

GENDER BASED VIOLENCE

The Impact of The Tamar Campaign in
The Great Lakes and Horn of Africa



Burundi
DR Congo
Eritrea
Ethiopia
Kenya
Rwanda
South Sudan
Sudan
Tanzania
Uganda



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Cover Photo: Champions of the Tamar Campaign from FECCLAHA's member councils carry a mannequin of the Tamar Campaign Bible Study Manual (Maputo, 2008).

*"Don't my brother!" she said to him. "Don't force me.
Such a thing should not be done in Israel!
Don't do this wicked thing. What about me?
Where could I get rid of my disgrace? What about you?
You would be like one of the wicked fools in Israel. (2 Samuel 13:12-13)*



The Fellowship of Christian Councils and Churches in the Great Lakes and Horn of Africa (FECCLAHA)

FECCLAHA is an ecumenical organisation that was formed to provide a platform for members to share perspectives on issues of common concern, particularly with regard to peace building and conflict transformation.

Formally formed in March, 1999 and registered in Kenya in February 2001, FECCLAHA has remained consistent to its mission to enhance peace and reconciliation in the Great Lake and Horn of Africa by facilitating ecumenical cooperation and fellowship within the framework of holistic Christian Ministry. It accompanies its members to take ownership and responsibility for problems in the region and provides a platform for them to proactively seek solutions for the same.

Vision Statement:

“Together for a just and peaceful society”

Mission Statement:

FECCLAHA exists to promote ecumenical solidarity for justice, peace, healing, and conflict transformation and reconciliation in the Great Lakes Region and Horn of Africa through advocacy, networking and partnership, capacity building, research and documentation within the framework of holistic Christian Ministry.

Members:

Christian Council of Tanzania (CCT)
Church of Christ in Congo (ECC)
Eritrea Orthodox Church
Ethiopia Evangelical Church Mekane Yesus (EECMY)
Evangelical Lutheran Church of Eritrea (ELCE)
Protestant Council of Rwanda (CPR)
National Council of Churches of Burundi (CNEB)
National Council of Churches of Kenya (NCCK)
South Sudan Council of Churches (SSCC)
Sudan Council of Churches (SCC)
Uganda Joint Christian Council (UJCC)

FECCLAHA Values:

Human Dignity (*Gen. 1:26*)

Compassion (*Micah 6:8*)

Peace (*Matthew 5:5-8*)

Justice (*Isaiah 1:16-18*)

Integrity (*Proverbs 11:3*)

Preface

In the last two decades, Gender-Based Violence (GBV) has become a serious global health, human rights, and development issue. While GBV is prevalent in all societies, crisis situations brought about by armed conflict or war usually exacerbate the extent and incidence of the problem, particularly in regard to sexual violence against women and girls. Local, regional and international surveys conducted in different regions of the world reveal that the family space and marriage context are the most likely theatres of domestic violence and abuse, while the public space and professional environment are more conducive for sexual harassment.¹ In the contemporary world, GBV is recognized as a blatant violation of human rights, which devastates the lives of thousands of women, girls, and their families.

One of the most challenging issues for civilians living in contexts affected by armed conflict and humanitarian emergencies is when sexual violence becomes a weapon and strategy of war. Once communal protection and support systems crumble, the most vulnerable groups (women and girls) are exposed to sexual exploitation, violence and abuse by virtue of their gender and socio-cultural status in society. They also have to deal with the risk of contracting sexually transmitted infections such as HIV/AIDS, the physical trauma caused by injuries to their reproductive organs, and psychological trauma that manifests as post-traumatic stress, depression, fear, and anxiety. In many instances, SGBV survivors are further subjected to social stigmatization and rejection from their spouses and families members who find it difficult to empathize and relate normally with the survivors.

GBV progressively erodes the accumulation of human and social capital and impacts negatively on a state's health wage bill, economic productivity, social life, education and the country's ability to achieve and deliver on its Millennium Development Goals (MDGs). National incomes and rates of economic growth are affected by GBV as a result of loss of personal security for individuals since it reduces opportunities to venture into economic activities to sustain livelihoods. With a reduction in productivity and escalating health care bills, there is less to invest in other development sectors. The judicial system also bears the brunt of GBV in the sense that more human resources are required to offer redress and handle GBV cases.

In 2005, FECCLAHA facilitated the launch of the Tamar Campaign in Nairobi, in partnership with St. Paul's University in Kenya and the World Council of Churches (WCC). The overall objective of this Campaign was to provide an advocacy strategy for churches and faith-based organizations to address Gender-Based Violence (GBV). The Campaign was then rolled out to different countries in the Great Lakes Region coordinated by FECCLAHA's member national councils and collaborating partners in the region. This approach is rooted in the use of a Contextual Bible Study (CBS) as an effective tool for religious leaders and other ecumenical organisations to address GBV and related issues such as the increase of HIV/AIDS infection rates. Together, the Tamar Campaign and the Contextual Bible Study Manual provide safe spaces and Bible-based resources to break the silence that often surrounds Sexual Gender-Based Violence.

¹Survey conducted in 2008 by UNIFEM titled: *An Empirical Analysis of Cases of Gender-Based Violence in Rutsiro, Kayonza, Ngororero Districts and the City of Kigali.*

Since the launch of the Campaign and CBS in 2005, there has been no specific attempt to monitor and evaluate its impact in East Africa. In response to this evident gap, this publication was conceptualized and compiled to deconstruct how armed conflict, gender inequalities, socialization and rites of passage, cultural and religious beliefs and practices collectively pose challenges to effectively addressing GBV in the Region.² It also captures and evaluates the impact of the Tamar Campaign and CBS as an advocacy tool which breaks down the wall of silence that often shrouds sexual violence and provides a “safe space” for the discussion of GBV in a religious context.

In December 2012, FECCLAHA facilitated a Gender Focal Point Consultation workshop at the All African Conference of Churches (AACC) Guest House in Nairobi. This was largely a capacity-building and sharing platform for the National Councils’ Gender Representatives. In attendance were participants from the Ethiopia Evangelical Church Mekane Yesus (EECMY); the Uganda Joint Christian Council (UJCC); the National Council of Churches of Burundi (CNEB); the Sudan Council of Churches (SCC); and the Christian Council of Tanzania (CCT). All of the participants were directly involved in implementing programmes and activities related to the Tamar Campaign and therefore had the chance to interact with survivors of GBV in their respective countries. During the workshop, each of the participants shared their experiences and challenges mainstreaming the Campaign within their respective council programmes.

In April 2013, questionnaires and interview questions were disseminated to each of the National Council’s Gender Representatives. They were expected to document their personal encounters with (S) GBV survivors and to highlight the unique challenges to advocacy efforts in each of their countries. The resource persons were expected to demonstrate objectivity and sensitivity to ethical considerations when interviewing survivors of (S) GBV. Moreover, they were to evaluate the impact of the Campaign and how it could be further refined or localized to provide an effective advocacy tool to address the specific needs of each member country. The respondents who provided testimonial evidence were survivors of (S) GBV or individuals who had been exposed to the Campaign and had interacted with the CBS in a Bible Study Group (‘Tamar Circle’), or were members of advocacy groups with links to the Tamar Campaign.³

FECCLAHA recognizes that in order to make an impact, an effective advocacy strategy must be inclusive by engaging the participation of women and men, the youth and children in order to support positive social change that is effective and sustainable. The Secretariat is committed to interacting more frequently with its Member Councils and Churches in order to reinforce greater ownership of this Campaign. In order to strengthen and expand the scope of the Campaign FECCLAHA anticipates forming coalitions with like-minded organizations within the Public sector and the Civil Society. This will reinforce FECCLAHA’s efforts by integrating alternative approaches to address the economic, legal, psychological and social empowerment of vulnerable groups. This publication provides a platform to showcase the impact of the Tamar Campaign and the CBS manual as an advocacy strategy in Eastern Africa.

²Such harmful traditional practices include Female Genital Mutilation or Cutting (FGM/C), forced/early marriages, domestic violence, amongst other practices discussed in later sections.

³The term “Tamar Circles” was coined and used by Pastor Steinar Eraker who has been instrumental in organizing CBS groups in North and South Kivu, Eastern DR Congo.

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Abbreviations and Acronyms

Acronym	Reference
ACPHR	African Charter on Human and Peoples Rights
BDPA	Beijing Declaration and Platform for Action
CBS	Contextual Bible Study
CEDAW	Convention on the Elimination of All Forms of Discrimination against Women
CRC	Convention on the Rights of the Child
DEVAW	Declaration on the Elimination of Violence Against Women
DRC	The Democratic Republic of Congo
FBOs	Faith Based Organizations
FECCLAHA	Fellowship of Christian Councils and Churches in the Great Lakes and Horn of Africa
FGM/C	Female Genital Mutilation/Cutting
FGDs	Focus Group Discussions
GBV	Gender - Based Violence
HIV/AIDS	Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome
ICCO	Interchurch Organisation for Development Cooperation
IDPs	Internally Displaced Persons
SGBV	Sexual Gender - Based Violence
MONUC	United Nations Peacekeeping Mission in Congo
NCA	Norwegian Church Aid



Operational Definitions of Key Concepts

Concept	Operational Definition
Sex	Refers to the biological characteristics of males and females These characteristics are congenital and their differences limited to physiological reproductive functions.
Gender	Gender is part of the broader socio-cultural context. The term denotes the social attributes and characteristics associated with being male and female and the roles assigned to men and women by a given society or the prescribed norms and definitions of what it means to be a woman or a man, and how men and women are positioned vis-à-vis one another and other groups of men and women.
Violence	Behaviour meted out as a means of control and oppression which could involve emotional, physical, social or economic aspects of coercion. The survivor is often forced to behave in a manner that is agreeable to the perpetrator by accepting the violent behaviour against him/her reproductive organs, other parts of the body, the soul, or spirit. ⁴
Gender-Based Violence (GBV)	The UN General Assembly, in adopting the 1993 Declaration on the Elimination of Violence against Women defined Gender-Based Violence as: 'Any act of violence that results 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. This refers to any harmful act that is perpetrated against a person's will and that is based on socially associated differences between males and females
Categories of Gender-Based Violence	GBV includes, but is not limited to: Physical violence (slapping, kicking, hitting, or use of weapons); Emotional violence (systematic humiliation, controlling behaviour, degrading treatment, threats); Sexual violence (coerced sex, forced into sexual activities considered degrading or humiliating); Economic violence (restricting access to financial or other resources with the purpose of controlling a person) ⁵
Sexual Gender-Based Violence (SGBV)	SGBV is: "any contact, gesture or act of exploitation of a sexual nature that is unwanted, or carried out without the consent of a person, which is imposed by physical force, threats, trickery, intimidation or duress." ⁶ It is widespread especially during conflict and is a gross human rights violation.
Sexual Abuse	Any unwanted physical intrusion of a sexual nature not resulting in penetration.
Sexual Harassment	Any unwelcome and unwanted sexual advance, verbal conduct, behaviour or gesture of a sexual nature.
Domestic Violence	"The use of force or threats by a husband [wife] or boyfriend [girlfriend] to coerce or intimidate a woman [man] into submission. The violence can come in the form of pushing, hitting, choking, slapping, kicking, burning or stabbing." ⁷

⁴According to the UN-CEDAW (1994), incidents, gestures, situations or words likely to compromise the physical and moral integrity of another human being constitute acts of violence.

⁵World Bank's Gender and Development Group

⁶The Rome Statute of the International Criminal Court, 2002.

⁷Definition adapted from *Strategies for Confronting Domestic Violence: A Resource Manual*. United Nations Centre for Social Development and Humanitarian Affairs (1993).

Gender Discrimination	The act of exclusion, restriction or distinction on the basis of gender identity and gender which has the effect of nullifying or impeding equal treatment or equal access to and control of equal opportunities and resources.
Gender Parity political	Refers to having equal numbers of women and men, boys and girls in education, health access, representations, private sector and other sectors of life.
Patriarchy	Psychology of male domination in society and the subjugation of women to men and is transmitted through masculine socialization processes prevalent in most African cultures. Patriarchy is intricately linked to GBV because it socializes girls and women to succumb to cultural acts that violate their rights and justifies their low status in society.
Impunity	Refers to the absence of punishment or failure to bring to justice perpetrators of human rights violations. UN Security Council Resolution 1325 emphasises the responsibility of all states to put an end to impunity and to prosecute those responsible for “genocide, crimes against humanity and war crimes, including those relating to sexual and other violence against women and girls”.
Gender Equality	The equal rights, responsibilities and opportunities of women and men, girls and boys. Equality does not mean that males and females become similar – rather, it points towards women’s and men’s rights, responsibilities and opportunities not being dependent on whether they were born male or female. Gender equality implies that the interests, needs and priorities of both women and men are taken into consideration – recognizing the diversity of different groups of women and men.
Gender Mainstreaming	The reorganization, improvement, development and evaluation of policy processes so that a gender equality perspective is incorporated in all policies at all levels and all stages, by the actors normally involved in policy making. Rights holders are individuals and groups with valid claims to human rights and equity and justice in a country. Rights holders have their entitlements.
Rights Holders	Rights holders have survived or experienced Gender- Based Violence in its various forms. They include rural and urban community members; Internally Displaced Persons (IDPs), sex slaves and child soldiers.
Duty Bearers	Duty bearers are the state and non-state actors with obligations to the citizens they serve. ⁸ Duty bearers have obligations, and works towards strengthening the capacities of rights holders.

⁸Duty bearers include Faith-Based Organizations (FBOs); religious leaders; local and provincial authorities; national and international actors.

Executive Summary

In 1985, during the 3rd World Conference on Human Rights held in Vienna, GBV was officially recognized as a violation of basic human rights, particularly against women. It was then that the International Community agreed on the definition of violence. The Beijing Platform of Action adopted on September 15, 1995 called upon states to be proactive in preventing and eradicating violence against women. In Africa, the African Union adopted the African Union's Protocol to the African Charter on Human and People's Rights on the Rights of Women in Africa in an effort to promote and ensure the protection of the rights of women in Africa.⁹

It is against this backdrop that we highlight the prevalence of SGBV in the Great Lakes and Horn of Africa region of Eastern Africa. Local, regional and international surveys conducted in different regions of the world reveal that the family space and the context of marriage are the most likely theatres of abuse, while the public space and the professional environment would be more conducive to sexual harassment.¹⁰

Hence, our aim is to document the experiences of the National Council Gender Representatives based in Kenya, Uganda, Tanzania, Rwanda, Burundi, Ethiopia, Southern Sudan and Eastern DRC on the impact of the Tamar Campaign and CBS in their respective countries. In so doing, we endeavour to evaluate and refine our advocacy strategy and develop action plans relevant to the unique contexts of each country to address various kinds of SGBV.

Our approach:

- * Examines the socio-cultural context in each of the aforementioned countries and how this influences GBV;
- * Outlines the various types of interpersonal violence inflicted on vulnerable groups in the family and public space;
- * Analyzes the community perceptions on the nature, causes, and consequences of various forms of sexual violence and GBV.

The methodology used to gather information for this publication involved conducting a comprehensive Literature Review to:

- * Establish the contextual background of GBV particularly during periods of conflict in Kenya, Southern Sudan, Ethiopia, Uganda, Tanzania, DRC, Rwanda and Burundi;
- * Deconstruct the various forms of GBV in the region;
- * Trace the development of the CBS methodology in South Africa;¹¹
- * Evaluate the feedback information garnered from questionnaires distributed to the National Council's Gender Representatives of FECCLAHA's member councils and churches;

⁹This Protocol was adopted on July 11, 2003, during the 2nd Summit of the African Union in Maputo, Mozambique. It makes an appeal to African states to eradicate all forms of discrimination and violence against women in Africa and to put in place a policy of equality between women and men.

¹⁰ Survey conducted in 2008 by UNIFEM titled: *An Empirical Analysis of Cases of Gender-Based Violence in Rutsiro, Kayonza, Ngororero Districts and the City of Kigali*.

¹¹The Contextual Bible Study (CBS) methodology was developed and shared throughout sub-Saharan Africa and in other continents by the Ujamaa Centre for Biblical and Theological Community Development and Research at the School of Religion and Theology in the University of KwaZulu-Natal, South Africa.

- * Consolidate information provided during plenary discussions and presentations made during the December 2012 Workshop in Nairobi;
- * Evaluate the impact of the Tamar Campaign at the grassroots level through the contact resource persons providing their own personal accounts and challenges faced in their advocacy efforts;
- * Document success or change stories collected from the communities or individuals who had experienced the Tamar Campaign in one way or other including attending group Bible studies and “Tamar circles” where the CBS was used;
- * Conduct in-depth interviews with eminent persons who have played a significant role in the launch, integration and mainstreaming of the Tamar Campaign in Kenya; and the dissemination of questionnaires to the National Council Gender Representatives.¹²

SGBV has a greater impact on women and girls, as they suffer greater physical harm than men when victimized. The socio-economic and culturally subordinate status of women and girls makes them more vulnerable to violence and contributes to an environment that wrongly accepts, excuses, and even expects violence against them¹³ girls who undergo it. Rape, sexual assault, sexual slavery, forced prostitution, forced sterilisation, forced abortion and forced pregnancy are crimes under national and international laws, yet the perpetrators of these crimes often go scot-free in Africa. Children are also at risk of sexual violence which is more often than not, perpetrated by persons the victims know. However, social stigma and family shame result in the knowledge of the abuse being kept within the family. At times, families are paid “damage money” to buy their silence.¹⁴ The culture of silence and secrecy surrounding SGBV reinforces the impunity of the perpetrators..

Faith based organizations such as FECCLAHA have a duty to advocate for the right to justice for the survivors of GBV. This entails lobbying and advocating for legislative, administrative and policy decisions to combat SGBV as part of restorative justice. Other measures include public education and awareness campaigns to sensitize the public on harmful traditional practises that reinforce gender inequality and provide a conducive arena for SGBV to thrive. There is also need to set up special funds for the compensation of survivors of sexual and gender-based violence, as well as to sensitise the courts, the police, prosecuting agencies and Gender Desks. Each of the states in the Great Lakes Region have committed themselves to prevent and end Gender-Based Violence by ratifying international conventions and declarations, and in so doing, acknowledge the seriousness of the problem. Working in consultation and coordination with state agents, human rights groups and the international community can join forces to address GBV. More needs to be done to prevent, investigate and punish acts of violence whether against men, women or children. The survivors of GBV need to be supported and protected - a responsibility for which each state officials need to be held to account.

