

No Safe Place: A Lifetime of Violence for Conflict-Affected Women and Girls in South Sudan

POLICY BRIEF



Kate Geraghty/CARE/Fairfax media

Violence against women and girls (VAWG) is a serious human rights violation and an urgent global health and security challenge. It has been recognised as a key obstacle to development in the 2030 Sustainable Development Goals (SDGs). Affecting 35% of women globally, VAWG is both under-reported and under-addressed.¹ In South Sudan, VAWG is widespread and while it predates the decades of conflict the country has endured, the on-going violence has exacerbated an already serious issue. Beginning with the civil war in 2013, South Sudan has been in a constant state of crisis, made more acute by extremely high levels of food insecurity and subsequent risk of famine and starvation. All of these factors have put women and girls at even greater risk of violence from both partners and non-partners.

Understanding the nature and impact of the many different types of VAWG in conflict is crucial for improving donor and government priorities and for designing effective and appropriate responses that support women and girls. Further understanding the complex relationship between VAWG and conflict is also vital for the achievement of the SDGs, particularly Goal 5 which includes targets on

eliminating VAWG. While previously the international community had anecdotal information and data from small-scale research and VAWG programming, there was little rigorous evidence of women's and girls' experience of violence in South Sudan. The media has focused primarily on the use of militarised rape and other forms of non-partner sexual violence directly related to the on-going conflict. While this is a severe problem, it is only one part of the story. Missing from the narrative is the violence that women and girls face at the hands of their husbands and partners—intimate partner violence (IPV).

This brief highlights research aimed at filling substantial gaps in understanding of VAWG in humanitarian settings, including whether or not there is a correlation between increased national conflict and VAWG. Key findings from this in-depth, quantitative and qualitative research conducted in areas of South Sudan inform specific recommendations that policymakers, UN agencies and donors should adopt to effectively prevent and respond to partner and non-partner VAWG during times of humanitarian crisis and conflict.

¹ Devries KM, Mak JY, Garcia-Moreno C, Petzold M, Child JC, Falder G, Lim S, Bacchus LJ, Engell RE, Rosenfeld L, Pallitto C. The global prevalence of intimate partner violence against women. *Science*. 2013 Jun 28;340(6140):1527-8.

The Research

As part of the *What Works to Prevent Violence against Women and Girls* programme (funded by the UK Government's Department for International Development),² the International Rescue Committee (IRC), the Global Women's Institute at the George Washington University (GWI) and CARE International UK sought to obtain rigorous data on the prevalence, forms, and drivers of VAWG in South Sudan. Researchers interviewed individuals and conducted focus group discussions in the city of Juba, rural areas in Juba County, Rumbek Town, and the Bentiu and Juba Protection of Civilian (PoC) camps to get a representative cross-section that included diverse populations and multiple environments. By working with local partners trained to accurately and sensitively gather data from women, men, girls and boys across multiple diverse settings, the researchers were able to provide robust quantitative evidence demonstrating the widespread and severe nature of both non-partner and intimate partner violence. The evidence tells a clear story of the lifetime of violence that women endure and the devastating consequences for their health and wellbeing.³

KEY FINDINGS

Prevalence of VAWG is among the highest in the world across all study locations^{4,5}. South Sudanese women and girls are subjected to violence throughout their lifetime.

Fifty percent (in the Juba PoCs) to 65% (in Juba and Rumbek) of female respondents experienced either physical or sexual violence from a partner or non-partner in the course of their lifetimes and around one in three women reported they had suffered non-partner sexual assault at least once in their lifetime. Among those who had endured sexual violence, over half of respondents experienced the first incident before their 20th birthday. This was even higher for women and girls who were living in the Juba PoCs

Intimate partner violence was the most common form of violence reported by women and girls.

While at least half of the women and girls in the PoCs and almost 60% in Juba City had experienced IPV during their lifetime, in Rumbek IPV was experienced by almost 75% of women. Patriarchal societal norms that promote gender inequality (including men minimising the occurrence of violence, and both men and women accepting the use of violence) were found to be common in all study sites. Discriminatory practices such as bride price, child and forced marriage and polygamy are also common in these areas of South Sudan.

For women and girls in South Sudan, there is a direct relationship between experiences of conflict and its effect on prevalence of VAWG, including IPV.

Seventy percent or more of non-partner sexual assaults occurred during a direct experience of conflict (e.g. displacement, abduction or an attack on a survivor's village). Women in the PoCs—who have often been displaced several times—were twice as likely as women in Juba City and Rumbek to have experienced multiple acts of IPV, and women who had directly experienced a conflict event (attack, injury, etc.) reported increased brutality and frequency of assaults due to the chaos and insecurity of war.

Survivors of violence in South Sudan often do not seek help from either formal or informal structures, or are unable to access these services.

