/victims.							
<b>Total budget for this thematic area</b>							<b>US\$</b>
<b>OUTCOMES</b>	<b>OUTPUTS</b>	<b>ACTIVITIES</b>	<b>INDICATORS</b>	<b>MEANS OF VERIFICATION</b>	<b>Responsible parties</b>	<b>Time frame</b>	<b>Budget US\$</b>
<b>HEALTH</b>							
Medical referral centres are available and equipped to handle GBV cases;	Increased capacities of Government, NGOs, CBOs and individuals in dealing with health needs of GBV;	Identify health facilities for enhancement and conduct focus trainings to handle cases of GBV	GBV referral linkages established at all levels;	Reports of the Ministry of Health and relevant partners  Standardized; Health Training modules;	MoH  Partners engaged in health related programmes		
		Provide counseling support services in clinical and referral hospitals					
		Recruit, train and resource counselors/psychologists for clinical and referral hospitals.					
		Capacity Strengthening and enhancement (Both Short/Medium term)					
Victims of GBV receive the needed medical attention and medication;	Increased availability of counseling services on GBV, STDs and HIV/AIDS						

<b>NATIONAL ACTION PLAN FOR THE ELIMINATION OF GENDER-BASED VIOLENCE 2008-2013</b>							
<b>GOAL: The goal of the National Action Plan is to eliminate gender-based violence (GBV) in a holistic, systematic, complementary and comprehensive manner through multi-sectoral, and multi-dimensional approach, and to provide appropriate care and services to survivors of GBV.</b>							
<b>STRATEGIC AREA OF FOCUS 3: Capacity Building of relevant sectors (health, legal/justice, education, welfare for the development and implementation of comprehensive services for the management and care of survivors/victims of GBV</b>							
<b>OBJECTIVES: 3. Build capacity of the relevant sectors (Health, Education, Social welfare, the judiciary and the justice system, NGOs) for mainstreaming GBV prevention and case management interventions in their policies, plans and programmes. 4. Offer comprehensive and ethical response to survivors/victims.</b>							
<b>Total budget for this thematic area</b>							<b>US\$</b>
<b>OUTCOMES HEALTH</b>	<b>OUTPUTS</b>	<b>ACTIVITIES Short-term intervention (1-2 years)</b>	<b>INDICATORS</b>	<b>MEANS OF VERIFICATION</b>	<b>Responsible parties</b>	<b>Time frame</b>	<b>Budget US\$</b>
Medical referral centres are available and equipped to handle GBV cases;	Increased capacities of Government, NGOs, CBOs and individuals in dealing with health needs of GBV;	Strengthen the capacity of health workers through appropriate training to respond to GBV cases including medical services and forensic evidence for GBV victims in all provinces;	GBV referral linkages established at all levels;	Reports of the Ministry of Health and relevant partners  Standardized; Health Training modules;	Ministry of Health (MoH)  Partners engaged in health related programmes		
Victims of GBV receive the needed medical attention and medication;	Increased availability of counseling services on GBV, STDs and HIV/AIDS	Training workshops District and community health care workers/traditional healers on response to GBV in all provinces; Training workshops for medical counselors and social workers to provide support for victims.					