¹²The authorities interviewed were Prof. Esther Mombo (Deputy Vice Chancellor-Academic, St. Paul's University) and Rev. Pauline Njiru (WCC-EHAIA). The National Council Gender Representatives were from Kenya, Uganda, Tanzania, Rwanda, Burundi, Ethiopia and Southern Sudan

¹³Family Health Options Kenya 2010: An Assessment of Current Sexual and Gender Based Violence Interventions in Eldoret and its Environs.

¹⁴8 Family Health Options Kenya 2010: An Assessment of Current Sexual and Gender Based Violence Interventions in Eldoret and its Environs
Ministry of Health: National Health Strategy (1997-2010)

The recommendations advanced herein are that the Duty Bearers (State agencies, FBOs, NGOs, national and international organizations) must address Gender Based Violence by:

- * facilitating and providing adequate holistic assistance and support to all survivors of Sexual Gender Based Violence (SGBV);
- * Promoting equity in access to resources irrespective of gender and work towards addressing cultural norms and practices that encourage SGBV;
- * Providing access to medical and psychosocial assistance to SGBV survivors and enhance gender-sensitive structures for the reintegration of survivors as non-stigmatized members of society;
- * Establishing a special fund for the compensation of SGBV, as well as to sensitise the judicial system, state agents and prosecuting agencies.

Public education and awareness campaigns are necessary to empower vulnerable members of the society. FECCLAHA is committed to continuously expose acts of SGBV, create awareness on the problem and search for strategies not only to curb the vice, but also to explore how best survivors can be supported and the perpetrators brought to justice.



CHAPTER 1

Gender Based Violence in the Great Lakes and Horn of Africa: A Contextual Analysis

1.1 Overview

In the last twenty years, GBV has become a serious global health, human rights, and development issue. The Beijing Declaration and Platform for Action (BPFA) defines GBV as:

"...any acts that result in physical, sexual, or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty that could manifest itself in public or private life."

According to the UN Institute for Research and Training, GBV is rooted in prescribed behaviour, norms and attitudes on the basis of gender and sexuality.¹⁵ These norms allow and encourage violent behaviour within environments that assign privilege and hierarchical power to certain groups in society - usually men. It is perpetrated physically, psychologically, emotionally, primarily through patriarchal cultural practices, negative manifestations of masculinity and a disparity between the rights of men and women. GBV reflects the enforcement of power hierarchies and structural inequalities created and sustained by belief systems, cultural norms and socialization processes. Although girls and women form the majority of GBV survivors, boys and men are also affected, either directly or indirectly especially during periods of civil war or conflict. GBV includes Sexual Gender-Based Violence (SGBV) which could be defined as:

"...any contact, gesture or act of exploitation of a sexual nature that is unwanted, or carried out without the consent of a person, which is imposed by physical force, threats, trickery, intimidation or duress."¹⁶

Examples of SGBV include (but are not limited to): Female Genital Mutilation or Cutting (FGM/C); forced abortions and virginity tests; wife battering and coerced wife inheritance; favouritism of the boy child vis a vis the girl child; abductions and forced marriages; rape and sexual molestation; defilement of children; dowry-related killings; domestic violence; "beading" of young girls to serve the sexual needs of young warriors¹⁷; physical or psychological sexual harassment and exploitation within a community such as at workplace or educational institution); and forced prostitution and trafficking (mainly of women and children). Many of these acts of SGBV are not perceived to be violations of human rights but are culturally acceptable practices. Hence, survivors of SGBV are often unwilling to report such violations through formal or informal sources of support. For instance, many African cultures consider acts such as wife beating to be "acceptable" and "normal" GBV and sexual violence is often perpetrated by husbands or male sexual partners.¹⁸ The private nature of violence between couples who are known to each other often makes it virtually "invisible" and "silent" since it usually takes place behind closed doors, often without any credible

¹⁵INSTRAW (2001) 'Men's Role in Gender-based Violence', <http://www.un-instraw.org>

¹⁶The Rome Statute of the International Criminal Court 2002.

¹⁷The practice of "beading" is practiced in certain communities (e.g. the Samburu in Kenya) where young girls become "sex slaves" of young morans (community warriors) but are forced to abort should they conceive during these sexual encounters.

¹⁸ This is according to a World Health Organization (2002) report by the World Health Organization (WHO) titled: "Violence and Health" (2002).

witnesses to the abuse. Moreover, the legal framework in many African countries and African cultural norms do not recognize emotional and psychological abuse, marital rape and other (non-physical) forms of GBV as criminal offences. Rather, such acts are justified as “domestic issues” and part and parcel of any marriage.

1.2 Factors that contribute to Sexual and Gender-Based Violence

GBV is a manifestation of unequal relations between women and men with deeply entrenched roots in the social, economic and political informal conventions that perceive males as biologically and sociologically “privileged” at the expense of girls and women’s vulnerability. SGBV occurs even in societies with well-established legal systems and institutions. It is a widespread form of human rights violation which impedes the achievement of gender equality, development and peace. It is an ancient and universal problem that occurred even in Biblical times (Tamar was raped by her brother Amnon) and in more or less every culture or social grouping.

Although there are documented cases of men and boys being subjected to SGBV, this vice affects women and girls disproportionately. The World Report on Violence and Health shows that between 40% and 70% of all women who are murdered or killed die at the hands of a male intimate partner. One report states that around the world, one in every three women has been beaten, coerced into sex, or abused in some other way - most often by someone she knows, including her husband or another male family member. In addition, one in every four women has been abused during pregnancy.¹⁹ In contrast, between 4% and 8.6% of men who are murdered die at the hands of a female intimate partner. Both males and females survivors have reported sexual assault and coercion, but the majority of survivors are females, and the vast majority of the perpetrators are male. Studies reveal that while men are more likely to be attacked by a stranger, women and girls are more likely to be attacked by someone close to them, such as a husband or boyfriend, father or close male relative or teacher.

SGBV cannot be fully understood without considering the gender norms and social structures that make women and girls vulnerable to such forms of violence. Certain gendered norms, beliefs and cultural practices reinforce acts of GBV. In many cultures, traditional beliefs, norms and social institutions legitimise and, therefore, perpetuate violence against women. The subordination of girls and women is manifested in the gender stereotypes entrenched in these societies.

SGBV as a Weapon of Warfare in Conflict Situations

While SGBV is prevalent in all societies, economic and political crises or situations of armed conflict often exacerbate the extent and escalate the manifestations of this kind of violence. When insecurity and lawlessness prevail, this creates an environment for SGBV to thrive. It is used as a weapon of war to humiliate the enemy and to achieve military objectives in a crude, unorthodox way. The lack of security and protection, the vulnerable, unarmed civilians become the “battleground” of the aggressors who take them hostage, gang rape, injure them sexually and exploit them as sexual slaves or kill them altogether. SGBV occurs even within IDP and refugee camps. Young girls and women are the most vulnerable. Sexual violence is then used as it is a form of torture or to inflict injury; to extract information; to degrade and intimidate a perceived enemy; as a form of punishment for actual or alleged actions committed by individuals, their families or ethnic communities; to destroy the cohesion of certain communities; and for the mistaken belief that raping a virgin girl will cure HIV infection.

¹⁹Beijing Declaration and Platform of Action, Paragraph 112



A delegation from FECCLAHA at a solidarity visit to Eastern DRC. On the left is Dr. Denis Mukwege of Panzi Hospital in Bukavu, South Kivu. (Bukavu, 2008)

Horrible acts of SGBV were witnessed during the 1994 genocide in Rwanda; the volatile conflict area of Eastern Congo; Northern Uganda; Darfur in Sudan and Southern Sudan; Kenya's 2007 Post-Election Violence (PEV) as a result of inter-ethnic conflicts. During each of these crisis situations, women and children were subjected to unprecedented and unimaginable levels of sexual abuse and GBV as they sought refuge in the bushes or IDP camps.

1.3 Effects of Sexual and Gender-Based Violence

Survivors of SGBV experience acute physical, psychological and social trauma including depression, terror, guilt, shame and loss of self-esteem. Spouses and families of the survivors may ostracise them or subject them to further trauma. For instance, if the perpetrator is known, he is forced to take the survivor as a wife or made to compensate the survivor's family in some way. Survivors may also have to deal with unwanted pregnancies, unsafe abortions, Sexually Transmitted Infections/Diseases (including HIV and AIDS), sexual dysfunction and trauma to the reproductive tract, as well as chronic infections leading to pelvic inflammatory diseases and infertility. Not only do women carry a substantial burden of illness and likelihood of death because of physical and sexual violence, but violence also worsens other health conditions, thereby increasing the opportunity for HIV/AIDS transmission.

1.4 Summary

Various forms of GBV are prevalent throughout the Great Lakes Region and the Horn of Africa, with SGBV becoming a weapon of warfare in conflict situations. The most vulnerable groups are women and girls. Certain forms of violence are perpetrated by the patriarchal nature of the society, which place the female gender as subservient to the male gender.

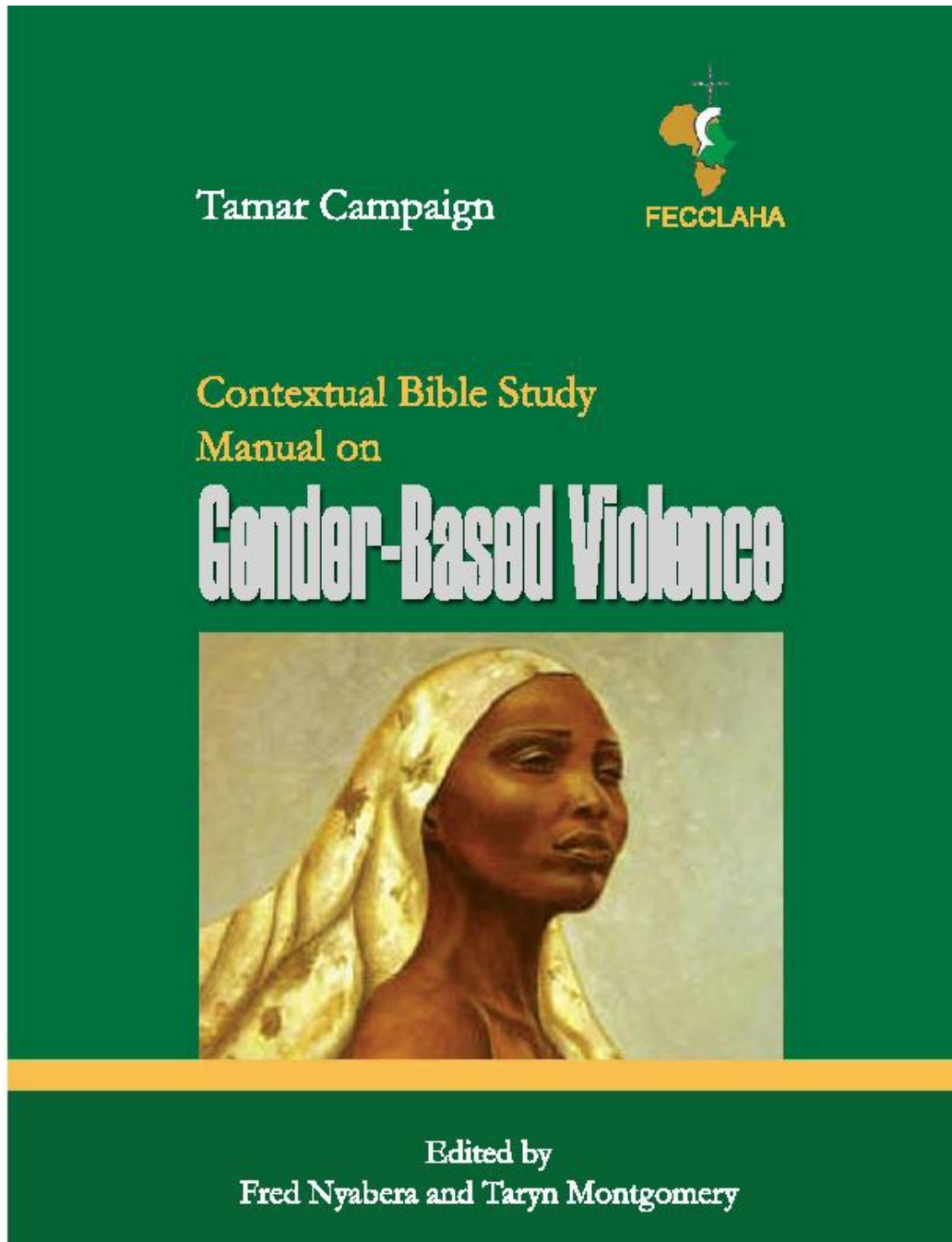
Legislative, administrative and policy decisions are governed by male-oriented structures subsequently leading to half-hearted measures on the part of state officials to punish acts of GBV against women. Deeply entrenched cultural practices, religious beliefs and attitudes seek to justify the violence. In a number of instances, GBV survivors are ostracised and blamed for the violence bestowed on them rather than the perpetrators being punished for their actions.

Any intervention to address GBV must be multifaceted and target the intertwined elements of who the perpetrators are; what makes the survivors vulnerable; the enabling environment related to religious and cultural beliefs and perceptions; the fostering factors including poverty, low levels

of education and the legal framework that addresses issues of GBV. Efforts to address SGBV must deal with the cultural dynamics that relegate women to the periphery. Laws also need to be strengthened to safeguard the rights of all citizens irrespective of gender and put in place measures to eliminate the vice and hold perpetrators to account. Indeed, it is the responsibility of individual states to strengthen national policies and legislation to promote and safeguard the rights of women.

Gender inequality can only be addressed by examining the cultural, social and economic factors that reinforce and rationalize acts of GBV. These acts of violence have psychological, social and environmental roots, and therefore require a multifaceted approach that targets the participation of different stakeholders including state organs (law-enforcement agencies and the legal system); nongovernmental agencies, the health and education sectors, and faith-based organizations (FBOs). To effectively respond to SGBV, international and national actors must demonstrate political will to invest significant financial and human resources to cater for the needs of survivors of sexual violence. The International Criminal Court (ICC) established at The Hague, Netherlands in 2001, represents a significant step towards dealing with the impunity that is commonplace in cases of sexual violence during armed conflict situations. By criminalising sexual violence, the ICC statute embodies the principles of various UN conventions and declarations on violence against women. Sexual exploitation and abuse is often exacerbated in situations characterised by poverty, conflict and/or displacement where the UN is actively involved.

The Tamar Campaign and Contextual Bible Study: A Brief Background



CHAPTER 2

The Tamar Campaign and Contextual Bible Study: A Brief Background



2.1 Overview

It is clear from our Women and Gender Programme that the Tamar Campaign has become a vehicle for exploring and empowering gender questions across the African continent and even across religions! (West, 2008).²⁰

The Contextual Bible Study (CBS) methodology was developed and shared throughout sub-Saharan Africa and in other continents by the Ujamaa Centre for Biblical and Theological Community Development and Research at the School of Religion and Theology, University of KwaZulu-Natal, South Africa.²¹ A number of theologians and scholars have integrated creative ways of teaching and integrating theological education by using this contextualized methodology to address sensitive issues such as HIV/AIDS and SGBV.²² This group of scholars has developed approaches that unpack “taboo” issues such as incest, rape or sexually transmitted infections which often remains hidden and silent in families, religious contexts (churches and communities at large).

The approach involves reading and interpreting the Bible through story-telling and contextual bible study methodology that can be used with both literate and illiterate African Christians. Rather than avoiding the discussion of disturbing Bible narratives that touch on sexual issues, the CBS methodology engages the audience (readers and listeners alike) in contextualizing the stories in creative, interactive and communicative ways. This approach interrogates the Bible, African religious and historical norms and beliefs, patriarchal cultures, femininity and masculinity and human sexuality.

The ultimate aim is to provide an interactive and participatory session that engages the audience in interrogating religious doctrine. Ultimately, this approach aims at keeping Bible teachings relevant, encourages spiritual growth and societal transformation of the community at large. Moreover, the methodology gives a voice to survivors of different forms of GBV as they interrogate Bible narratives that relate to their traumatizing experiences such as rape or incest. For instance, Judges 19 documents the gang-rape of a concubine of a Levite. The same text could be a powerful tool for interrogating the widespread sexual violence that has occurred over the years in the Great Lakes region.

²⁰Prof Gerald West is the Director of the Ujamaa Centre for Biblical and Theological Community Development and Research in KwaZulu Natal, South Africa.

²¹West, G. (1991) *Biblical Hermeneutics of Liberation: Modes of Reading the Bible in the South African Context*. Cluster Publications and Orbis Books

²²This group of African scholars includes: Musa W. Dube (Botswana), Esther Mombo (Kenya), Tinyiko Maluleke (South Africa), Isabel Phiri (Malawi), Gerald West (South Africa), Emmanuel Katongole (Uganda), Mary Getui (Kenya), Sarojini Nadar (South Africa), Ezra Chitando (Zimbabwe), Madipoane Masenya (South Africa) amongst others.

The CBS methodology has been mainstreamed into the syllabi of a number of theological institutions because it has great potential of helping theological students become effective pastors and theologians.²³ It also provides opportunities to address the violent legacies of genocide, civil wars and struggles against violence and poverty in Africa. Its creative, story-telling methodology helps to expose the multilayered violence based on patriarchal oppression, colonization, economic globalization and religious imperialism.

2.2 Significance of the Tamar Story



Figure 2: Thespians dramatize the consequences of GBV on the family (Nairobi, 2006)

The Tamar Campaign is based on the Bible text found in 2nd Samuel 13: 1-22 and was adopted as a response to the growing silence within the Church regarding Gender Based Violence and child sexual abuse. The first time Tamar's story was used in a Contextual Bible Study (CBS) was at a workshop in South Africa on the 23rd-27th September 1996 at the Ujamaa Centre for Biblical and Theological Community Development and Research located in KwaZulu Natal, South Africa.²⁴ The workshop was sponsored by the Institute for the Study of the Bible and Worker Ministry Project. The

purpose of this workshop was to provide a platform to reflect theologically on the issues confronting "Women and the Bible in South Africa."²⁵ One of the core themes discussed was Gender-Based Violence (GBV) with parallels being drawn to the Biblical account of Tamar's rape by her step brother Amnon. The text is considered to be very empowering in the sense that it is a tool through which churches could break the silence surrounding rape and abuse of women. Tamar is portrayed as a symbol of strength as she did not keep silent when she was violated. The Tamar campaign was launched in South Africa in 2000 with the aim of encouraging churches to speak out against violence that affects women and children with the aim of providing support for survivors of this violence.