Respondents reported that stigma against survivors of VAWG is high and women have little recourse, particularly for cases of IPV. Lack of confidentiality and poor quality services also provided significant barriers to access. Women and girls interviewed were therefore unlikely to tell others about their experiences of violence or to seek help from health, legal, or psychosocial services unless they deemed the violence as 'severe'.

²See *What Works to Prevent Violence against Women and Girls*, <http://www.whatworks.co.za/about/about-what-works>.

³For more information on the research and detailed results, please see the main report, *The Global Women's Institute and International Rescue Committee. (2017). No Safe Place: A Lifetime of Violence for Conflict-Affected Women and Girls in South Sudan*. Washington DC: George Washington University and London: IRC.

⁴Garcia-Moreno C, Jansen HA, Ellsberg M, Heise L, Watts CH, WHO Multi-country Study on Women's Health and Domestic Violence against Women Study Team. Prevalence of intimate partner violence: Findings from the WHO multi-country study on women's health and domestic violence. *Lancet*. 2006;368(9543):1260-1269.

Policy Recommendations

This study confirms the devastating levels of violence experienced by women and girls in South Sudan. In addition to ensuring robust funding for overall foreign assistance and humanitarian aid to meet today's unprecedented levels of displacement, there is an urgent need for a multilateral, targeted and long-term response to VAWG in development and humanitarian settings. In order to achieve the SDGs and protect, support and empower women and girls in conflict and humanitarian crises donors, policymakers and UN agencies need to:

Prioritise funding for specialised women's and girls' protection and empowerment programmes from the earliest stage of crisis.

This research has confirmed the high levels of violence experienced by women and girls in South Sudan during times of conflict and humanitarian crisis; research suggests that this is not unique and similar situations exist in other conflict settings. Dedicated funding should be immediately available at the onset of a crisis through bilateral and pooled funding mechanisms to ensure specialised VAWG services are available to meet the health, psychosocial and economic needs of survivors of VAWG.

Allocate additional funding to support longer-term VAWG programming, including in pre-crisis development and resilience strategies.

Short-term response programmes delivered during the initial phase of conflict do not address the need for longer-term prevention and empowerment efforts that address deeper, long-standing attitudes, behaviours and norms that underpin VAWG. Funding must address sustainable behavioural change and social norms transformations to make an impact on reducing and preventing VAWG permanently.

Recognise IPV as a specific and significant concern within the humanitarian agenda.

While much of the world's attention has focused on conflict-related, non-partner sexual violence, this research adds a new dimension to the picture of VAWG in South Sudan – that women and girls experience multiple and compounding forms of IPV that is exacerbated during times of conflict. Donor and UN humanitarian strategies, plans and decision making must explicitly include IPV as a human rights concern warranting specialised, targeted attention and programming.



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Develop and/or adapt VAWG policies and strategies to ensure they meet global commitments.

Global frameworks, such as the *Call to Action on Protection from Gender-based Violence in Emergencies*; the World Humanitarian Summit's *Five Core Commitments to Women and Girls*; the SDGs; the Grand Bargain; the Women, Peace and Security Agenda; and the Real-Time Accountability Partnership all include specific attention to VAWG and/or localising response efforts across the humanitarian-to-development continuum. Donors and policymakers must develop and adapt policies and strategies to fulfil their obligations under these frameworks to eradicate VAWG. For example, donors should make funding allocations across different sectors contingent upon full implementation of the *IASC Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action*⁶, and revise policies and strategies to promote and strengthen local partnerships.

Invest in specific programmes addressing the unique needs of adolescent girls.

In South Sudan, adolescent girls are experiencing considerable amounts of violence, yet their specific needs are often overlooked by current programming approaches and girls often struggle to access support from key institutions such as psychosocial, health and legal services. More effort is needed to identify entryways and innovative approaches for adolescents to access existing VAWG prevention and response services, including targeting teen mothers accessing health services during pregnancy, creating adolescent spaces in women-safe space programming, and using technology to develop different ways of delivering programming, e.g. mobile services.

Support women's groups and the women's movement to build local capacity to improve the status of women.

Women's groups are an important structure through which women can be meaningfully engaged in programming and decision-making, leading to culturally appropriate VAWG prevention and response programming for maximum impact. In particular, emerging women's groups in South

Sudan need support to create sustainable change within the country.

Promote the integration of programmes addressing VAWG and community-level violence with long-term peacebuilding.

Peace and prosperity in South Sudan and other conflict affected countries cannot be sustained without an intentional focus on women's rights and addressing violence against women and girls. As mandated by UNSCR 1325 on women, peace and security, peacebuilding efforts must include a focus on preventing, mitigating and responding to VAWG. Given the findings from this research, donors should include South Sudan as a priority for developing their own 1325 National Action Plans and work with the Government of South Sudan to report on their 1325 National Action Plan 2015-2020.



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Violence Against Women and Girls
in Conflict and Humanitarian Crises

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⁶For more information, please see <http://gbvguidelines.org/en/home/>.