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<b>STRATEGIC AREA OF FOCUS: Capacity building for Security and Protection</b>							
<b>OBJECTIVES 3:</b> Build capacity of the relevant sectors (Health, Education, Social welfare, the judiciary and the justice system, NGOs) for mainstreaming GBV prevention and case management interventions in their policies, plans and programmes.							
4. Offer comprehensive and ethical response to survivors/victims.							
<b>Total Budget for this thematic area</b>				<b>US\$</b>			
<b>OUTCOME</b>	<b>OUTPUTS</b>	<b>ACTIVITIES</b>	<b>INDICATORS</b>	<b>MEANS OF VERIFICATION</b>	<b>RESPONSIBLE PARTNERS</b>	<b>Time frame</b>	<b>Budget US\$</b>
Regular assessments are undertaken on level of security and protection for women and girls;  There is massive support among media, public and private and organizations on campaigning against GBV;	Increased awareness of the available security and protection provisions for women and children;  Increased and institutionalized school and peer education programs on GBV;  Enhance capacity of local traditional systems to support and protect victims of GBV	Conduct assessments and surveys – (in areas not yet reached by previous surveys/assessments)	Number of GBV cases reported by communities	Reports of the Victim Support Unit of the Community Service Directorate (Police Department)	Victim Support Unit of the Community Service Directorate (Police Department)		
		Identify and analyze existing reports on security/protection facilities;	Assessments undertaken with recommendations - these should only be undertaken in areas not yet reached.	Reports from the Ministry of Education	Ministry of Education		
		Identify and analyze existing reports on security/protection facilities;	Radio, television and public organizations participating on campaigns on citizen protection acts	Reports of the Ministry of Justice  Consolidated annual reports from GIDD on GBV-NAP  M&E Reports	Ministry of Justice  GIDD  NGOs' specific activity reports		

**NATIONAL ACTION PLAN FOR THE ELIMINATION OF GENDER-BASED VIOLENCE 2008-2013**

**GOAL:** The goal of the National Action Plan is to eliminate gender-based violence (GBV) in a holistic, systematic, complementary and comprehensive manner through multi-sectoral, and multi-dimensional approach, and to provide appropriate care and services to survivors of GBV.

**STRATEGIC AREA OF FOCUS: Security and Protection**

**OBJECTIVES:** Build capacity of the relevant sectors (Health, Education, Social welfare, the judiciary and the justice system, NGOs) for mainstreaming GBV prevention and case management interventions in their policies, plans and programmes.

**Total Budget for this thematic area**

<b>OUTCOME</b>	<b>OUTPUTS</b>	<b>ACTIVITIES Short-term intervention (1-2 years)</b>	<b>INDICATORS</b>	<b>MEANS OF VERIFICATION</b>	<b>RESPONSIB LE PARTNERS</b>	<b>Time frame</b>	<b>Budget US\$</b>
School pupils are participating in peer counseling and education programs;	Increased and improved community level security and detention systems;	Assessment of public institution, civil society including schools NGOs and communities;	Number of teachers trained in and applying their skills on GBV detection and prevention	Reports of the Victim Support Unit of the Community Service Directorate (Police Department)	CIDD identifying the appropriate institutions  Victim Support Unit of the Community Service Directorate (Police Department) Ministry of Youth  Ministry of Education  Ministry of Justice  GIDD NGOs' specific activity reports		
	Available safe homes for survivors of GBV building on existing initiatives;	Assess the status of existing correctional facilities in the country.	Number of school pupils receive life skills in reproductive health and GBV	Reports from the Ministry of Education  Reports of the Ministry of Justice			
Schools in include reproductive health and GBV in their life skills manual as a module;	Increased number of safe homes in urban and rural areas	Create awareness and advocate for effective protection of women and children	Number of youth friendly centers operationalized	Consolidated annual reports from GIDD on GBV-NAP  M&E Reports			