²³Since 2005, the WCC has promoted the CBS methodology in its Ecumenical Theological Education (ETE) and Ecumenical HIV/AIDS Initiative in Africa (EHAIA). It aids Christians and theological educators in Africa to understand the intersection between violence and HIV pandemic. The outcome of this is Contextual Bible Study Manual on Gender-Based Violence (Tamar Campaign), Nairobi: FECCLAHA Publication 2007, which has been translated into French, Portuguese, Malagasy, Amharic and Kiswahili. This has also led to theological interest on African masculinities and Redemptive Masculinities.

²⁴This institution was formerly known as the Institute for the Study of the Bible & Worker Ministry Project.

²⁵West, G. & Zondi-Mabizela, P: *The Tamar Campaign in South Africa and Beyond*.

The initiative in Kenya was championed by Rev. Dr. Nyambura Njoroge, Prof. Esther Mombo and Karimi Kinoti.²⁶ The Campaign was launched on 25th February, 2005 in Kenya and facilitated by FECCLAHA with the aim of challenging the Church as God's instrument to acknowledge the existence of GBV and to speak out against any form of violence meted out on women & children. This Campaign acts as a tool that can be used in various platforms to challenge the church to address the plight of women in the region.

After Tamar's rape, she chose not to remain silent. Similarly, survivors of rape today need to be provided with "safe spaces" to share their stories as a way of healing from the trauma and stigma that often surrounds SGBV. This will also help to break the culture of silence surrounding sexual violence on women and children. Religious leaders and institutions are strategically placed to play a significant role in the prevention and elimination of different forms of violence against women & children since it commands and dictates moral authority in society. Moreover, the Church as an institution has notable clout and is well positioned to provide opportunities of healing for survivors of GBV. In addition, religious leaders of all denominations are strategically placed to minister to the needs of those who have been abused as well as the perpetrators of the violence.

2.3 The Vision, Mission and Objectives of the Tamar Campaign

FECCLAHA's focus on the Tamar Campaign is motivated by the fact that the organization was formed as a response to escalating conflicts in the region and their cross border nature. In addressing this crisis, FECCLAHA recognizes that the plight of women and children in the conflict and post-conflict situations cannot be ignored. Over the years, women and children have silently borne the trauma and scars of war; rape, incest, and other forms of violence.

The Tamar Vision

A continent, which is free from Gender-Based Violence, in which men and women relate as equal partners made in God's image.

The Tamar Mission

To demonstrate God's compassion and justice to women and children who suffer indignity and violation through Gender-Based Violence.

Objectives of the Tamar Campaign

1. Raise awareness on the prevalence, magnitude and consequences of gender based violence;
2. Encourage churches to speak out against the abuse of women and children;
3. Collaborate with churches on violence prevention, for example, through programmes of men and youth;
4. Build the capacity of churches to provide support and opportunities for healing for victims of gender based violence;
5. Encourage churches to hold perpetrators accountable for their acts of violence and help them to come to terms with the issue and reconcile them to society; and
6. Strengthen churches' networking and collaboration with other stakeholders in addressing the problem of gender based violence.

²⁶ Rev. Dr. Nyambura Njoroge is the Programme Executive for EHAIA at the World Council of Churches (WCC); Prof. Esther Mombo (The Academic Dean at the St. Paul's University, Limuru) and Ms. Karimi Kinoti (Former Executive Director of FECCLAHA now Regional Representative of Christian Aid).

Biblical texts which deal with SGBV do not usually feature as popular themes of religious sermons. However, by using the Tamar Campaign and applying the CBS methodology, religious leaders are able to boldly speak out against various forms of GBV, its causes and consequences on the family and community as a whole.

2.4 FECCLAHA'S role in launching the Tamar Campaign



The launch of the Tamar Campaign Contextual Bible Study Manual (Nairobi, 2008)

In 2007, FECCLAHA published the English Contextual Bible Study (CBS) Manual containing twelve passages from the Bible that address different themes on Gender Based Violence. In collaboration with FECCLAHA's partners, the CBS manual has been translated into Kiswahili, French, Portuguese, Malagasy, and Amharic. On its part, the CBS remains central to the Tamar Campaign as it provides a practical way of studying the Bible through the context of the community as initiated by the Ujamaa Centre in South Africa. In addition, it provides a "safe space"

not only to discuss sensitive issues relating to GBV but also provides a space for healing.

On 8-14, June 2008, a workshop was held in Kenya for the Council of Anglican Provinces of Africa (CAPA). In attendance were Provincial Coordinators from Kenya, the DRC, Burundi, Rwanda, Egypt, Nigeria, Ghana, Zambia, Uganda, South Africa, Sierra Leone and Sudan. Representatives from St Paul's University and EHAIA attended this workshop. The participants were challenged by the CBS and some male participants expressed their willingness to become gender activists who would advocate against sexual violence inflicted on children and women. An important point of emphasis was that men need to take ownership of the Tamar Campaign in their respective countries and communities. The Tamar Campaign was considered to be a relevant tool that ought to be launched in different countries, particularly those with a prolonged history of civil wars and genocide such as Rwanda, Eastern DRC, and Burundi. Moreover, the Campaign was earmarked as a healing tool for men who had personally been subjected to sexual violence or those who had been traumatized by seeing their family members sexually violated. The work in these countries would be carried out in partnership with CAPA and EHAIA.

According to West (2003), the CBS is a form of Bible Study in which ordinary people are given the opportunity to speak for themselves about how they hear God speaking to them through the Bible. Through this Manual, Bible scholars enter into a partnership with ordinary Bible readers, with each bringing their resources on board for a contextual interpretation of the Bible. The African context has experiences of violence against women and children and hence, the Tamar story is as relevant today as it was in the Old Testament times. The Campaign and its CBS

methodology are flexible and shaped by the local (contextual) needs of various communities. Different methodologies can be used to achieve the Campaign’s aims including the use of role play and drama.

2.5 The Transformative Approach of the CBS

The CBS consists of interactive study of Bible texts where both the reader’s context and the Bible context come together in dialogue. The primary aim of the CBS is to raise awareness with the end goal being transformation working within hermeneutical spiral of ‘seeing’, ‘judging’ and ‘acting.’ Prof. Mombo summarizes the structure and content of the CBS using the 5 Cs of ‘Community’, ‘Context’, ‘Criticality’, ‘Consciencization’ and ‘Change.’ ‘Community’ means that the CBS is meant to be interactive. ‘Context’ means that it takes into consideration the social location of the reader. ‘Criticality’ means that it takes into consideration the context of the Bible. ‘Consciencization’ aims at raising awareness on specific concerns; and ‘Change’ means that the end goal of the CBS is transformation through action.

The appeal of the CBS to church leaders is because of its transformation approach. The CBS manual poses direct questions concerning sensitive topics and also underscores the important role of women in society. A case in point is Mary Magdalene’s role in the Gospels which demonstrates that women were present in the ministry of Jesus. By Jesus healing and affirming the woman with the issue of blood highlights the stigma that chronic diseases such as HIV/AIDS impact on people and the empowerment that is brought by the healing power of Christ. A third example is the story of the Samaritan woman which symbolizes ethnic and racial barriers as well as male and female boundaries. Christ came to break all these barriers. The concept of Transformative Masculinity is also emphasized in the CBS. This approach deals effectively with gender justice since it takes a non-confrontational stance.

25.1 Transformative (Positive) Masculinity

GBV is rooted in unequal power relations between men and women. According to the UN Report titled: “Ending Violence against Women: From Word to Action”, GBV is grounded in power imbalances meaning that there is a close link between negative masculinities and the increase of GBV. It is therefore necessary to “deconstruct” as well as “reconstruct” masculinity. This entails establishing a balance between values of belonging, (partnership, inclusiveness, cooperation and generosity), with values of enterprise (individualism, competitiveness, and materialism). The values of belonging as compared to the values of enterprise are categorized as follows:

Values of Belonging		Values of Enterprise
1	Mutuality	Competitiveness
2	Cooperation	Individualism
3	Generosity	Materialism/Acquisitiveness
4	Egalitarianism	Inequality
5	Playfulness	Ambition

It is important to strike a balance between values of belonging and values of enterprise. There is also need to deconstruct and then reconstruct masculinity as a means of finding alternative ways of defining Masculinity. “Deconstructing” Masculinity means identifying the things that are not life

affirming, while “reconstructing” Masculinity implies reinforcing the life affirming values and beliefs. There is a need to re-evaluate the socialization process and initiation rites that children and the youth undergo in Africa. Transformative masculinity is also needed in the church with men through the preaching of sermons and Bible studies that create awareness on GBV. Transformative Masculinity also involves empowering women economically, psychologically and spiritually. Transformative Masculinity is a relatively new approach which EHAIA is currently working on and has held workshops in Uganda, Rwanda and Burundi.

2.6 The Tamar Campaign as an Advocacy Platform

The Tamar Campaign and 16 Days of Activism against Violence on Women

The Tamar Campaign has been adopted as an advocacy platform during the commemoration of 16 Days of Activism against Violence on Women.²⁷ since the launch of the Campaign in Nairobi, FECCLAHA has leveraged on the 16 day period to mobilize Church leaders for awareness raising workshops in collaboration with like-minded organisations. Discussions and reflections are held



Tamar Campaign Peace March under the theme: “Stop Violence against Women” (Nairobi, 2006)

on Church leaders’ opportunities to address GBV. Additionally, spaces are created for Church leaders to make commitments on practical ways of addressing GBV in their Churches. In 2006, a peaceful walk that culminated in a prayer session was held in Nairobi, Kenya. This was largely to add the voice of the Church in ensuring an end to violence against women.

FECCLAHA has made efforts to establish links with national and regional civil society organisations which are stakeholders in addressing GBV. This is largely to tap on to their expertise and strengthen the link between the Church and local/regional Civil Society organisations. These include the International Conference on the Great Lakes Region (ICGLR), National Democratic Institute (NDI) in South Sudan, Heritier de la Justice

in Bukavu, South Kivu, and Gender Violence Recovery Centre-Nairobi Women’s Hospital among others. Such links have strengthened the Tamar Campaign as an advocacy platform in the region.

²⁷This is an international event that seeks to raise awareness on GBV as a human rights issue at the local, national, regional, and international level. It is held annually from 25th November to 10th December.

Raising awareness on national, regional, and international legal frameworks against Violence on Women

The Tamar Campaign has provided a platform to raise awareness on national, regional, and international legal frameworks against violence on women. In collaboration with member national councils and churches, workshops have been held in South Sudan, Eastern Democratic Republic of Congo, and Kenya on the United Nations Security Council Resolutions 1325 (2000)²⁸ and the Protocol on the Prevention and Suppression of Sexual Violence against women and children²⁹. FECCLAHA has participated in ICGLR Inter-Ministerial Committee Meetings and Conferences/Summits. In July, 2012 FECCLAHA participated in a High Level Consultation of Ministers of Justice and Gender on Sexual Gender Based Violence (SGBV) Special Courts and the Launching of SGBV “Zero Tolerance Campaign” in the Great Lakes Region in Kinshasa, DRC. Through these platforms, linkages have been drawn with relevant national legal frameworks seeking to protect women in the respective countries. Additionally, women have been able to identify and consolidate the gains made nationally and regionally as regards protection of women rights. Further, gaps and impediments affecting women and the best practice and strategies of addressing these gaps have been identified by mapping out areas for further advocacy and sustained engagements.

2.7 Summary

The Tamar Campaign has also led to greater awareness of the various forms of GBV that affect all sectors of the society. A common misunderstanding of sexual abuse and violence was that it only manifests itself physically. However, through the Campaign and CBS, communities have been sensitized on other dimensions of abuse such as: sexual abuse (in all its various forms); socio-economic abuse; verbal and psychological abuse or even spiritual abuse. These other forms of abuse are often trivialized as not really serious because of gendered norms, beliefs, cultural practices and attitudes at the community level about how women and men should behave. Consequently, any strategy to raise awareness on GBV must be multi-faceted to include capacity-building, advocacy, peer education, media programming, information and entertainment shows and community or small group forums.

The Campaign is a powerful tool that can be used by church leaders to impact and sensitize their communities in order to live more harmonious lives. Indeed, it has impacted positively on many lives and has given many women a voice in a safe space. Men too have felt infuriated by the actions of other men in the Tamar story who instead of helping the victim Tamar, act as accomplices in the rape. After being exposed to the Tamar story and CBS methodology, a significant number of men have been motivated to promote a positive culture of respect and protection of women and girls as vulnerable members of the society.

SGBV had for a long time been considered to be a taboo subject whose discussion had no place in the church. However, there are documented cases of church leaders who have used the Tamar text as a tool to encourage a spirit of openness within the church. An increase in the number of women,

²⁸The UN SCR 1325 (2000) is the first ever resolution that specifically addresses the impact of war on women emphasizing the importance of women's equal participation and full involvement in all efforts to maintain and promote sustainable peace and security.

²⁹Spearheaded by the International Conference on the Great Lakes Region (ICGLR), this protocol, under the Pact on Security, Stability, and Development in the Great Lakes Region, was adopted by the Heads of States and Governments of the ICGLR member states in Nairobi in December 2006 and entered into force in June, 2008. FECCLAHA is pursuing observer status with ICGLR.

children and men who experience GBV in domestic situations or in the war-torn regions of Eastern Africa has forced the church to recover its prophetic voice. The Campaign and the CBS provides important resources to empower religious leaders with the capacity to address and confront these issues from the pulpit. Moreover, the Campaign and the CBS recognize the close link between SGBV and sexually transmitted infections such as HIV/AIDS. Indeed, the battle against GBV and the spread of HIV/AIDS can only succeed through collaborative efforts of all members of society.

End Notes

The sections on “Redemptive” and “Transformational Masculinity” were largely based on a presentation during the Gender Consultative Forum and useful insights provided by Prof. Esther Mombo who is the Deputy Vice-Chancellor – Academic at St. Paul’s University, Limuru. An interview with Rev. Pauline Njiru who is the Regional Coordinator of WCC-EHAIA in the Eastern Africa Region also provided authoritative insights into the impact of the Tamar Campaign in Kenya, the link between GBV and HIV/AIDS and the coalitions formed to fight GBV in Kenya.

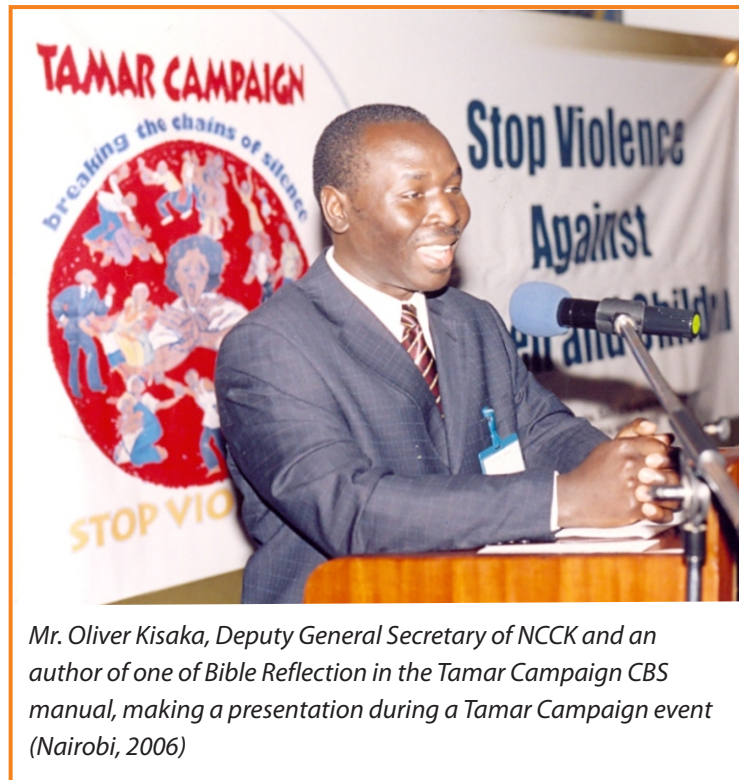
CHAPTER 3

Gender Based Violence and the Tamar Experience in Kenya



3.1 Overview

GBV in Kenya has been perpetrated physically, psychologically and emotionally as a result of patriarchal cultural practices, negative masculinity and a disparity between the rights of men and women. Cultural practices such as FGM/C; forced early marriages; rape and defilement of women and children (mainly girls); forced wife inheritance and polygamy continues unabated. SGBV remains a major concern with women and children bearing the brunt of retrogressive cultural and religious beliefs and attitudes that seek to justify specific types of violence. It is widespread and is a severe human rights violation that is not always given the serious attention it deserves both at the grassroots level and by policy makers. The impact is far reaching, affecting not only the health and well being of the survivors but also undermining the well-being of the community and society as a whole.



Mr. Oliver Kisaka, Deputy General Secretary of NCKK and an author of one of Bible Reflection in the Tamar Campaign CBS manual, making a presentation during a Tamar Campaign event (Nairobi, 2006)

The Gender Violence Recovery Centre (GVRC) was established at the Nairobi Women's Hospital to treat SGBV survivors of all ages both male and female. According to the annual GVRC report, GBV particularly against women, is on the rise in Kenya with 45% of women between 15-49 years having experienced either physical or sexual violence, while nearly half (47%) of married women have experienced emotional, physical and sexual violence.³⁰ FGM/C is still practised amongst a number of Kenyan ethnic groups, with the national prevalence rate standing at 27%.³¹ In the North Eastern County, 64% of women have undergone FGM/C between 3-7 years, while the highest proportion of FGM/C in the Coast County is performed during infancy.³² This happens despite the recognition that FGM/C is a violation of children's rights and a harmful practice that poses great risk to the health and well being of women and girls.

³⁰ KNBS, Kenya Demographic and Health Survey (2008-09)

³¹ IASC (2005). *Guidelines for Gender-Based Violence Interventions in Humanitarian Settings: Focusing on Prevention and Response to Sexual Violence in Emergencies*. Geneva: Inter-Agency Steering Committee.

³² KNBS, Kenya Demographic and Health Survey 2008-09

The presence of male SGBV survivors has increased steadily over the last four years, which is attributed to increased awareness among the population. The Gender Violence Recovery Centre (GVRC) at the Nairobi Women's Hospital provides medical and psychological support services to male survivors. However, the reports of violence among men and boys are relatively low mainly because most of the cases remain unreported mainly out of fear of ridicule and stigmatization.

Men rarely seek legal redress, due to the stigma attached therein.³³ Health providers, law enforcers such as the police force and the judiciary require sensitization on the needs and concerns of male survivors. The support and programmatic focus on female survivors needs to be expanded to include men and boys who are subjected to equally degrading and traumatizing acts of sexual violence especially during times of conflict. According to the Gender Commission, GBV remains a big problem as most people do not report it. Many families fear reporting incidences of incest especially if the perpetrator (such as the father or husband) is also the primary bread winner. The fear comes from the fact that if the father is jailed, there will be no one to put food on the table.

3.2 Conflict and the escalation of SGBV in Kenya

There have been recurrent trends of violence before and after General Elections in Kenya. The worst period was the 2007 Post-Election Violence (PEV) crisis that resulted in the death of over 1500 people, horrific displacement, gang rapes, defilements and sexual assaults of women and children. Women and girls are particularly vulnerable during periods of civil strife. During the 2007 Post Election Violence (PEV), the Nairobi Women's Hospital alone received 2,500 cases of SGBV with 536 being cases of rape. An inter-agency GBV assessment was initiated in January 2008 to examine the nature and scope of sexual violence that took place during the PEV including within the IDP camps. The findings of this assessment confirmed that SGBV had increased during the PEV crisis period. Evidentially, the perpetrators took advantage of the conflict scenario to commit acts of sexual violence with impunity.³⁴ Efforts to protect or respond to the needs of these vulnerable women and girls were compromised by the state of lawlessness during this period and immediately afterward.

3.3 Kenya's Achievements in Advocacy efforts against GBV

Kenya has made significant progress in addressing Gender Based Violence, as well as empowering and protecting the rights of girls and women rights. The Constitution of Kenya, 2010 guarantees protection from inhumane treatment, prohibits torture, inhuman and any degrading treatment. Female Genital Mutilation/Cutting (FGM/C), rape, domestic violence and widow disinheritance constitute torture and inhuman treatment.³⁵ The Kenyan Constitution defines GBV a violation of human rights.³⁶

Article 28 states that:

"Every person has inherent dignity and the right to have that dignity respected."

Article 29 (c) stipulates that:

"Every person has the right to freedom and security of the person, which includes the right not to be- (c) subjected to any form of violence from either public or private sources (domestic violence)".

³³ Ganju et al, (2004)

³⁴ The regions are the North and South Rift Valley, the Coastal Region, Nairobi and Central Province.

³⁵ The Constitution of Kenya (2010): Section 74. This conforms to the definition of violence in the Beijing Declaration and Platform for Action.

³⁶ The Constitution of Kenya, 2010

In order to address GBV, the Government of Kenya (GoK) redefined gender responsive laws such as: the Sexual Offences Act, 2006; Counter Trafficking in Persons Act, 2010; Protection against Domestic Violence Bill, 2012; the Matrimonial Property Bill, 2012; Prohibition of Female Genital Mutilation Act, 2011; and the Marriage Bill, 2012. The Sexual Offences Act, 2009 was a significant move to address SGBV in Kenya. Moreover, various Acts of Parliament define sexual offences and the protection of vulnerable members of the society from unlawful sexual acts such as incest and rape. Collectively, the Constitution of Kenya 2010; The Penal Code; the Sexual Offences Act 2009, and The Children's Act, 2001 provide a secure legal framework to prosecute SGBV cases. The National Framework towards the Response and Prevention of Gender Based Violence was formulated to comprehensively address GBV and link it directly to the violation of human rights. In addition, forms of domestic violence such as wife battering are treated as criminal behaviour. The efforts to pull down the walls of negative masculinity and patriarchy have registered considerable success in Kenya.

A significant number of men are openly coming out to support gender parity and the empowerment of girls and women. A case in point is that more men are investing in their daughters' education. Laws have been instituted to combat the practice in certain cultures of underage girls being married off to elderly men. The enrolment of girls in schools has increased significantly. Furthermore, many men are today supporting their wife's pursuit of education and economic advancement. A larger portion of men are now comfortable with women taking top positions of leadership.

The Kenya Police Service has introduced Gender Desks in Police Stations with women officers specifically to deal with cases of SGBV and the defilement of minors

In response to the escalation of SGBV, the Kenya Police Service has introduced Gender Desks in police stations with women officers specifically to deal with cases of SGBV and the defilement of minors. This is a direct result of the positive efforts made by the civil society, humanitarian organizations, the Ministry of Gender and development partners towards raising awareness on GBV. Efforts have also been made to train police officers on how to handle SGBV survivors. Between 2001 to July 2008, a total of 10,890 cases of Gender-Based Violence were reported at the Nairobi Women's Hospital's Gender Violence Recovery Centre.

The Government, through the National Gender Equality Commission (NGEC) in collaboration with regional humanitarian organizations has actively supported the development of programmes to combat GBV, increase access to justice and integrate support services to survivors of GBV. A number of programmes have been produced and shared with the public to enhance awareness on the vice. The Gender Violence Recovery Centre (GVRC) in Nairobi Women's Hospital works closely with local police centres and NGOs, which together constitute the main sources of referrals to this hospital. The GVRC has also played a significant role in referring survivors to shelters for legal support and counselling. Liverpool Voluntary Counselling and Testing (LVCT) in Kenya has established strong links between health centres and police, social, forensic and legal support services to enable referrals so that, if desired, a prosecution can be initiated. The 'chain of evidence' is an integral component of this process. LVCT respects the right of the survivor to decide on

whether or not to report sexual abuse, and provides information and support to clients undergoing the litigation process.³⁷

3.4 Challenges in addressing SGBV in Kenya

GBV remains a major social problem affecting many families in Kenya with sexual violence being the most commonly reported form of violence.³⁸ According to the Gender Violence Recovery Centre Report (2011-2012), women and girls bear the greatest burden of suffering, accounting for 49% of all reported cases of GBV. Boys and men also form part of the survivors although their numbers are significantly lower and many cases go unreported due to the fear of stigmatisation and shame associated with the vice. According to the same report, about 64 % of the survivors reported knowing the offenders of the violence with 11% refused to identify the offenders due to close family relationships, fear, and threats of further violence or death. Nairobi accounts for over 73% of GBV cases reported with slums being the main affected areas.³⁹

Although the GoK has made strides in creating legal frameworks to address sexual offences, a number of challenges still hinder the reporting and prosecution of offenders. Additionally, the GoK has not put in place adequate legislative, administrative and policy measures to alleviate the pain and suffering of the SGBV survivors. For instance, the criminal justice system focuses primarily on the accused person, notwithstanding the consequences of the assailant's acts, which may include infection with HIV/AIDS, unwanted pregnancies, health complications or death.

There is little knowledge on the importance of seeking health interventions not later than 72 hours for victims of SGBV. Timely reporting facilitates administration of HIV Post-Exposure Prophylaxis (PEP), STI prophylaxis, and Emergency Contraception. Seeking immediate medical care allows for collection of forensic evidence which helps survivors to access justice by ensuring availability of credible evidence. Moreover, institutionalized programs for perpetrators of SGBV are lacking even though the current legislation on gender based violence includes requirements to establish rehabilitation programs for offenders. All key stakeholders need to be fully engaged in the prevention and care as well as in suggesting and implementing measures to improve enforcement of the National legal framework.

3.5 The impact of the Tamar Campaign and CBS in Kenya

The Tamar Campaign was launched in 2005 with the overall aim of providing a safe space and a platform to empower people to speak out about the various forms of Gender Based Violence. Since then, there have been collaborative efforts by various organizations to create awareness about GBV. FECCLAHA has partnered with various organizations based in Kenya including: St. Paul's University in Limuru, The Nairobi Women's Hospital – Gender Violence Recovery Centre (GVRC) and EHAIA to create awareness on GBV and how the Contextual Bible Study Manual can be used as a tool to address GBV.

³⁷Speight et al, 2005; Kilonzo & Taegtmeyer, 2005.

³⁸Gender Violence Recovery Centre Annual Report (2011 – 2012), Nairobi. According to the GVRC, the number of GBV survivors has increased since 2010 with 2,532 cases related to sexual violence and 422 of physical violence.

³⁹Rajab, R. Gender Violence on the Rise. <http://www.the-star.co.ke/news/article-115532/gender-violence-rise-new-report>. Saturday, April 6, 2013.

3.5.1 Mainstreaming the Tamar Campaign at St. Paul's University

St. Paul's University was the first institution of higher learning to mainstream the CBS and the Tamar Campaign into its academic syllabus. The various aspects of GBV are a key component of Practical Theology and thus, have been integrated into Biblical Studies, Counselling and Pastoral Care courses. Accordingly, a tree-planting ceremony was held at St. Pauls University to commemorate the victims and survivors of SGBV in Kenya. St. Paul's University has been at the forefront in the launch and mainstreaming of contextual studies on GBV and HIV/AIDS into their curriculum. Since the launch of the Campaign in 2005, there have been collaborative efforts made by various organizations and institutions to create awareness about the vice.

Despite the efforts that have been made to empower women in Kenya, there still remains a power imbalance between the genders even within the Christian fraternity. Women are often excluded from leadership positions within the church and in society as a whole. Moreover, the culture of silence shields perpetrators of sexual acts of violence such as rape and incest from facing the full arm of the law. In schools and faith-based universities in Kenya, if an unmarried female student becomes pregnant, she gets suspended whereas her male accomplice goes scot-free and continues with his studies.

There are a number of success stories of men who previously manifested harboured Negative Masculinity but after being sensitized on the manifestation and harmful effects of GBV, later changed and championed the cause of transformative masculinity through their behaviour. At St. Paul's University, Prof. Mombo had a mature student who was a member of the clergy who was very chauvinistic and conservative in his perception of women. At the beginning of the course, he was unreceptive to issues touching on the empowerment of women. Gradually, he began participating more in classroom discussions. After a period of exposure to lecture room discussions on redemptive and transformative masculinity, the Tamar Campaign and gender dynamics as a whole, he made the decision to empower his wife economically and psychologically by enrolling her for driving classes (to improve her mobility) and opened up a shop for her. He reported back to Prof. Mombo that all these decisions and his receptiveness to empowering his wife were directly attributable his exposure in this course. Another incident involved a man who would never take Holy Communion if it was served by a woman after being challenged about it through the integrated CBS, was now able to accept communion even from a woman.



Prof. Mombo from St. Paul's University making a presentation during the launch of the Tamar Campaign CBS Manual. (Nairobi, 2008)

3.5.2 The Ecumenical HIV/AIDS Initiative in Africa (EHAIA)



Rev. Canon Byamugisha, Rev (Ms) Pauline Njiru of WCC-EHAIA, and Prof. Mombo of St. Paul's University at a Joint Workshop with FECCLAHA. (Nairobi, 2010).

EHAIA was launched in 2002 under the WCC's Health and Healing Programme, in cooperation with the All Africa Conference of Churches (AACC), to enable churches in Africa to access information, training, and resources and make contact with other churches and bodies working in the same field to help them deal with the HIV/AIDS in their communities. During the last two decades, the World Council of Churches (WCC) has developed a wide range of HIV/AIDS related statements and tools. The Contextual Bible Study has been adopted by the EHAIA as a tool to create awareness about SGBV and HIV/AIDS.

There is a close link between HIV/AIDS and GBV especially with regard to rape and domestic violence in marriage. Many wives

have contracted the disease from their husbands because they are powerless to negotiate for safe sex even when their husbands are unfaithful and have multiple partners. More often than not, women lack the space or power to negotiate for protective sex in marriage even in situations where they are at risk as a result of an unfaithful spouse. Society often turns a blind eye to unfaithful men which subsequently contributes to spread of HIV/AIDS. Unfaithfulness in men is tolerated and condoned whereas unfaithful women are scorned. However, if a woman commits adultery she is ostracized and heavily sanctioned by society as an immoral woman. Sexual promiscuity is condoned in men as manifested in proverbs such as: "a bull dies with grass in its mouth", "don't ask a bull where it goes in the morning; it will come back on its own in the evening".

3.6 The Way Forward

Social transformation, change of attitudes and a re-examination of patriarchal cultural practices cannot happen without engaging community support from men, women, the youth and children as an integral part of the fight against all forms of GBV. The fundamental role of men and boys in fostering gender parity cannot be over emphasized yet it is commonly underestimated because of the misleading perception that GBV only affects women and girls. However, for any strategy or programme to have a significant impact in countering GBV, it must engage men and boys as principle players to advocate against the vice from the grassroots to the national level.

Awareness campaigns would be more effective if a multi-media and holistic approach is used to target the community as a whole. Empowering and raising the capacities of men and boys and packaging advocacy will correct the perception that GBV is a "women's only" struggle and make anti-GBV messages more receptive to men. Moreover, the dialogue of GBV needs to be brought on board as a key component of the national agenda to enhance public consciousness while at the same time, breaking down the walls of secrecy that often shroud the vice. In addition, the sensitization efforts should target community elders and local religious leaders because they are

respected and thus can speak authoritatively to influence particularly men on the harmful effects of GBV. The importance of sharing information, experiences, skills and alternative cultural practices is fundamental as a strategy to address GBV. Currently, there are few linkages and opportunities for organizations to build on the strengths of each other and yet a shared approach to addressing GBV would accomplish much more than is possible through the capacity of a single organization.

Community leaders should be involved in the process of creating and implementing strategies to raise awareness about SGBV by educating communities on SGBV and the legal framework through village barazas, health talks at rural health facilities, and local media. SGBV needs to be integrated into guidance and counselling programs in primary, secondary and tertiary learning institutions as well as the curricula of health workers and the police force. The Ministry of Internal Security should fully implement policy on setting up user-friendly gender desks in all police stations and police posts and train those manning the desks on SGBV. Rescue Centres should be increased and facilitated with adequate support to enable survivors of GBV heal and get empowered. More efforts need to be invested in the implementation of existing legislation on GBV as well as allocating an adequate budget to fight GBV and to provide support for the survivors and their dependants. In addition, there must be greater synergy and coordination in the lobbying and advocacy strategies of civil society organizations, government officials and stakeholders regarding how to deal with GBV. All these different actors working on prevention efforts need to combine their synergies in order to develop holistic, multi-media prevention programs.

End Notes

This chapter benefited from information collected from interviews with Prof. Esther Mombo (DVC – Academic, St. Paul’s University, Limuru) and with Rev. Pauline, the Regional Coordinator of WCC-EHAIA in the Eastern Africa Region. FECCLAHA acknowledges the pro-active role that Prof Mombo and Rev. Pauline have played in championing the Tamar Campaign since its launch in Kenya. Through the passionate and committed efforts of Prof Mombo, gender dynamics, the Tamar Campaign and CBS have been integrated into the syllabus at St. Paul’s University while Rev. Pauline has been instrumental in mainstreaming the Campaign and the CBS into EHAIA’s activities with regard to the intricate link between GBV and HIV/AIDS.



CHAPTER 4

Gender-Based Violence and the Tamar Experience in Eastern Democratic Republic of Congo (DRC)

4.1 Overview

DRC has experienced years of conflict and upheaval for a considerable period of time. The country has vast natural resources including rich agricultural and hydroelectric power potential which attracts internal as well as external economic and political interests, which to a large extent drives the conflict. Since 1998, the Democratic Republic of Congo (DRC) has suffered appalling atrocities and trauma. War and other violence-related causes have resulted in an estimated five million deaths. Over 200,000 women and girls have been subjected to sexual violence with the Congolese Army and armed militias as the prime perpetrators. Faced with repeated denunciations by humanitarian and human rights groups, the army has often reacted with denial and defensiveness, and it has tried to insulate itself from the criticism.

Eastern DRC and particularly North and South Kivu provinces have experienced an acute escalation in conflict and the inevitable sexual and gender based violence. Most women and girls, as well as men and boys, live daily throughout the DRC in a context of massive and widespread denials of their human rights. In addition to the violence, looting and killings of civilians, the wide spread use of sexual violence and torture is horrendous. Over 5,000,000 have died due to the effects of the civil wars in the country.⁴⁰

Over the years, GBV has prevailed in Eastern DRC in various forms that include physical, sexual and psychological violence. SGBV against women and girls – and some men too – has been one of the conflict's most horrific aspects, for its viciousness, magnitude and long-term impact. It has become an epidemic as a result of the continued conflict and also because sexual violence against women is also rampant within the civilian population. A new problem that has surfaced is the increase of abuses perpetrated by civilians thus highlighting the environment of impunity prevailing in the country. Armed conflict has significantly affected gender relations, since women and children are used as alternative "battle grounds" for sexual assault, sexual slavery and forced impregnation. As a result of the conflict in the region, women and children are deliberately targeted in order to "de-masculate" men in the community. Corruption and the weak position of women in economic, political and religious arenas reinforce the perpetration of SGBV.

Four years after the signing of the peace agreements that officially ended the war and after the conclusion of Congo's first ever democratic elections, SGBV still remains widespread. Government forces have emerged as the main perpetrators whilst the number of assaults involving foreign armed groups still present in the area has fallen. Acts of sexual exploitation and abuse committed by UN peacekeepers in the Democratic Republic of the Congo were brought to the international public's attention in 2005. The UN continues to document cases involving children as young as 11 and anecdotal evidence indicates that hundreds of babies have been born of such acts.

This situation is made worse by the stigma that is usually attached to SGBV. Survivors often have to suffer a double tragedy by being rejected by their husbands and also ostracized by their

⁴⁰Ending Mass Rape in the Democratic Republic of Congo: The Role of the International Community, SCIAF,2008 http://www.congoweeek.org/pdf/ending_mass_rape.pdf

communities. Consequently, the humiliating and degrading results of sexual violence keeps many women and children silent and suffering further psychological injuries inflicted on them by those most intimate to them. This culture of silence is what perpetuates the violence and consequently accelerates the spread of HIV/AIDS. A combination of spiritual, legal, psychological and health support is therefore required to facilitate the holistic healing of the SGBV survivors. The number of attacks continues to increase as more perpetrators go unpunished.