<b>NATIONAL ACTION PLAN FOR THE ELIMINATION OF GENDER-BASED VIOLENCE 2008-2013</b>							
<b>GOAL: The goal of the National Action Plan is to eliminate gender-based violence (GBV) in a holistic, systematic, complementary and comprehensive manner through multi-sectoral, and multi-dimensional approach, and to provide appropriate care and services to survivors of GBV.</b>							
<b>STRATEGIC AREA OF FOCUS: Security and Protection</b>							
<b>OBJECTIVES: Build capacity of the relevant sectors (Health, Education, Social welfare, the judiciary and the justice system, NGOs) for mainstreaming GBV prevention and case management interventions in their policies, plans and programmes.</b>							
<b>Total Budget for this thematic area</b>						<b>US\$ 330,000</b>	
<b>OUTCOME</b>	<b>OUTPUTS</b>	<b>ACTIVITIES</b>	<b>INDICATORS Short-term intervention (1-2 years)</b>	<b>MEANS OF VERIFICATION</b>	<b>RESPONSIBLE PARTNERS</b>	<b>Time frame</b>	<b>Budget US\$</b>
Designated safe havens are available for the rehabilitation of GBV survivors.	Standardized monitoring and evaluation tools developed.	Identify other (including traditional) means of information-sharing and utilize them	Level of improvement in police systems and procedures in community policing	Reports of the Victim Support Unit of the Community Service Directorate (Police Department)  Reports from the Ministry of Education  Reports of the Ministry of Justice  Consolidated annual reports from GIDD on GBV-NAP  M&E Reports	CIDD identifying the appropriate institutions  Victim Support Unit of the Community Service Directorate (Police Department)  Ministry of Youth  Ministry of Education  Ministry of Justice  GIDD  NGOs' specific activity reports		
		Create public awareness on citizens protection acts and instruments including the penal code amendment Law;					
		Advocate for compliance and implementation of international instruments (Convention on the Elimination of all forms of Discrimination Against Women (CEDAW)).					

<b>NATIONAL ACTION PLAN FOR THE ELIMINATION OF GENDER-BASED VIOLENCE 2008-2013</b>							
<b>GOAL: The goal of the National Action Plan is to eliminate gender-based violence (GBV) in a holistic, systematic, complementary and comprehensive manner through multi-sectoral, and multi-dimensional approach, and to provide appropriate care and services to survivors of GBV.</b>							
<b>STRATEGIC AREA OF FOCUS: Security and Protection</b>							
<b>OBJECTIVES:</b>							
<b>Total budget for this thematic area</b>						<b>US\$</b>	
<b>OUTCOME</b>	<b>OUTPUTS</b>	<b>ACTIVITIES</b>	<b>INDICATORS Short-term intervention (1-2 years)</b>	<b>MEANS OF VERIFICATION</b>	<b>RESPONSIBLE PARTNERS</b>	<b>Time frame</b>	<b>Budget US\$</b>
There is massive support among media, public and private organizations on campaigning against GBV;	Increased and institutionalized school and peer education programs on GBV;  Enhance capacity of local traditional systems to support and protect victims of GBV	Capacity enhancement of schools and other learning institutions  Train local traditional systems, groups and organizations to enforce protection and security systems against GBV;  Train the Zambia National Police on judicial/law enforcement and correctional centers personnel on international human rights standards and applicable national laws;  Strengthen existing NGOs such as YWCA to scale up safe homes  Strengthen the logistical capacity of the VSUs to enable them to provide timely and efficient services to the communities and the victim/survivors of GBV( at least one motorcycle for each VSU)	Number of Schools capacitated in GBV and related issues  Reporting on GBV by community members on GBV cases increased  Number of grass roots actions initiated and implemented annually  Number of GBV cases responded to by the VSO annually	Reports from the Ministry of Education  Police and Court records  Activity report from supervising agencies  Reports of the VSU	MoE  VSU  GIDD  NGOs		

NATIONAL ACTION PLAN FOR THE ELIMINATION OF GENDER-BASED VIOLENCE 2008-2013							
GOAL: The goal of the National Action Plan is to eliminate gender-based violence (GBV) in a holistic, systematic, complementary and comprehensive manner through multi-sectoral, and multi-dimensional approach, and to provide appropriate care and services to survivors of GBV.							
STRATEGIC AREA OF FOCUS: Security and Protection							
OBJECTIVES:							
Total budget for this thematic area						US\$	
OUTCOME	OUTPUTS	ACTIVITIES	INDICATORS Short-term intervention (1-2 years)	MEANS OF VERIFICATION	RESPONSIBLE PARTNERS	Time frame	Budget US\$
Designated safe havens are available for the rehabilitation of GBV survivors.	Available safe homes for survivors of GBV building on existing initiatives;	Establish, staff and equip Victim Support Units in each province/district	Number of functional VSUs	Reports of the Victim Support Unit of the Community Service Directorate (Police Department)	CIDD identifying the appropriate institutions		
		Create link direct link between VSUs and safe homes;	Number of GBV cases responded to, processed and adjudicated	Reports from the Ministry of Education	Victim Support Unit of the Community Service Directorate (Police Department)		
	Increased number of safe homes in urban and rural areas	Establish prevention/security mechanisms and monitoring systems to identify risks in communities for GBV to occur;	Average length of time between an identified GBV case and the pronouncement of verdict	Reports of the Ministry of Justice	Ministry of Youth Ministry of Education Ministry of Justice		
	Identify existing initiatives of safe homes and enhance their capacities			Consolidated annual reports from GIDD on GBV-NAP M&E Reports	GIDD NGOs' specific activity reports		