Traditional and deeply-held cultural beliefs and value systems devalue women and girls leading to a general disregard of their rights. Moreover, a culture of impunity has prevented the State, international and national actors from providing security and protection for civilians, particularly for the thousands of women and girls who have been raped and experienced gruesome acts of sexual torture during the numerous conflicts in the DRC. Almost 50% of GBV survivors in the DRC are girls under the age of 18. In the first quarter of 2009 a high number of rapes were reported by UNFPA in both North and South Kivu than in all of 2008. This is attributed to the joint military actions of the Armed Forces of the Democratic Republic of Congo (FARDC), Rwandan Defence Forces (RDF) and the National Congress for the Defence of the People (CNDP).

Although women represent the overwhelming number of those affected by SGBV, men and boys are have also been sexually violated and tortured by the different sides in the conflict, to humiliate, pacify, or as a disempowering strategy to inflict shame on them as perceived enemies.

The widespread use of SGBV as a weapon of war demonstrates a “spill over” effect into the civilian population as a result of a breakdown in socio-cultural norms and values. The percentage of rapes and violations perpetuated by civilians has increased dramatically. Child soldiers and other combats including disempowered youth and civilian men have become part of a growing culture of sexual violence. In an environment where conflict has led to the dissolution of the state and widespread culture of impunity and corruption, there is also no accountability or application of laws and penal codes aimed at fighting sexual violence against women and men. Rarely do survivors seek assistance through the justice system because of ignorance and shame.

4.2 The Quest for Justice for SGBV Survivors

Efforts have been made by the Human Rights Division of MONUSCO (the UN Mission in DRC) and national partners (such as Arche D’Alliance and the Synergy of Women’s Associations for the Fight Against Sexual Violence), to sensitise law-enforcing agents as well as the general population on the definition of rape, the notion of consent and the illegality of forced marriages. To be successful, such advocacy requires access to remote areas that most agencies do not have. One of the



Dr Denis Mukwege (right) of Panzi Hospital in Eastern DRC receives the Tamar Campaign manual from Ms. Judy Waruhiu, formerly staff of FECCLAHA during a visit to the Hospital. (Bukavu, 2008)

challenges of the actors involved in combating SGBV is how to develop participatory and sustainable programmes that remain even after the humanitarian crisis is over and the international humanitarian agencies have left the area. One of the major problems is that humanitarian funding is typically not linked to development funding, so when emergency funding ends, many GBV programmes run by international NGOs also shut down. The impact on women is long-term and can affect several generations. It is a huge challenge to assist the victims, their families and children.

There are major obstacles in the legal system with regard to facilitating the process for survivors of sexual violence accessing justice. Although the legal/justice sector has an obligation to respond to the cases reported and ensure safe prosecution, the system is not necessarily supportive of the rights of survivors. Justine Masika Bihamba, the Director of Synergie⁴¹ reported how difficult it was for her organization to get a case through the court system. An encouraging sign was that in 2012, a military court convicted a soldier to 10 years in jail for raping a six-year-old girl. In addition, the International Criminal Court (ICC) established in 2002, had begun investigations into war crimes and crimes against humanity in the DRC, which includes crimes of sexual violence. However, a major problem is that many of the attacks had been carried out by armed groups, and prosecuting them was impossible. Justice for SGBV survivors in Eastern DRC still has a long way to be achieved. The provision of training and sensitization to the Judiciary and law enforcement officers is an area of focus that the donor community would be well advised to concentrate on. Advocacy efforts must also include lobbying the Government to provide essential services to its citizens.

4.3 The Tamar Campaign and Advocacy Efforts by FBOs in Eastern DRC

The Catholic and Protestant communities are the largest providers of health and education



Officials of the Interfaith Platform in Eastern DRC during the launch the Tamar Campaign in Bukavu - Photo Credit: Interfaith Platform in Eastern DRC.

services in the DRC. Many medical clinics and hospitals in South Kivu do not have the professionally trained personnel capable of providing a holistic and complete quality response to a GBV survivor. In addition, the DRC government and its partners lack resources to provide effectively deal with the psychological and physiological needs of SGBV survivors. This is partly due to the constantly shifting focus of conflicts and the high number logistics in Eastern DRC. Since 2003, the Norwegian Church Aid (NCA) has provided support to facilitate consultations amongst different religious confessions in the Eastern Democratic Republic of Congo (DRC) to explore ways of combating Gender-Based Violence

(GBV). In 2010 the NCA commissioned FECCLAHA to facilitate and oversee the development of an Inter-Faith Forum for combating GBV by exploring the theme of Redemptive Masculinity as an advocacy tool vice. During the Inter-Faith Forum Workshop held in August 2010, two boards were

⁴¹Synergie des Femmes pour les Victimes des Violences Sexuelles (SFVF) is based in Goma and focuses its operations in the North Kivu region.

formed in Bukavu and Goma comprising of representatives from the Forums' constitutions.⁴² The mandate and objectives of the first meeting were to:

- * Bring clarity on the role of faith communities in combating GBV;
- * Create awareness within faith communities on GBV and how to combat it;
- * Develop an inter-faith Advocacy Strategy against GBV;
- * Establish an inter-faith platform for combating GBV through advocacy and women's empowerment in Eastern DRC.

FECCLAHA in partnership with Laissez l'Afrique Vivre (LAV) facilitated two workshops in Bukavu and Goma on November 2010. Both workshops were well attended with delegates from Eglise du Christ au Congo; de Reveil au Congo; Union des Eglises Independantes au Congo; Communauté Islamique au Congo; Neo-Apostolique; Eglise Adventiste; Nazareen Laissez l'Afrique Vivre; Association des Femmes des Medias; Norwegian Church Aid; FECCLAHA and representatives from the DRC army and police force. The workshop focused on a Faith-Based Response to Gender Violence: Exploring Redemptive masculinity; and combating GBV in Eastern DRC through advocacy and lobbying. The objectives of the presentations were to:

- * Explore the dominant images of masculinity in the DRC and their possible link with GBV;
- * Draw a comparison between Biblical and African perceptions of masculinity;
- * Examine the idea of redemptive masculinity as a way of combating GBV;
- * Identify specific ways through which inter-faith groups and religious leaders can create awareness and form coalitions to advocate against GBV; and
- * Critique and improve the North and South Kivu advocacy strategies to fight GBV from an inter-faith-based platform.

During the workshop, the significance of the Tamar Campaign and CBS was reiterated with reference to how it acknowledges the existence of Sexual Gender-Based Violence (SGBV) and seeks to challenge the Church and other religious institutions to break the culture of silence. During the workshop, religious leaders were urged to be more pro-active in speaking out against this violence.

Tamar Campaign and the United Nations Security Council Resolution 1325 (UN SCR 1325)

FECCLAHA in collaboration with its member Church of Christ in Congo (ECC) organised a workshop on the United Nations Security Council Resolution (UN SCR 1325) and the link to level of participation in leadership for women in Democratic Republic of Congo (DRC). The workshop, that took place in Bukavu, Eastern DRC in September, 2012, created a space for theological reflection on Women and Leadership not only among the women in DRC, but also among the leaders in the Church. Additionally, information was shared on the current Constitution and the



Women engage in a group discussion during FECCLAHA workshop on UN SCR 1325 in Eastern DRC, Bukavu, 2012.

⁴²Inter-Faith Forum for combating GBV through Advocacy and Women Empowerment in Eastern DRC, Workshop Report, August 2010.

UN SCR 1325 and its relevance to the woman in Eastern DRC. The workshop drew participants from different territories in North and South Kivu which include Masisi, Lubero, Walikale, Walungu, Shabunda, Rutshuru, Goma, Bukavu, Kalehe, Beni, and Kinshasa.

4.4 Activities of the Inter-Faith Platform since the launch of the Tamar Campaign and CBS

In August 2010, the Inter-Faith Platform was established to enhance peace building and to combat



Officials of the Interfaith Platform in Eastern DRC during the launch the Tamar Campaign in South Kivu - Photo Credit: Interfaith Platform in Eastern DRC

Gender Based Violence (GBV) in Bukavu, South Kivu Province in Eastern DRC. It consisted of about 70 leaders representing different religious groups in South Kivu Province and was facilitated by the NCA working in the Great Lakes region and FECCLAHA. Other groups represented included civilian society leaders, the Deputy Provincial leader, Mrs, Rev Masoka, and representatives from the police and universities in the region. From October 2010 to

December 2011, the implementation of structures and programmes based on the Tamar Campaign took place under the guidance of the Interfaith Platform Committee which consisted of six main confessions group from Bukavu, South Kivu Province. These were the Protestant Churches (ECC); the Independent Churches; the Catholic Church/SDJP; the Revival Churches and Kimbangist Church; and the Muslim community.

In 2011, the Inter-Faith Platform participated in the electoral process in DRC by creating awareness amongst political leaders and members of the public in South Kivu Province to desist from acts of violence before, during and after the announcement of the election results. The awareness campaigns and education of the population was conducted through the mass media (radio), communiqués from church pulpits in parishes, mosques and institutions of learning. Religious leaders and their assistants participated in this sensitization exercise. The Tamar Campaign was officially launched in December 2012 in Bukavu. In attendance was the TNCA team, religious leaders, members of the public, representatives from the government, the military and police, the media, the civil society and NGOs, Panzi Hospital, amongst other groups.

During 2012 to 2013, members of the Interfaith Platform Committee trained facilitators from over 450 churches and parishes, mosques and universities on the Tamar Campaign, the DRC and International laws against acts of GBV. Moreover, they established more than 250 REFLECT circles

on the Tamar Campaign in Bukavu, Uvira and Sange. In 2013, a total of 850 facilitators and leaders in Bukavu, Uvira and Sange were trained by religious leaders and their assistants on how to organize open circle group meetings of between 20 to 25 people to meet twice a month in religious or educational institutions or on public forums. Their role would be to moderate the groups to share their experiences on various acts of GBV including sexual abuse in their community and to facilitated the development of action plans to end this violence. In addition, these action plans were to promote gender justice in society with a special focus on highlighting the important role of women society as well as to assist the survivors of SGBV spiritually, physically, emotionally, socially and legally.

Between September and October 2013, the Inter-faith coordinators developed a tool for trainers on Positive Masculinity and the Tamar Campaign to act as a guide for trainers on GBV in Bukavu. It is in both French and Kiswahili and outlines Bible, Koran and legal principles and laws that relate to GBV and is available in both French and Swahili. In October 2013, the Inter-Faith Platform launched its official website.⁴³ It is anticipated that by March 2014, an Islamic Contextual Koran Study of selected texts concerning GBV and sexual abuse similar to the Tamar Campaign Manual will have been developed and launched under the guidance of twelve Muslim leaders (six men and an equal number of women) from North and South Kivu with technical and financial support from the Interfaith Platform and the NCA. Currently, the production of film and drama on SGBV in Bukavu is underway under the supervision of the Catholic Church, the Independent churches and the ECC.

4.5 Achievements of the Tamar Campaign in combating Gender Based Violence in Eastern DRC

The implementation of the Tamar Campaign in churches, mosques, parishes has led to better relationships and conflict resolution through dialogue within marriages and between employers and employees at the workplace. Cultural attitudes and practices which violate the rights of women are now being challenged. For instance, culturally only men could have a say in major decisions but there has been a gradual recognition that women too have the same rights as men. The Tamar Campaign has helped people in South Kivu to (especially members of churches and mosques) to recognize the violence in their community and to take action on how to prevent it.



A team led by FECCLAHA during an Assessment of areas of engagement with Panzi Hospital, Gender Violence Recovery Centre in Nairobi and Centre d'Assistance Medico Psycho-Sociale (Camps)-CELPA. (Bukavu, 2008)

⁴³Inter-Faith Platform website is : <http://coorsidh.wix.com/interfaith-for-peace>

The Tamar Campaign and the CBS have had tremendous impact on the operations of the Interfaith Platform. It has been instrumental in helping the community (especially religious groups) to break the silence around SGBV and encouraged open discussions about the rights of both women and men in accordance with the Bible and Koran (for the Muslim groups) the legal framework in DRC as well as international laws. The approach of addressing GBV using the CBS has provided visibility for the Interfaith Platform locally as well as nationally. The activities of the Interfaith Platform in promoting gender equality and peaceful conflict resolution have been recognized by members of the public, the Civil Society and like-minded NGOs as well UN organisations whose activities involve the promotion and protection of human rights. This enabled the Interfaith Platform to obtain a certificate of merit from the Provincial Civil Society Committee in 2012.



Engaging members of the DRC Disciplined Forces in awareness and sensitization efforts to address SGBV, Eastern DRC, 2006.

In regard to this, the UNHCR facilitated two workshops in partnership with the Interfaith Platform to strategize on how to coordinate activities relating to SGBV and the protection of human rights by focusing on the role of the confessions groups in the community. Other organizations that have shown interest in the operations of the Interfaith Platform include UNICEF, Tear Fund, Word Vision, Page-Societe Civil/MONUSCO, CAPSA, ECES (Centre Européen d'appui au processus électoral), amongst other organizations.

The CBS has helped the Interfaith Platform to identify the root causes of some of the social problems within the

community, and to subsequently develop strategies and Action Plans to address these problems by engaging the youth, adult men and women, religious leaders, and the community as a whole to promote a change in the mindset of the population. Many women have testified that the Tamar Campaign empowered them with a comprehensive knowledge of their rights and to reclaim their rightful place in society.

The synergy between different religious groups in peace building and the promotion of gender equality is progressing steadily in Kivu and Bukavu. The Muslim community, the Catholic Church, Protestant churches (ECC), the Kimbangist church, Revival and Independent churches are working closely together on the Tamar Campaign. Programmes (discussion sessions) on positive masculinity and peace building have been facilitated since 2010 in an effort to change the attitudes and mindset of the community to protect the rights of women, to recognize the important roles they play in society and to combat all kinds of violence including GBV and sexual abuse. The dynamics involved in bringing together different religious groups for a common cause contributes tremendously to consolidate peace in the community. Leveraging on this consolidated relationship, the different faiths are better placed to advocate better against GBV to the authorities and make their voices heard.

Government authorities including representatives from the military and police chaplains, the Ministry of Justice, government officials in South Kivu and politicians attended the launch of the Tamar Campaign on December 2012. They encouraged the Interfaith Platform to extend the Campaign to the whole province of South Kivu and be promised to associate with them during the evaluation and monitoring of the impact of the Campaign. The Platform is currently pursuing this goal but is limited in resources and requires more partners to fulfil this far-reaching objective.

4.6 Outcomes of the Tamar Campaign and CBS in combating Gender Based Violence in Eastern DRC

The implementation of the Tamar Campaign in churches, mosques, parishes has led to better relationships and conflict resolution through dialogue within marriages and between employers and employees at the workplace. Cultural attitudes and practices which violate the rights of women are now being challenged. The Tamar Campaign has helped people in South Kivu to (especially members of churches and mosques) to recognize the violence in their community and to take action on how to prevent it.



A Tamar Campaign Circle in Uvira Territory, Bukavu, 2012)

The recognition that men and women are meant to share equal rights are gradually being accepted especially amongst those groups in churches and mosques who have been sensitized by the Tamar Circles, which have been established by the Interfaith Platform within churches, schools, universities and through radio programs held by confessional groups affiliated to the Interfaith Platform or throughout the stories/testimonies of persons whose mindset has been changed by the contextual study of the Bible. The Tamar Circles provide support to survivors of SGBV and empower women to denounce the violence which has affected them. This support includes trauma counseling; social and spiritual care as well as legal advice. In so doing the human rights of women are put on the agenda. Most of the women were ignorant of their rights prior to being sensitized by the Tamar Campaign in South Kivu Province.

The Interfaith Platform was awarded with a Certificate of Merit from the Provincial Civil Society Committee in 2012 Other organizations that have shown interest in the operations of the Interfaith Platform include UNICEF , Tear Fund, Word Vision, Page-Societe Civil/MONUSCO, CAPSA, ECES (Centre Européen d'appui au processus électoral), amongst other organizations. The CBS has helped the Interfaith Platform to identify the root causes of some of the social problems within the community, and to subsequently develop strategies and Action Plans to address these problems by engaging the youth, adult men and women, religious leaders, and the community as a whole to promote a change in the mindset of the population. Many women have testified that the Tamar Campaign empowered them with a comprehensive knowledge of their rights and to reclaim their rightful place in society.

The synergy between different religious groups in peace building and the promotion of gender equality is progressing steadily in South and North Kivu. The Muslim community, the Catholic Church, Protestant churches (ECC), the Kimbangist church, Revival and Independent churches are working closely together on the Tamar Campaign. Programmes (discussion sessions) on positive masculinity and peace building have been facilitated since 2010 in an effort to change the attitudes and mindset of the community to protect the rights of women, to recognize the important roles they play in society and to combat all kinds of violence including GBV and sexual abuse. The dynamics involved in bringing together different religious groups for a common cause contributes tremendously to consolidate peace in the community. Leveraging on this consolidated relationship, the different faiths are better placed to advocate better against GBV to the authorities and make their voices heard. Government authorities including representatives from the military and police chaplains, the Ministry of Justice, government officials in South Kivu and politicians attended the launch of the Tamar Campaign on December 2012. They encouraged the Interfaith Platform to extend the Campaign to the whole province of South Kivu and be promised to associate with them during the evaluation and monitoring of the impact of the Campaign. The Platform is currently pursuing this goal but is limited in resources and requires more partners to fulfil this far-reaching objective.

4.7 Combating GBV through Advocacy and Coalitions

The inter-faith religious leaders, who took part in the workshops in Eastern DRC, developed an Advocacy Strategy to fight SGBV targeting multiple audiences at the local, national and international levels as follows:

Local level: The local leaders to be targeted include local opinion leaders, parliamentarians, as well as the Mayor and Governor of North and South Kivu provinces. It was observed that the Governor and leaders of the disciplined forces (Police and Armed Forces) in the two provinces need to be sensitized concerning legislation on sexual violence against both women and men.