<b>NATIONAL ACTION PLAN FOR THE ELIMINATION OF GENDER-BASED VIOLENCE 2008-2013</b>							
<b>GOAL: The goal of the National Action Plan is to eliminate gender-based violence (GBV) in a holistic, systematic, complementary and comprehensive manner through multi-sectoral, and multi-dimensional approach, and to provide appropriate care and services to survivors of GBV.</b>							
<b>STRATEGIC AREA OF FOCUS: Security and Protection</b>							
<b>OBJECTIVES:</b>							
<b>Total budget for this thematic area</b>						<b>US\$</b>	
<b>OUTCOME</b>	<b>OUTPUTS</b>	<b>ACTIVITIES</b>	<b>INDICATORS</b>	<b>MEANS OF VERIFICATION</b>	<b>RESPONSIBLE PARTNERS</b>	<b>Time frame</b>	<b>BudgetUS\$</b>
There is massive support among media, public and private organizations on campaigning against GBV;	Increased and institutionalized school and peer education, and youth programs on GBV;	Establish national format of medical record for GBV survivor for all levels of Health Centre service	Number of Schools capacitated in GBV and related issues	Reports from the Ministry of Education	MoE		
		Establish communication and reporting of GBV cases within communities	Reporting on GBV by community members on GBV cases increased	Police and Court records	VSU		
	Enhance capacity of local traditional systems to support and protect victims of GBV	Establish youth centers and organize youth programmes against GBV and (Both short/medium term)	Number of grass roots actions initiated and implemented annually	Activity report from supervising agencies	GIDD		
	Youth centers established and equipped and resourced;		Number of GBV cases responded to by the VSO annually	Reports of the VSU	NGOs		



NATIONAL ACTION PLAN FOR THE ELIMINATION OF GENDER-BASED VIOLENCE 2008-2013							
GOAL: The goal of the National Action Plan is to eliminate gender-based violence (GBV) in a holistic, systematic, complementary and comprehensive manner through multi-sectoral, and multi-dimensional approach, and to provide appropriate care and services to survivors of GBV.							
STRATEGIC AREA OF FOCUS: Security and Protection							
OBJECTIVES:							
Total budget for this thematic area						US\$	
OUTCOME	OUTPUTS	ACTIVITIES	INDICATORS	MEANS OF VERIFICATION	RESPONSIBLE PARTNERS	Time frame	Budget US\$
There is massive support among media, public and private organizations on campaigning against GBV;	Increased and institutionalized school and peer education , and youth programs on GBV;	Youth centered activities developed.	Number of Youth Centers developed and capacitated in GBV prevention and related issues	Reports from the Ministry of Education	MoE		
		Conduct school protection and education programs (Both short/medium term)					
	Enhance capacity of local traditional systems to support and protect victims of GBV	Child protection awareness and sensitization in schools;	Number of Schools capacitated in GBV prevention and related issues	Reports fro NGO specific activities	MoH		
		Support Education of girls'/boys' and youth programmes on GBV prevention and (Peer Educators);	Reporting on GBV by community members on GBV cases increased	Activity report from supervising agencies	GIDD		
			Number of grass roots actions initiated and implemented annually	GIDD consolidated annual reports	NGOs		
				M&E reports			

<b>NATIONAL ACTION PLAN FOR THE ELIMINATION OF GENDER-BASED VIOLENCE 2008-2013</b>								
<b>GOAL: The goal of the National Action Plan is to eliminate gender-based violence (GBV) in a holistic, systematic, complementary and comprehensive manner through multi-sectoral, and multi-dimensional approach, and to provide appropriate care and services to survivors of GBV.</b>								
<b>STRATEGIC AREA OF FOCUS: Security and Protection</b>								
<b>OBJECTIVES:</b>								
<b>Total budget for this thematic area</b>							<b>US\$</b>	
<b>OUTCOME</b>	<b>OUTPUTS</b>	<b>ACTIVITIES</b>	<b>INDICATORS</b>	<b>MEANS OF VERIFICATION</b>	<b>RESPONSIBLE PARTNERS</b>	<b>Time frame</b>	<b>Budget US\$</b>	
There is massive support among media, public and private organizations on campaigning against GBV;	Increased and institutionalized school and peer education , and youth programs on GBV;  Enhance capacity of local traditional systems to support and protect victims of GBV	Institutionalize school debates and competitions on GBV and prevention and advocacy;	Number of Youth Centers developed and capacitated in GBV prevention and related issues	Reports from the Ministry of Education	MoE			
		Develop training manual for schools on gender-related issues including GBV						Number of Schools capacitated in GBV prevention and related issues Reporting on GBV by community members on GBV cases increased
		Advocate for the mainstreaming of gender/GBV issues in the school curricula	Number of grass roots actions initiated and implemented annually	Activity report from supervising agencies  GIDD consolidated annual reports  M&E reports	GIDD			
		Training of teachers and educational institutions on how to effectively tackle sexual and gender based violence in schools and public institutions;						

NATIONAL ACTION PLAN FOR THE ELIMINATION OF GENDER-BASED VIOLENCE 2008-2013							
GOAL: The goal of the National Action Plan is to eliminate gender-based violence (GBV) in a holistic, systematic, complementary and comprehensive manner through multi-sectoral, and multi-dimensional approach, and to provide appropriate care and services to survivors of GBV.							
STRATEGIC AREA OF FOCUS: Security and Protection							
OBJECTIVES:							
Total budget for this thematic area							US\$
OUTCOME	OUTPUTS	ACTIVITIES	INDICATORS Short-term intervention (1-2 years)	MEANS OF VERIFICATION	RESPONSIBLE PARTNERS	Time frame	Budget US\$
There is massive support among media, public and private organizations on campaigning against GBV;	Increased and institutionalized school and peer education , and youth programs on GBV;  Enhance capacity of local traditional systems to support and protect victims of GBV	- MOE to develop code of conduct for teacher school administration to reflect GBV  -Revise school curriculum to reflect gender equality and ensure gender sensitivity; - Train PTAs on Code of Conduct Establish monitoring systems to identify risks in schools and prevent opportunities for teachers to sexually exploit or abuse students. - Establish youth centers and organize youth programmes against GBV and (Both short/medium term)  - Conduct school protection and education programs (Both short/medium term)	Number of Youth Centers developed and capacitated in GBV prevention and related issues  Number of Schools capacitated in GBV prevention and related issues Reporting on GBV by community members on GBV cases increased  Number of school protection and education programmes initiated and implemented	Reports from the Ministry of Education  Reports fro NGO specific activities  Activity report from supervising agencies  GIDD consolidated annual reports  M&E reports	MoE  MoH  GIDD  NGOs		

**NATIONAL ACTION PLAN FOR THE ELIMINATION OF GENDER-BASED VIOLENCE 2008-2013**

**GOAL: The goal of the National Action Plan is to eliminate gender-based violence (GBV) in a holistic, systematic, complementary and comprehensive manner through multi-sectoral, and multi-dimensional approach, and to provide appropriate care and services to survivor**