National level: Advocacy efforts need to target the DRC government to install survivor units all over the country especially in Eastern DRC where GBV is prevalent. The relevant government officials are the National Parliament and Senate of Congo, Members of Parliament, the Congo Armed Forces, the Ministries of Justice and Social Affairs, Gender and Human Rights.

International level: The Civil Society, UN bodies involved with Gender and Human Rights issues, NGOs, envoys from the UN and EU, SADEK and the Great Lakes Communities would need to be sensitized about the extent of human rights violations in the Eastern DRC.

End Notes

This Section benefited immensely from the information provided by Pastor Steinar Eraker in October 2013 during his visits to eight Tamar circles (similar to Contextual Bible Studies) in six different religious groupings of the Inter-faith Platform in South Kivu, DRC. The groups consisted of representatives from the Neema-Golgotha (Revival) Church in Bukavu; Ave Maria (Catholic) Chapel; Saint Bakita Catholic School; Paroisse de Bugabo–Communaute Baptiste au Centre de L’Afrique; the Muslim Mas-ji-Takwa Mskiti – Karhale; the Kimbangist Church and the Universite Simon Kimbanguiste in Bukavu; CELPA-Makedonia (ECC); and Eglise Ufundo–Communaute les Episcopales et Pentecostistes de la Resurrection en Christ (Independent Church (CEPRC). Member of the various groups consisted of women, men and youth from high schools and universities. The current coordinator of the Inter-Faith Platform is Rev Ghislain Bafunyembaka from the Revival Church in South Kivu. This section provides insights shared by six of the groups as they deliberated upon the Tamar story and its practical applications to the community in Kivu, Bukavu and the DRC as a whole.



CHAPTER 5

Gender-Based Violence and the Tamar Experience in Tanzania

5.1 Overview

GBV is a reality in the lives of many women in Tanzania and is widespread mainly due to gendered cultural norms and socio-economic inequities that give privilege to men over women. Various forms of GBV are prevalent with many of these acts trivialized and accepted as “normal.” Women and girls are also frequently blamed for causing or provoking GBV and due to this blame and shame, women and girls rarely report GBV to authorities or seek other kinds of treatment or support. An investigation conducted by the Tanzania and Demographic Health Survey (TDHS) found that 44% of married women had experienced physical and/or sexual violence from an intimate partner in their lifetime.⁴⁴ In the 2010 TDHS, over 20% of Tanzanian women aged 15-49 years reported having experienced sexual violence in their lifetime and nearly 40% reported having experienced physical violence.⁴⁵ The same survey showed that 44% of ever-married women had experienced physical and/or sexual violence from an intimate partner in their lifetime. A nationally representative survey of violence against children found that nearly 75% of girls and boys had experienced physical violence (either by an adult or intimate partner) by the age of 18 years, and that nearly 3 in 10 girls had experienced sexual violence before reaching adulthood.⁴⁶

5.2 The Legal and Policy Framework for GBV in Tanzania⁴⁷

At the policy level, there have been signs of support to actively address GBV. President Jakaya Kikwete publicly stated that GBV should be addressed and dealt with accordingly as one of the Millennium Development Goals.⁴⁸ Furthermore, Tanzania’s National Strategy for Growth and Poverty Reduction lists violence against women as one of its indicators of poverty—which is rare among poverty reduction strategy papers in other countries. However, critical gaps exist in providing appropriate support to women who have experienced GBV. These gaps were found across geographic sites, but barriers to help-seeking and access to care were especially prevalent in rural sites and those outside of Dar es Salaam. Socio-cultural and structural barriers limit the opportunities for survivors of GBV to seek help in Tanzania. As a result of these barriers, few women seek or receive appropriate support services. There is no comprehensive legislation on GBV. The Sexual Offence Special Provisions Act (SOSPA) of 1998 imposes harsh penalties for perpetrators of sexual violence, but it has gaps, covering only women and girls (not men and boys). Although it covers domestic violence, it does not cover marital rape. Domestic violence is not an offence under the Law of Marriage Act, which also does not cover marital rape.

⁴⁴ National Bureau of Statistics (NBS) & ICF Macro. (2011). *Tanzania Demographic and Health Survey 2010*. Dar es Salaam: NBS and ICF Macro. NBS et al. (2011).

⁴⁵ United Nations Children's Fund (UNICEF), Centers for Disease Control and Prevention (CDC), & Muhimbili University of Health and Allied Services (MUHAS). (2011). *Violence against children in Tanzania, National Survey, 2009*, Dar es Salaam: UNICEF, CDC, & MUHAS. August 2011.

⁴⁶ Betron, M. (2008). *Gender-based violence in Tanzania: An assessment of policies, programs, and Promising interventions*. Washington, D.C.: USAID Health Policy Initiative.

⁴⁷ USAID: Report Summary (Nov. 2008). *Gender-based Violence in Tanzania: An Assessment of Policies, Services, and Promising Interventions*.

⁴⁸ Interview with UNIFEM representative Salome Onyote. September 18, 2008.

Institutional reforms in the Government promise paths toward responding to and preventing GBV. Each ministry has a gender focal point, and the Ministry of Community Development, Gender, and Children (MoCDGC) has initiated efforts to train the focal points on ways to mainstream gender into the work plans and budgets of the various ministries, departments, and agencies (MDAs). The Inspector General of the Tanzanian Police Force had instituted reforms to make the police more accessible to the community and more responsive to the community's needs. Out of this initiative, the Tanzania Police Female Network (TPFNet) was created, and with it came the creation of gender desks to respond to cases of GBV at police stations.

Despite these incipient reforms, the number and quality of services and resources available to survivors of gender-based violence is minimal. While service providers such as doctors and police respond to GBV when presented with a case, there are no protocols for working with survivors. Legal aid services run by small NGOs with limited budgets are available in cities throughout the country, but there is a wide gap in health, counselling, and social welfare services for GBV survivors. There are just two known established shelters for GBV survivors, namely the Young Women Christian Association and House of Peace—both located in Dar es Salaam.

5.3 Socio-Cultural and structural impediments to accessing Justice

Socio-cultural and structural barriers prevent survivors of GBV from seeking help and from obtaining appropriate services if they decide to enter help-seeking channels. Socio-cultural barriers include lack of awareness of fundamental rights especially for women to live free of violence and to seek justice in cases of violence, the community's acceptance of violence as "normal," and women's fear of being blamed for reporting rape.



An Advocacy Workshop on the Tamar Campaign

Women also fear the social and economic consequences that may result from reporting their husbands to local authorities, including the escalation of violence or being left without financial support in the case of divorce.

Structural barriers include direct and indirect costs, distance to formal providers (particularly for women in rural areas), and corruption. Corruption, for example, can prevent a woman from accessing justice if the perpetrator has the means to "pay off" the police or local government official, or if extra payments/bribes are demanded beyond the required cost of a particular service. Lack of quality care and support due to delays in service provision, lack of proper protocols, and inadequate training of service providers in GBV are further structural barriers. Finally, there is a notable gap in psychosocial services for survivors across all provider types and sources of support.

5.4 Faith-Based Organizations and the Tamar Campaign

The Christian Council of Tanzania (CCT) and the Young Women's Christian Association (YWCA) in Tanzania both recognize that the TAMAR Campaign is as an effective advocacy channel to break the silence around acts of GBV including rape, domestic violence and Female Genital Mutilation (FGM). FECCLAHA was actively involved in the initial training on the Tamar Campaign and CBS. The specific objectives of the Tamar Campaign in Tanzania include breaking the chains of silence and denial regarding the prevalence and consequences of sexual and domestic violence and instead, encouraging religious institutions to speak out against the vice. The Campaign also aims at building capacity of religious institutions to provide support to victims and hold perpetrators accountable for their heinous acts.

The Christian Council of Tanzania (CCT) has integrated and utilized the Tamar Campaign as an advocacy program that aims at breaking the silence that often shrouds GBV. The primary focus of this advocacy is on rape, domestic violence and FGM/C. The objective is to mobilize women, men, the media and faith-based organizations to say: 'No to Rape, no to FGM and no to domestic violence'. The implementation of this National campaign was rolled out in Arusha, Dar-e-Salaam, Mwanza, Mbulu, Mara and Shinyanaga regions of Tanzania and it is expected to spread to other regions of the country.

The Young Women's Christian Association of Tanzania was established in 1959 in Tanzania and is committed to the Christian principles of love and service. The YWCA has assisted many survivors of domestic violence with counselling support, medical care and provided them with the technical knowledge and financial support to become financially independent by launching small income generating activities. In this way, this association has helped many survivors (mostly women and children) to move out of their violent environments and given them "safe spaces" that offer better lives.

The advocacy and lobbying strategy has involved engaging actively with the local government, media houses and religious leaders in raising consciousness, understanding and knowledge of GBV. The overall goal was to create an enabling environment and a safe space for people to report cases of GBV and also where the likelihood of individuals committing acts of violence is reduced.



A Beneficiary of the VICOBA empowerment and Training Programme in Tanzania - Photo Credit: YWCA-Tanzania

5.4.1 Translation of the Tamar Campaign and CBS into Kiswahili

Through the collaborative efforts of the YWCA and FECCLAHA, the CBS was translated into Kiswahili. This has greatly empowered church leaders to better understand and easily identify the lessons and discussion points at the end of each session. FECCLAHA played a significant role in translation and publication of Kiswahili translation of the Contextual Bible Study Manual. Many of the phrases and concepts as used in English are not easily understood by the general public. This has enabled religious leaders to more effectively convey the messages of the CBS to a broader audience. The YWCA has fostered close working relationships with other church associations through this

program, including “Umoja wa Madhehebu” (“Union of Denominations”) in Mwanza, Arusha, Dar es Salaam, Mara and Shinyanga Municipals, and in Mbulu district. Additionally a partnership has been formed with “Umoja wa Madhehebu” which is expected to continue beyond the stipulated programme period.

The YWCA established a Tamar Campaign Committee which offers a concerted effort towards addressing cases of various forms of violence meted against women. The organization has also provided refuge and improved the lives of many women and children who are survivors of GBV. The translation achievement notwithstanding, there still exist some technical theological concepts found in the CBS which general audiences may not easily relate with. This call for further training of facilitators of the CBS to effectively communicate the messages of the CBS, without comprising on the Biblical truths contained in the Manual.

5.5 Role of the Christian Council of Tanzania in combating GBV

The Christian Council of Tanzania (CCT) has mobilized local men and men, the media and faith-based organizations to speak against these retrogressive acts of violence. The implementation of the National Campaign against GBV was initiated in Arusha, Dar-e-Salaam, Mwanza, Mbulu, Mara and Shinyanaga and is expected to spread to other parts of the country. A baseline survey conducted by the CCT in the five districts revealed that the practice of FGM was rampant particularly on young girls. For instance, in Singida district, FGM is practiced on girls as young as one day old.

The reason for this is the fear of legal action being taken against the perpetrators as there is a law against FGM in Tanzania. This explains the practice of FGM on infants as the risk of the perpetrators being caught is greatly reduced. In the other four districts, FGM is performed on older girls ranging from 12 to 14 years of age. Over 80 percent of women in Tanzania do not give birth in hospitals but instead deliver with the help of traditional birth attendants (TBAs). In most cases, it is the TBAs who perform the FGM. The CCT Women Development, Children, and Gender Programme (WDCG) continue to engage different stakeholders to counter FGM in these districts.

Through the Women’s Development, Children and Gender programme (WDCG), the CCT has advocated against GBV and in particular, Female Genital Mutilation (FGM) in five districts, namely: Kiteto (Manyara Region), Singida (Singida Region), Tarime, Serengeti and Rorya districts in the Mara region. This initiative has led to active engagement in promoting the empowerment of women in social justice with an emphasis on gender equity. The programme has also enhanced the capacity of women and children to effectively participate in decision-making processes to improve their political, socio-economic and cultural well being.

The advocacy programme against FGM in Singida district led to a number of FGM practitioners giving up the tradition after CCT sensitizations; schools children making a difference since anti FGM issues are now mainstreamed into primary school programs. The festival was eye opener to parents who had taken FGM for granted. Children demonstrated against FGM with a lot of emotions where some broke down into tears and some parents stood up to declare no more FGM in their homes.



A Contextual Bible Study as part of the Tamar Campaign in Bunda, Tanzania. - (Photo Credit: CCT)

5.6 Challenges to eradicating FGM

The CCT recognizes the need to engage the traditional women FGM practitioners (Ngariba) in the fight against the vice. However, there are challenges on even how to identify the perpetrators of this practice let alone engaging them in any activity. This is because these women fear being taken to court since the practice is illegal. In rolling out the project, CCT worked with the District Maternal and Child Health Coordinator (MCH) to identify 65 traditional birth attendants (FGM perpetrators) in Sunya and Engusero wards, Kiteto district in 2010.

In collaboration with the District MCH coordinator, training programmes on the harmful effects of FGM were conducted and the women demonstrated a good understanding of pertinent issues of FGM including socio-economic, psychological issues and legal implications of such this practice. With the assurance that no legal action would be taken against them, the women all admitted to previously having performed acts of FGM on young girls. However each appreciated the fact that the tradition is harmful and needed to be stopped. The challenge was that performing FGM was a source of livelihood for them and hence, alternative sources of income were necessary if indeed they were to stop the practice. In this regard, the women were advised to strengthen the other means of getting money while CCT explored ways of building entrepreneurship skills among the women circumcisers.

The CCT has worked with traditional leaders in Mara to address FGM and a number of successes have been documented including a girl who refused to undergo FGM after marriage. She returned to her parents and since the parents had been sensitized through CCT programs they accepted their daughter back and gave the cows they had received as dowry. The girl is currently attending vocational studies with support from CCT while her parents are used as facilitators of adult programs on advocacy against FGM.⁴⁹

⁴⁹See Annex 2 of this publication for a comprehensive account of Domina's story

5.7 The Tamar Campaign and the YWCA

The Young Women's Christian Association of Tanzania (YWCA) implemented the Tamar campaign in 2008 as a direct response to the prevention and elimination of Gender Based Violence (GBV). Media campaigns through radio messages have been conducted to sensitize the general public on the need to break the silence on the different forms of GBV including rape and domestic violence. In addition, the YWCA has conducted a number of trainings on the CBS to church leaders and their congregants. Such trainings have been facilitated in schools, women's group meetings and in faith-based organizations. Through the sharing of stories during the CBS sessions, men, women and the youth have become increasingly convicted and empowered by the word of God to come out and share their personal experiences of GBV and other forms of abuse openly.⁵⁰

A new-born was abandoned by his mother and found still wrapped in his placenta. He was found near the Anglican Church, Mwanza, Tanzania, where the YWCA's Campaign Chairperson, Ms. Pauline Gasabile, works. As the baby was still alive she reported this incident to other members of the 'TAMAR Campaign' and also to the police. The baby, Paulo, was taken to the nearest hospital for medical care and was provided with basic necessities like clothes and milk. Paulo is now under the care of Starehe orphanage Centre located in Mwanza City. The TAMAR Campaign Committee now pays frequent visits to see how Paulo is doing; he now has hope for a better future. (From YWCA Tamar Circle: Baby Paulo's story)

5.8.1 The VICOBA Programme and Entrepreneurship training

The Vicoba groups refer to Village Community Banks that were established to train participants from the CCT, YWCA and the affiliated churches locals on entrepreneurship skills in order to improve their living standards. Paralegal trainings have also been conducted for YWCA branch staff and other community workers in order to empower them to educate community members on family law and the rights within marriage, GBV, and the inheritance rights of women and children especially with regard to ownership of land and other matrimonial property. Through the Vicoba groups, women have become more economically empowered since they now have the opportunity to save some of their income as well as having the opportunity to borrow against their savings to start up alternative income-generating activities and handle any emergencies. This also gives them the ability to remove themselves and their children out of violent domestic environments if threatened. The following account highlights the benefits of the Vicoba groups and their economic empowerment of women.

A Vicoba group was established in Kiteto as a way of sustaining advocacy programmes against FGM. Kiteto is one of the districts in the Manyara region and is mainly occupied by the Maasai community whose cultural practices include FGM. Other communities living in this district have also adopted this practice as a result of close cultural contact with the Maasai. The CCT's advocacy against FGM in Kiteto started in 2008 after a baseline survey showed the highest prevalence of FGM in the district. CCT has worked on anti-FGM programs in collaboration with the district Maternal Health Coordinator as well as the district's Department of Social Welfare. The efforts to sensitize traditional women birth assistants have improved their understanding of FGM issues. These traditional birth assistants are in reality the perpetrators of FGM. Through advocacy programs, the birth assistants have gradually come to understand that this practice is both illegal and harmful to young girls. YWCA directly supports survivors of violence as part of the Tamar campaign through offering assistance (money/shelter/comfort) in emergency situations. Additionally we support the survivors in the process of seeking legal action/defending their rights

⁵⁰See Annex 2 for success stories as a result of initiatives by the YWCA available on the YWCA-Tanzania website

in the forms of direct intervention or in just offering advice. The paralegal training of YWCA branch staff has facilitated this process immensely.⁵¹ While the Vicoba programme focuses primarily on improving the economic status of community members, it also provides a forum to discuss gender-based issues. Through the initial efforts of eight Vicoba facilitators in Kiteto, there are now twenty eight groups in the area, with an average of thirty members each. The groups have managed to collect 40 million shillings through sale of shares to members. The bulk of this money has been given out to members as soft loans.

Entrepreneurship training is a valuable component of the Tamar Campaign where women and children learn new skills which empower them to gain skills that will enable them to earn an income and thus give them the capacity to support themselves after leaving a violent domestic situation. Additionally, survivors of GBV are taught valuable skills which allow them to prosper in their new situation.

End Notes

This section has benefited immensely from the views presented by Rev. Ngoy Leita Mwakilima during the Gender Focal Point Consultation workshop facilitated by FECCLAHA in December, 2012⁵² and Rev. Itika W. Mwakabana, the Coordinator of the Tamar Campaign in YWCA-Tanzania.