**STRATEGIC AREA OF FOCUS: Coordination and Implementation of the National Action Plan**

**OBJECTIVES:**

**TOTAL BUDGET FOR THIS STRAGTIC AREA IS**

**US\$**

OUTCOME	OUTPUTS	ACTIVITIES	INDICATORS	MEANS OF VERIFICATION	RESPONSIBLE PARTNERS	Time frame	Budget US\$
<p>Gender and Development Division systematically and proficiently coordinating monitoring and evaluating the implementation of GBV interventions nationwide;</p> <p>Multi-sectoral and inter-agency procedures, practices and reporting on GBV are established;</p> <p>Effective Information Management Systems (IMS) for GBV available and used in Zambia</p> <p>Data on GBV stored in data bank, used and updated regularly</p>	<p>Strengthened Gender and Development Division (GIDD) and its Taskforce/Technical Committee and operationalized in all provinces and districts</p> <p>Improved information and data management systems on GBV with GBV included in other National and local authority reporting systems;</p> <p>M&amp;E framework and standardized tools compatible with other Monitoring and Evaluation framework (PRS-GBV developed and disseminated</p> <p>Improved Inter-agency, inter-governmental and inter-ministerial partnerships on GBV prevention, management and care;</p>	<p>- Provide additional specialist staff to support the implementation of the NAP</p> <p>- Establish mechanisms for ensuring complimentarily through mapping, checking and controlling replication and overlapping of projects and activities among agencies and partners through effective communication on GBV activities and work plans;</p> <p>-Purchasing of data processing equipment and facilities for National, Province and Community Networks;</p> <p>-Establish stronger networks and partnerships among UN Agencies, INGOs and Local NGOs;</p> <p>- Organize Community organization and mobilization activities;</p>	<p>National, GIDD and relevant sectoral budgets increased to implement the GBV-NAP</p> <p>Multi-sectoral and inter-agency procedures, practices, reporting forms established in writing and agreed by all sectors</p> <p>Information Management Systems (IMS) for GBV in Zambia in place</p> <p>Use of common indicators GBV data bank, templates established, used and updated regularly</p>	<p>National Budget</p> <p>GIDD specific budget</p> <p>GIDD annual Reports</p> <p>M&amp;E Reports</p>	<p>GoRZ-MoFFED</p> <p>GIDD</p> <p>Government and private development sectors</p> <p>UNCT and bilateral agencies</p>		

**NATIONAL ACTION PLAN FOR THE ELIMINATION OF GENDER-BASED VIOLENCE 2008-2013**

**GOAL: The goal of the National Action Plan is to eliminate gender-based violence (GBV) in a holistic, systematic, complementary and comprehensive manner through multi-sectoral, and multi-dimensional approach, and to provide appropriate care and services to survivor**

**STRATEGIC AREA OF FOCUS: Coordination and Implementation of the National Action Plan**

**OBJECTIVES:**

**Total Budget for this thematic area**

**US\$**

OUTCOME	OUTPUTS	ACTIVITIES	INDICATORS	MEANS OF VERIFICATION	RESPONSIBLE PARTNERS	Time frame	BudgetUS\$
<p>M&amp;E framework developed and adapted;</p> <p>Data on GBV stored in data bank, used and updated regularly;</p> <p>Multi-sectoral and inter-agency procedures, practices and reporting on GBV are established;</p>	<p>Extended and strengthened GBV networks to at all local administrative and community levels with linkages to national level</p> <p>Acceptable Code of Conduct for GBV established and enforced</p> <p>Improved inter-agency coordination, management and monitoring systems on GBV</p> <p>Increased participation of decision makers of relevant sectors and actors in GBV activities and programmes;</p>	<p>Ensure Information, ideas and experience-sharing among agencies and partners at all levels;</p>	<p>Community information centers established and operational</p>	<p>GIDD specific budget</p>	<p>GoRZ</p> <p>GIDD</p> <p>Government and private development sectors</p> <p>UNCT and bilateral agencies</p>		
		<p>Strengthen networks and partnerships among community levels networks;</p>	<p>M&amp;E framework developed and adopted</p>	<p>GIDD annual Reports</p>			
		<p>Conduct information-sharing/best practices workshops between stakeholders to enhance partnerships to tackle GBV (Both short/medium term)</p>	<p>Gender and child sensitive tools and indicators developed and adopted</p>	<p>M&amp;E Report</p>			
		<p>Develop gender/child sensitive monitoring indicators;</p>	<p>Number of joint activities/networking meetings organized</p>				