⁵¹Rev. Ngoy Leita Mwakilima is the Women and Gender Representative at the Christian Council of Tanzania (CCT)

CHAPTER 6

Gender-Based Violence and the Tamar Experience in Burundi



6.1 Overview

The end of armed fighting did not necessarily bring with it the longed-for peace. The 12-year civil conflict in Burundi led to a dramatic increase in GBV (GBV) in the country. Conflict and massive population movements in Burundi resulted in dramatic increases in rape and other forms of sexual violence. Over 90% of women in Bujumbura Rurale province have either experienced sexual violence themselves or knowing someone who had. Rebels and military personnel were not the only perpetrators of sexual violence. Survivors reported that the majority of attacks were committed by members of their extended family, teachers and household domestic staff. This reflects a general breakdown in social norms, withering of traditional conflict resolution and community sanction mechanisms and absence of functioning state law enforcement and judicial institutions.

While the war might have been the trigger for an increase in sexual violence, only genuine peace and increased livelihood security – not just absence of armed conflict – would the level of sexual violence fall significantly. An epidemic of GBV continued to undermine efforts to bring stability in Burundi. With over 5,000 young male soldiers in the peace-keeping mission there, the challenge of maintaining acceptable codes of behaviour among the soldiers was formidable. The sheer increase in numbers of soldiers on the ground during the period of conflict created an added burden of sexual exploitation or prostitution. In addition to the breakdown of economic, social, and cultural structures, GBV has been widely used as a weapon of war. While the cases of sexual violence related to conflict are very high, Burundian women also suffer from other types of GBV such as domestic violence; economic, political and social subordination.⁵³ Women and girls in Burundi are generally viewed as inferior and often subjected to violence. Common cultural practices in Burundi include forced marriages, such as the marriage of a widow to her brother-in-law or father-in-law, severe punishment for rejecting a forced marriage and killing females who get pregnant out of wedlock.

There exist negative cultural attitudes toward females contribute to the prevalence of GBV, including the stress surrounding widespread poverty, limited access to job opportunities and land for cultivation, as well as misconceptions regarding AIDS - some in Burundi believe that having sex with a virgin can cure the disease, which is increasing the vulnerability of young women and children to GBV. The recently amended Burundian penal code still does not grant women the right to legacy (only men are entitled to inherit property if a family member passes), recommends light sanctions to perpetrators of GBV and omits rehabilitation (including psychosocial support and reintegration into family and community) for GBV survivors.

Alarm about the high incidence of sexual violence against Burundian women was first sounded during the 1993-2003 civil wars when large numbers of rebels and Burundian armed forces occupied villages and towns. Peace accords were finally signed in 2003, and general elections held in 2005, but Burundian women and girls continue to suffer high levels of sexual violence. Despite its prevalence, sexual violence remains a taboo subject in Burundi and stigma against survivors is

⁵³CARE International, *Gender-based violence in the Great Lakes Region: A policy analysis on legal frameworks for the protection of women and girls and for care and support for GBV survivors*, April 2009.

extremely high. In post conflict Burundi, the influx of returning refugees and displaced persons, the presence of large numbers of demobilised ex-combatants, the high prevalence of female-headed households, widespread lack of economic opportunity and general breakdown in social norms all contribute to increased levels of sexual violence. In 2004, 1,664 cases of survivors of sexual violence sought judicial assistance.

6.2 The Political, Legal and Socio-cultural Framework in Burundi

Burundi's post-transition Constitution emphasizes principles of gender equality in principle. The



Mrs. Perpetue Kankindi, CNEB Women, Family, and HIV/AIDS Coordinator, during a Tamar Campaign Peaceful March against Violence on Women (Bujumbura, 2008).

Penal Code defines rape and domestic violence as criminal behaviour warranting harsh penalties. It also adheres to the comprehensive definitions of genocide, war crimes and crimes against humanity as stipulated in the Rome Statute, the Geneva Conventions and the Convention against Genocide. However, Burundian women still remain disadvantaged socio-economically with limited opportunities to inherit land, which makes them economically dependent on male relatives and husbands. The Government of Burundi has been slow to

establish a national policy, plan of action or strategy to eradicate GBV against women and children or to at least reduce the obstacles for retributive justice for the survivors. On the judicial level, many obstacles affect the legal protection of women, particularly survivors of GBV. Such acts are often trivialized by the society in general and more so, by security agents and the judiciary. Survivors also fear being stigmatised and the possible reprisals of forwarding the violations against them especially if the aggressor is a member of the security forces or organised criminal groups. Other obstacles to obtaining justice for SGBV survivors include:

- * High costs of obtaining police and judicial services and medical certificates;
- * Widespread corruption worsened by an excessive length of judicial proceedings;
- * Economic dependence and incapacities that prevents women from initiating proceedings without the consent of their husbands.⁵⁴

Poor, unmarried women without adult sons are perceived as unprotected and therefore likely targets for sexual violence with little fear of retribution. Local officials have demanded sexual favours in return for food aid and other assistance. Poor families are often driven by circumstance to push daughters into early marriages where they are at a high risk of conjugal sexual violence. There has been a tragic cycle of vulnerability and violence. During a conflict, rape victims have additional concerns about security or repercussions in a chaotic environment characterized by violence and impunity. In such a context, SGBV represents one of many kinds of violence and mere survival may be seen as a more immediate priority. Community leaders played an active role in the

⁵⁴ NGO Report on Violence against Women in Burundi, CEDAW, January 2008

social reintegration of survivors. Their role was to negotiate with husbands and fathers to allow wives and daughters back into the household. They also worked with local administrators and community councils to ensure perpetrators be arrested, rather than having the case resolved by traditional methods – which usually involve restitution paid to the victim’s father or husband and, in some cases, forced marriage of the survivor to her attacker.

6.3 The Tamar Campaign and Advocacy Efforts by Faith-Based Organizations

The National Council of Churches of Burundi (CNEB) launched the Tamar Campaign and the Contextual Bible Study on 14th November 2008. A total of 180 people attended the event including the twelve CNEB member churches. They are the United Methodist Church (L’Eglise Méthodiste Unie), the Free Methodist Church (l’Eglise Libre Méthodiste) the Evangelical Friends Church (l’Eglise Evangélique des Amis), the Union of Baptist Churches (l’Union des Eglises Baptistes), the Kimbanguist Church (l’Eglise Kimbanguiste), the Evangelical Lutheran Church (Eglise Evangélique Luthérienne); and six dioceses of the Anglican Church from Bujumbura, Gitega, Matana, Buye, Makamba and Muyinga. The First Lady of Burundi officially launched the Campaign and as a result of her active participation in driving this Campaign, an amendment to the law was passed to ensure that perpetrators of Sexual Gender Based Violence (SGBV) would be held accountable and face justice.

6.3.1 Launch of the Tamar Campaign in Burundi

A three-day reflection meeting preceded the launch which coincided with the Women's Festival. During this festival, the youth of EAB-Makamba participated through song and dance to depict the harmful effects of violence against women and children. The first day was devoted to

introducing the CBS and deliberating upon it. The second day was earmarked for the March on Violence against Women and Children. These activities were carried out in tandem with other stakeholders within the Civil Society charged with carrying various activities throughout the country. There was enhanced collaboration amongst all the organizations and individuals who participated in the 16 Days of Activism against Gender Violence under the auspices



During the 3-Day Reflection meeting organized by the National Council of Churches of Burundi (Burundi, 2008)

of the Ministry of Solidarity, Gender and Human Rights. Over thirty stakeholders were actively involved including through the provision of technical and financial support. These members include: the UN WOMEN, UNICEF, UNFPA, UN AIDS, TEAR FUND, ACTION AID, amongst many other organizations.



A peaceful march against violence on women in Burundi by CNEB (Bujumbura, 2008)

The launch coincided with the 20th anniversary of the CNEB Women's Desk, which was established in 1998 as well as the Ecumenical Decade to Overcome Violence. The themes of the launch were: "Giving Tamar Assistance" and "Calling to Tamar's Assistance" which was developed from 2nd Samuel, Chapter 13. The Tamar Campaign was launched ten days before the beginning of the "16 Days of Activism against Gender Violence" in order for churches to familiarise themselves in advance with issues surrounding GBV which

were often considered to be taboo topics. The proposed messages were intended to focus around healing, restoration and hope for the survivors of violence against women and children and were targeted to be conveyed up to the local church level. During the evening sessions, the youth of Ngagara Anglican Church organised a prayer vigil with dances and songs that expressed the themes. The third day was a Sunday worship service day and hence, a service was organised in the Bujumbura Holy Trinity Cathedral. This church service was attended by more than 1000 people. Moreover, the Bible passages read during the service were drawn from the Tamar Campaign Manual. One of the victims, Ms Francine Nijimbere was introduced to the congregation.

6.3.2 Achievements and outcomes of the Tamar Campaign



Bishop Pie Ntukamazina (Bujumbura Diocese), offers words of comfort to Francine whose arms were cut off by her husband simply because she gave birth to a baby girl. He shared her fears that since she was pregnant again, she might have another girl and be subjected to more violence.

FECCLAHA has been supportive in conducting a situation analysis of violence against women and girls in Burundi and Rwanda, as well as the launch of the Campaign and disseminating the Contextual Bible Study in both English and French through the CPR and the CNEB. In Rwanda, the campaign manual was translated into Kirundi. The Campaign has contributed to positive behaviour and social change on GBV, including transformation of communities and provided a platform for different survivors of GBV to share their testimonies, consequently making GBV a public issue.

Since the launch of the Campaign, a number of achievements have been

made. Working in collaboration with other organizations, the CNEB held a peaceful parade to sensitize the public about the need to fight SGBV. This event involved a peaceful march coupled

with public presentations and testimonies from survivors of this form of violence. The CNEB went a step further and in collaboration with the Association for Women Lawyers in Burundi, organized training sessions on how to provide effective psychosocial support for SGBV survivors. They have also registered success in implementing a Savings and Loans project to provide loans. Further, the CNEB has established a network to work with Government of Burundi; Non-Government Organizations (NGOs); as well as faith-based organizations and institutions which facilitate their work on SGBV and HIV/AIDS.

The Tamar Campaign has been instrumental in mobilising the church to acknowledge existence of GBV, to 'break the silence' on GBV, and to provide safe spaces and opportunities for healing for survivors of GBV. Church leaders were motivated to speak out against GBV. The Campaign also contributed to the churches' recognition of other gender issues within the church, and the creation of space for women within the church leadership organs, which the church leaders included GBV in the pre marital counselling modules. The campaign contributed to the development of a men's association against GBV, which was the first of the kind in the country and is actively engaged in engaging men around the country on GBV. One survivor of GBV whose two hands were chopped off during a domestic violence incidence, shared with the team how Tamar campaign facilitated her healing process and reconciliation with her community. She has since served as a symbol of the rallying call for action against GBV in her community, and also as a beacon of hope for survivors of GBV within the church, some of who were also motivated to speak out on their GBV experiences. Her community has since put in place community level interventions on GBV.

Other people, including men have shared testimonies of change on how the CBS had changed their attitudes and brought positive changes in their families. The Campaign has contributed significantly towards legal reforms in Burundi to curb GBV since it provides a platform and opportunity for advocacy for laws to address the vice as well as engaging with the judiciary and other relevant authorities to take GBV seriously and implement a legal framework to fight GBV. There has been enhanced visibility of the Campaign efforts by the Media who played a significant role in providing coverage to sensitize the country about Gender –Based Violence and the Tamar Campaign. In addition, there was considerable involvement of decision-makers at the national level under the patronage of the First Lady of Burundi. Religious leaders actively participated in the launch. On its part, the immediate reaction by Parliament was to table, debate and pass the "Family and Matrimonial System Code" only five days after the festival.

End Notes

This section has benefited from the views shared by Mrs. Perpetue Kankindi during the Gender Focal Point Consultation workshop (December, 2012) as well as her personal experienced garnered during the launch and implementation of the Tamar Campaign in Burundi. In her words, she summarizes the advocacy efforts as such: "The Tamar Campaign has a unique approach – it does not lay blame on anyone - instead, it gets people to develop their own solutions for their problems and it targets everybody in the community."⁵⁵

⁵⁵This section is based on information provided by Perpetue Kankindi who is the Women and Family Program Coordinator at the National Council of Churches, Burundi (CNEB).



CHAPTER 7

Gender-Based Violence and the Tamar Experience in Ethiopia

7.1 Overview

Gender Based Violence continues to be a significant and serious human rights and public health issue in Ethiopia. Although it is acknowledged as a fundamental violation of human rights and a constraint to development, GBV is endemic throughout the country, including negative perceptions, attitudes and beliefs about women, their abilities and roles. Various acts of GBV are prevalent and disproportionately affecting women and girls of different ages, cultures and socio-economic backgrounds. Women and girls are highly vulnerable in IDP camps (in Barahle and Sherkole) to undergoing FGM/C and other forms of sexual and gender based violence.⁵⁶ Gender based violence is widely practiced both in rural and urban areas, with regional variations. Community-based studies indicate that 50-60 percent of women in Ethiopia have experienced domestic violence in their life time, including Female Genital Mutilation (FGM), abductions and early marriages and other forms of GBV.⁵⁷

Violence against women is widely practiced in Ethiopia with regional variations. Studies conducted reveal that the problem exists in different forms both in rural and urban areas. Acts such as FGM, early marriage and abduction of young girls are commonly manifested violence perpetuated against females in Ethiopia.⁵⁸ Significant levels of GBV are prevalent in all areas with the lowest prevalence found in urban areas like Addis Ababa (90%) while maximum prevalence is found in rural areas like Bako Woreda (100%).

Some of the most prevalent HTPs in Ethiopia include FGM/C, early marriages, abductions, forced wife inheritance, burning of female genitals with a heated blade/sickle, cutting the base of children's tongues or removing tonsils. Survivors of FGM/C suffer physically and psychologically. A culture of silence surrounds this practice Rape, domestic violence, forced marriages, child marriages, sexual exploitation and harassment, sexual violence and harmful traditional practices (HTP) negatively impact on the physical, emotional, psychological and social well-being of mainly women and girls. Other forms of violence includes sexual violence and physical, emotional psychological abuse or sexual harassment where the abuse takes place between individuals who are unrelated and who may or may not know each other, generally taking place outside of the home. Other types of GBV include: sexual harassment, marital rape, threatening, scolding and harassing women and girls, men refusing to economically support the family, men denying the existence of children born out of wedlock, refusal to share family property with women after divorce, controlling women's fertility (not allowing women to use family planning methods), restricting women's movement and advancement in education and degrading and neglecting the girl child. The consequences of GBV are feelings of hopelessness, isolation, guilt and depression. The more severe or longer term the abuse and violence, the greater the impact on a woman's autonomy, sense of worth and ability to care for herself and her children. SGBV also increases the survivor's vulnerability to sexually transmitted diseases such as HIV/AIDS.

⁵⁶ Julia Zajkowski, the resettlement officer at UNHCR's Ethiopia office.

⁵⁷ Yemane Berhane (2008): "Ending Domestic Violence against Women in Ethiopia." In *The Ethiopian Journal of Health Development*.

⁵⁸ Yemane, Berhane: *Ending Domestic Violence against Women in Ethiopia*, *Ethiopian Journal of Health Development* (2008)

7.2 Efforts to combat SGBV and Harmful Traditional Practices

Over the past few years, the Government of Ethiopia (GoE) has issued a relatively large amount of gender-friendly legislation and policies, including the 'National Women's Policy', which was issued in 1993. This was based on the concept of respect for human and democratic rights without distinction, as set forth in the Charter on International Agreements and Conventions. The laws and policy measures of the country have been instrumental to correct the imbalances and for the reduction of GBV in the country. This has led to a drop in the incidents of forced adoptions and early marriages.

Women now are more aware of the available services in their area, such as the Women's Affairs Office, women's associations and EWLA. However, they usually go to the village elders for arbitration as a first step. These elderly men often advise them to "tolerate each other", and only after the case is not settled by the elders do they resort to more formal structures such as the "Kebele" social court, Women's Affairs, women associations, EWLA, etc. The effectiveness of these institutions to prevent GBV, mitigate the impact of GBV and enforce the laws has been reduced due to a number of factors, including limited capacity of the institutions, attitudes of the personnel, accessibility and affordability of the services including the quality of services provided to the community and lack of knowledge by women about the existence of such institutions. Despite these legislative acts, judicial and educational policies to address the situation by government agencies, NGOs and humanitarian organizations, Ethiopian women remain highly vulnerable and continue to suffer from violence and denial of their rights in one form or another.

7.3 The Tamar Campaign and Advocacy Efforts of Faith-Based Organizations

The NCA-Ethiopia has used the Tamar Campaign to address GBV working in partnership with in collaboration with two faith-based organizations known as the Ethiopian Orthodox Tewahido Church and Evangelical Churches Fellowship of Ethiopia to implement the Tamar Campaign⁵⁹. The translation of the CBS into Amharic has led to greater ownership of the Manual by the clergy as a teaching aid for their congregations. It is also used as a reference text in the college curricula with regard to GBV and a peer teaching material for the Orthodox Church Sunday School youth. The CBS has been integrated into the teaching material for the Orthodox Church Sunday School youth. Faith-Based Organizations (FBOs) have taken ownership of this Manual as an effective teaching tool to reach their congregations. Moreover, it has been integrated into the curricula of a number of theological colleges as a reference guide for GBV.

7.3.1 Achievements and outcomes of the Tamar Campaign

The NCA-Ethiopia has used the Campaign as a tool to raise awareness and advocate against harmful cultural practices such as domestic violence, Female Genital Mutilation (FGM), abductions and early marriages and other forms of GBV. The Tamar Campaign has become a tool to raise the understanding of the church community on GBV. Apart from training Church leaders to integrate the CBS into their teachings, eleven evangelical and two orthodox theological colleges have integrated GBV into their curricula. 90 percent of the theological college students who are mostly ministers will return to their community churches. Hence integrating GBV into their curricula is bound to have a significant impact on the students as well as the congregations they will later serve.