NATIONAL ACTION PLAN FOR THE ELIMINATION OF GENDER-BASED VIOLENCE 2008-2013							
GOAL: The goal of the National Action Plan is to eliminate gender-based violence (GBV) in a holistic, systematic, complementary and comprehensive manner through multi-sectoral, and multi-dimensional approach, and to provide appropriate care and services to survivor							
STRATEGIC AREA OF FOCUS: Coordination and Implementation of the National Action Plan							
OBJECTIVES:							
Total Budget for this thematic area							
OUTCOME	OUTPUTS	ACTIVITIES	INDICATORS	MEANS OF VERIFICATION	RESPONSIBLE PARTNERS	Time frame	Budget US\$
M&E framework developed and adapted;  Data on GBV stored in data bank, used and updated regularly;  Multi-sectoral and inter-agency procedures, practices and reporting on GBV are established;	Extended and strengthened GBV networks at all local administrative and community levels with linkages to national level;	Decentralization of supervision on GBV at community levels;	Number of joint field visits to local authority levels	GIDD annual Reports  M&E Report	GIDD  Government and private development sectors. NGO  UNCT and bilateral agencies		
	Acceptable Code of Conduct for GBV established and enforced;  Improved inter-agency coordination, management and monitoring systems on GBV Increased participation of decision makers of relevant sectors and actors in GBV activities and programmes;	Train partners and stakeholders in the use of M & E tools;  Establish and enforce acceptable code of conduct for GBV actors;	Number of GBV related networks and taskforce established and functioning Proportion of key actors who participate in regular GBV working group meet				

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<sup>i</sup> World Health Organization (WHO), Violence Against Women Information Pack: A priority Health Issues, 3. Available from [www.who.int/frh-whd/GBV/infopack/English/GBV\\_infopack.htm](http://www.who.int/frh-whd/GBV/infopack/English/GBV_infopack.htm)

<sup>ii</sup> Office of the United Nations High Commissioner for Human Rights (OHCHR), Declaration on the Elimination of Violence Against Women (December 1993).

<sup>iii</sup> Morrison, Andrew, and María Beatriz Orlando. 2005. "The Costs and Impacts of Gender-Based Violence in Developing Countries: Methodological Considerations and New Evidence." Washington, D.C.:World Bank Working Paper Series.

<sup>iv</sup> Unifem website

<sup>v</sup> Human Rights Watch 2002 *Suffering in Silence: The Links Between Human Rights Abuses and HIV Transmission to Girls in Zambia* p53-54

<sup>vi</sup> This symposium was financially and technically supported by UNICEF. One of the results of this gathering was the formation of the Gender Based Violence partnership.

<sup>vii</sup> Reed-Hamilton, S. 2004. *Gender-based Violence Program Strategy: From Service Delivery to Social Change*. New York: International Rescue Committee.

<sup>viii</sup> United Nations General Assembly. 1948. *Universal Declaration of Human Rights*. Resolution 217(A) of 10 December, 1948. Geneva: United Nations.

<sup>ix</sup> IASC, op. cit. (see note 4).

<sup>x</sup> United Nations General Assembly. 1948. *Universal Declaration of Human Rights*. Resolution 217(A) of 10 December, 1948. Geneva: United Nations.

<sup>xi</sup> Bott, Sarah, Andrew Morrison and Mary Ellsberg. 2005. *Preventing and Responding to Gender-Based Violence in Middle- and Low-Income Countries: a Global Review and Analysis*. World Bank Policy Research Working Paper No. 3618.

<sup>xii</sup> Components of the Zambia NAP developed from NAPs from the following countries: Zambia, Tanzania, Zimbabwe, and Sri Lanka,