⁵⁹*Ethiopia Evangelical Church Mekane Yesus (EECMY), FECCLAHA member in Ethiopia, is a member of the Evangelical Churches Fellowship of Ethiopia.*

The integration of the CBS has had some positive effects. In the Orthodox Church intervention areas, the social structures known as “iddir” revised their by law to prohibit any practice of FGM and GBV with an additional social sanction of being liable to pay a fine. On their part, the Evangelical Church Fellowship facilitated discussions on GBV on Christian TV, and marked 16 days of activism explicitly with different themes. Evidently, the integration of the CBS and Tamar Campaign, GBV is no longer a taboo subject within the church. This has resulted in increased awareness about GBV amongst both the clergy and their congregants about GBV. A case in point is that the Ethiopian Orthodox Church officially declared that it did not support any form of GBV including FGM. This declaration was made in the presence of the Patriarch and Minister of State for Women, Children and the Youth. This clearly demonstrates that the Church in Ethiopia is making a contribution to the national targets of decreasing cases of GBV in the country.

In one of the Orthodox Church intervention areas, the social structure name “iddir” revised their by-law to state that any practice of FGM and GBV is prohibited and social sanction of financial payment. Evangelicals Churches Fellowship facilitated discussions on GBV on Christian TV, started to mark 16 days of activism openly with different themes which shows that their awareness is increased and talking about GBV is not more a taboo. The Ethiopian Orthodox Church declared officially that the Church does not support any form of GBV and FGM. The declaration was made in the presence of the Patriarch and state minister of Women, Children and youth Bureau. This shows that the Church is contributing to the national targets in decreasing GBV. Although no studies have been conducted to date, there have been positive changes with regard to sensitize communities about the harmful effects of GBV and the legal frameworks put in place to curb the vice.

With enhanced sensitization and outreach efforts towards the community about the harmful effects of GBV and FGM, it is anticipated that further changes will be seen including the enactment of legal frameworks to protect the rights of vulnerable groups of women and children in society. To date, challenges still remain with regard to establishing networks within the Church and with like-minded organizations to protect and provide support to women who are exposed to domestic violence and harmful cultural practices such as FGM.

7.4 The EECMY Tamar Campaign commitments

The Ethiopia Evangelical Church Mekane Yesus (EECMY) has a Women’s Ministry whose theme is: “Unite to End Violence against Women, equal access to education, training and technology: pathways to decent work for women.” This Ministry engages actively throughout the country in an effort to end Gender Based Violence which is meted out mainly against women. The EECMY held a Tamar Campaign workshop where participants committed themselves to condemn all forms of violence against women and children, early marriage, abduction, rape, family domestic violence and all related abuses.

Other commitments made are to:

- * Support the appropriate education the Church has pursued with the aim of intervening and abolishing such harmful practices;
- * Set up networks within the Church to deal with different forms of domestic violence and protect vulnerable women and children from harmful traditional practices and give the necessary support to the victims;
- * Support the efforts made by governmental and non-governmental organizations in Ethiopia to abolish violence and harmful traditional practices against women and lobby for new legislation that safeguards equal rights of men and women;

- * Develop effective strategies to educate and empower women to participate in decision-making;
- * Since gender is an issue that involves the concerted efforts of both men and women, it is important to encourage the participation and involvement of men to be actively engaged in working for the betterment of women and children's lives;
- * Enhance development that can empower women and make them economically independent in order to support their families and strengthen their participation in development and decision-making processes;
- * Empower the Church to examine, harmonize and integrate the conventions of the United Nations and human rights instruments relating to Gender-Based Violence (GBV) and other harmful traditional practices against women and children;
- * Provide educational assistance and information to Church personnel, members and all service giving personnel;
- * Commit the concerted efforts of all Church units to implement all the commitments made and endeavour to coordinate the synods, parishes and congregations to put the same into practice.

The participants at the EECMY Tamar Campaign workshop affirmed the gifts and stewardship of male and females over the resources God has provided. This includes identifying negative gender learning that women and men have imbibed against each other as a result of their socialization. The participants then discussed various ways to overcome such negative gender learning. A gender desegregated data sheet was compiled to document all the initiatives, programs, and projects implemented by churches and partner organizations in Ethiopia. Lastly, gender issues were made a core agenda of the Church where gender perspective is a learned discipline. The participants recognized that gender equality and justice is a call and a reaffirmation to a discipleship of equals.

End Notes

This section has benefited from the views presented by Tedelech Loha during the Gender Consultative Forum as well as her experience with the launch and implementation of the Tamar Campaign in Ethiopia. In her words: "The Contextual Bible Study provides good material for Faith-Based Organizations since the stories revolve around Bible characters. The guiding questions help participants of the Contextual Bible Study to see themselves in proactive ways that lead to action."⁶⁰ Additionally, Ms. Addisalem Befikadu, Programme Coordinator at NCA-Ethiopia shared the experiences of NCA-Ethiopia.

⁶⁰Tedelech Loha worked as the Women's Ministry Coordinator at the Ethiopia Evangelical Church Mekane Yesus (EECMY).



CHAPTER 8

Gender-Based Violence and the Tamar Experience in Rwanda

8.1 Overview

Throughout its recent turbulent past, Rwanda has witnessed horrific forms of GBV including physical, sexual, economic, and psychological abuses. The 1994 genocide in Rwanda killed close to 800,000 people. Sexual violence was widespread and an estimated half a million women and girls (39 percent) reported being raped. Many of these survivors were infected with the HIV. The age of the women and girls raped ranged from two to over fifty years with most of the rapes committed against young women aged between 16-26 years.⁶¹ Approximately, one third of women in Rwanda have been subjected to physical violence at a certain point in time, from the age of 15.⁶² For 47% of the cases, the perpetrator of the abuse was the husband or partner. Moreover, 35% of women have experienced marital violence at some point, whether the violence was physical, emotional or sexual. 10% of the surveyed women declared that they had suffered from acts of violence while they were pregnant.⁶³ Factors contributing to GBV include unequal gender relations, women economic dependency, feminization of poverty, ignorance, lack of self-esteem and the culture of silence. GBV underreporting is due to several factors among which lack of clear referral mechanism, fear of being stigmatized by members of the community and livelihood dependency of the victim to the perpetrator.

8.2 Efforts of the Government of Rwanda to combat GBV

The Government of Rwanda has deployed enormous efforts to fight against GBV at the legal, policy and institutional levels. The Rwandan Law n° 59/2008 of the 10/09/2008 on the prevention and punishment of Gender Based Violence, defines the vice as:

"[Any] act that result in a bodily, psychological, sexual and economic harm to somebody just because they are female or male. Such act results in the deprivation of freedom and negative consequences. This violence may be exercised within or outside the household".

The country has ratified and adhered to numerous conventions, charters, and declarations on fighting violence against women and children.⁶⁴ The Government of Rwanda has put in place various legal, policy and institutional frameworks to ensure the respect of human rights in general and promotion of gender equality in particular. Enormous efforts have been focused on fighting against GBV at the legal, policy and institutional levels. The Beijing Platform for Action committed governments to preventing and eliminating GBV and violence against women. The Rwandan Government has put in place different legal, policy and institutional frameworks to ensure the respect of human rights in general and promotion of gender equality in particular.

The Government and its development partners have been pro-active in formulating laws against SGBV. The National Gender Policy ensures that there is gender equity in the distribution and access to resources, goods and services. A National Policy on Violence against women and children is has

⁶¹This is based on a survey carried out in 2005 by the Ministry of Family and Promotion of Women (MIGEPROF) in collaboration with UNICEF.

⁶²Demographic and Health survey (EDSR-III)

⁶³National Institute of Statistics of Rwanda (2007).

⁶⁴Rwanda is a signatory to the Convention on the Eradication of all Forms of Discrimination Against Women; the Beijing Platform of Action; the Protocol to the African Charter on Human and People's Rights on the Rights of Women in Africa.

been conceptualized to protect women and children from all forms of violence. In addition, the National Reproductive Health Policy and Health Policy state that perpetrators of sexual and domestic violence must be punished according to the law. The Draft Law on the prevention and repression of the Gender-Based violence (under adoption by the Rwandan Parliament) specifies that Gender-Based Violence is a crime and clarifies the penalties. The Draft law on reproductive health governs the sexual violence in general and the violence against children and minors in particular. This law safeguards children's rights and deals with various kinds of violence inflicted on children with a particular emphasis on sexual violence.

There has been a vigorous campaign to ensure that girls are enrolled and maintained in schools, so that they eventually have equal chances in employment and other sectors. Meanwhile, in some instances, the cut-off points for admission of girls into certain institutions is lower compared to that of boys in an effort to encourage girls to join professions such as engineering and medicine.

Gender Desks exist within all police stations across the country to sensitize police officers, magistrates, and local authorities on GBV and human rights; to improve legal support and access to justice and counselling services for SGBV survivors. It also partners with women's associations responsible for the promotion of women's rights as well as providing access to medical assistance for rape survivors. In addition, a special programme within the Office of the Prosecutor was established to assist and provide financial support to SGBV survivors whenever necessary. The Rwanda Committee for the fight against Gender-based Violence was established to sensitise communities at district level on the rights of women and assists women when their rights are violated. It also provides guidance and support to draft laws that deal with human rights and gender equality.

8.3 The Tamar Campaign and Advocacy Efforts of Faith-Based Organizations

FECCLAHA has been very supportive in conducting a situation analysis of violence against women and girls in Rwanda, the launch of the Campaign in 2008 and disseminating the Contextual Bible Study in English and French. The campaign has contributed to social behaviour change with regard to GBV, including transformation of communities and provided a platform for different survivors of GBV to share their testimonies, consequently making GBV a public issue. The CPR member churches in Rwanda have put in place a gender policy. Tamar campaign complemented and motivated the development of other GBV initiatives. The Tamar Campaign has contributed to the development of the "Neighbour's Eye" programme, which focuses on the individual and collective role of the church to prevent and respond appropriately on GBV. In addition, the Baptist Church in Rwanda voted for a 30 percent gender representation policy.

End Notes

This section has benefited from the views presented by Speciose Mukagahima who is the key Resource Person for the Tamar Campaign in Rwanda. In her words: "Tamar Campaign is a unique approach; using the Bible to address GBV is unique, it is a good tool as many of the people in the region are Christians."



CHAPTER 9

Gender-Based Violence and the Tamar Experience in Uganda

9.1 Overview

In Uganda, violence against women and men is pervasive, critical and deeply entrenched in the family, community, society thus advancing in intensity and scale. Violence goes beyond physical beating, it is about conditions and situations that systematically deny and devalue someone, their lives, health, rights, choices and power. GBV is a major problem in Uganda, with more than two thirds of ever married women (68%) having experienced one kind of gender based violence.⁶⁵ The problem is worse for the rural women (61%) than urban women (54%). 78% of women in Uganda are subjected to domestic violence.⁶⁶ While GBV is indeed reaching epidemic levels in Uganda, society and the women themselves still believe that their husbands beating is an acceptable corrective behaviour or show of love on the side of the husband. According to the Uganda Demographic and Health Survey (2006), 48% of married women between 15-49years have experienced physical violence from their intimate partners.⁶⁷ 50% of these women experienced the physical violence from their current husband or intimate partners while 8% of these experienced the violence from their former husband or intimate partner; 36% have experienced sexual violence. One in four women report that their first sexual intercourse was against their will, as compared to one in one hundred men. One in four women reported having been “physically forced, hurt or threatened into having sexual intercourse.” The Eastern region and Busoga topped in the prevalence of GBV.⁶⁸

HIV/AIDS was first identified in Uganda in 1982 on the shores of Lake Victoria in Rakai, southern Uganda. Years of political turmoil, war, and its aftermath of poverty, malnourishment, and dilapidated health services provided a conducive environment for the spread of the disease. By 2001, an estimated cumulative total of 2.2 million people had been infected with HIV, and about 800,000 Ugandans had died since the onset. UNAIDS has estimated that out of a population of 21 million, 1 million Ugandans are currently living with HIV/AIDS.⁶⁹ Busoga region registered the highest incidence of sexual violence in the country.⁷⁰

9.2 Gendered Cultural Norms and GBV

Many traditional customs in Uganda subjugate women in marriage and limit their sexual autonomy. Polygamy is inherently discriminatory because the man is usually having unprotected sex with multiple partners, thereby increasing the risk of HIV transmission. Widow inheritance, whereby a man “inherits” the widow of his dead brother further exposes women to the risk of unwanted and unprotected sex. Moreover, the payment of bride price or dowry by a man to a woman’s family essentially makes the woman her husband’s property and denies her any authority in marriage, including over sexual practices. For many Ugandan women, social worth and acceptance is based on marriage and children, making separation or divorce almost

⁶⁵ Uganda Bureau of Statistics, 2006

⁶⁶ Uganda Law reform Commission 2007

⁶⁷ UDHS (2006) Uganda Demographic and Health Survey (UDHS), Ministry of Finance, Planning and Economic Development.

⁶⁸ UDHS, 2006

⁶⁹ UNAIDS estimates that in countries with generalized epidemics, approximately 80% of women between the ages of fifteen and twenty-four lack “sufficient knowledge” about HIV/AIDS.

⁷⁰ Uganda Bureau of Statistics, (2006) and the Uganda Demographic Health Survey (2006).

impossible. The disparity between education for men and women is such that women are forced to remain dependent upon men for economic and social stability, which means they are often forced to endure severe abuse. Women who try to leave their marriages are faced with social disapproval and enormous pressure to return to the marital home.

Early Marriages as a form of SGBV

Early marriage is a form of SGBV with detrimental physical, social and economic effects. There is a relationship between education, early marriage and sexual violence. Uganda currently hosts at least 230,000 refugees, mainly from Southern Sudanese. Early marriage is often seen as a survival strategy by those unable to move from these isolated settlements, forced to depend on subsistence farming and trapped in poverty. Some girls hope to enjoy greater economic security if married. For their parents the bride price can be an important financial asset. Many parents also view early marriage as the only means of safeguarding their daughters from the high levels of SGBV prevailing in Uganda's refugee settlements. Motivations of economic and physical security, linked to basic survival. In Uganda, early marriage is arranged as a hasty response to sexual relationships. Many girls end up getting married at a significantly younger age especially amongst the displaced Southern Sudanese.

Extreme poverty, harassment and threats of sexual violence often prevent girls from attending school, causing them to be increasingly vulnerable to SGBV in and around their homes and fields. With no other economic opportunities and no effective means of protecting girls from assault and rape, parents and young women see little alternative to early marriage. This represents a form of violence, leading to ill-health from early child-bearing and continued impoverishment exacerbated by denial of educational opportunities. Chronic alcoholism contributes to exacerbating domestic violence and SGBV. Alcoholism means that there will be less money available to pay school fees, thus motivating parents to "marry off" their daughters for the bride price. This money can then be used to pay for household expenses, school fees for male children or more alcohol. Furthermore, alcoholism is directly related to forms of SGBV within the family and community including an increase in cases of incest and rape.

Gender imbalances pervade refugee schools in Uganda. Girls face many obstacles to enrolment and achievement as a result of gendered division of household labour, and the perception that sending girls to school will not benefit the family. The desire for financial stability and protection leads many girls to pursue marriages early. Girls married before the age of 18 often end up in abusive relationships or are abandoned by husbands. Early marriages in refugee settlements are common due to pre-marital sex amongst minors. Under Ugandan law, sexual intercourse – both consensual and non-consensual – with a girl under the age of 18 is a criminal act. If the girl becomes pregnant, the response is either a hastily-arranged marriage or the payment of a fee for 'spoiling' the girl and ruining her marriage prospects. The girl ends up stigmatised or forced into an early marriage and subjected to abuse.

9.3 Uganda's Achievements in combating GBV

Uganda is signatory to the United Nations Convention on the Elimination of All forms of Discrimination against Women (CEDAW) amongst other regional and international conventions. Consequently, the State has an obligation to promote and protect women's rights in all sectors and spheres of life including the area of justice, law and order. In December 2011, during the

Conference on the Great Lakes Region at The Fourth Ordinary Summit and Special Session on Sexual and Gender Based Violence (SGBV); Uganda signed to protect its citizens from GBV which is a problem with enormous challenges in the country.⁷¹ In response to the alarming incidences of GBV, the Government of Uganda (GoU) through the Ministry of Gender, Labour and Social Development (MoGLSD) in partnership with Uganda Women's Network (UWONET), Centre for Domestic Violence and Prevention (CEDOVIP) and 8 local governments are implementing a Joint Programme to address Gender Based Violence (GBV) in the Busoga Sub-region in the districts of Bugiri, Buyende, Jinja, Iganga, Kaliro, Kamuli, Mayuge, and Namutumba. Busoga region registered the highest incidences of sexual violence in the country.⁷²

9.4 The Tamar Campaign and Advocacy Efforts of Faith-Based Organizations

The Uganda Joint Christian Council (UJCC), FECCLAHA member in Uganda, is an advocacy, lobbying, and capacity building organization with membership from three churches namely: the Church of Uganda, the Roman Catholic Church, and the Orthodox Church. It works through Ecumenical Joint Action Committees (EJACs) and targets church leaders, communities, youth, and women. The capacity building components addresses peace building, mediation, psychosocial support, and entrepreneurship skills. The organization's motto is "Growing and Serving Together in Christian teachings" which is based on John 17. The Gender, Health, Children and Family Development programme aims at creating awareness on gender mainstreaming, youth, children and persons with disability by promoting their inclusion into social, cultural, economic and political activities. This is achieved through promoting participation of member churches in the provision of health services, HIV/AIDS and the development of national policies. During the Ecumenical Celebrations of the World Women Day of Prayer in 2007, women from the three UJCC member churches launched a campaign on the advocacy against Sexual Gender Based Violence (SGBV) with initiatives that address GBV through the Tamar Campaign. Women ecumenical groups in Central and Karamoja regions continue with this campaign by facilitating sensitization meetings on GBV using different platforms such as Sunday church services, weddings, church functions to name a few.

Advocacy against Child Abuse and violence against women

Women from ecumenical circles are engaged in advocacy against child abuse and violence against women using Information, Education and Communication (IEC) materials and dissemination to enhance advocacy. Different platforms such as charity walks, the mass media and dinners have been organized to highlight and condemn acts of violence against children and women.

Family Development

The UJCC established a Family Life Task Force in February 2009 to develop family life education materials. This task force developed strategies for the development of materials with messages strengthening Christian values in the family and society as a whole. The core thematic areas were: Marriage, Parenting, Single life, Polygamy and Cohabitation. The materials developed promote moral behaviour and peaceful and harmonious living and are useful resource texts used by church leaders and parents.

⁷¹The Declaration of the Heads of State and Government of the Member States of the International Conference on the great lakes region.

⁷²Uganda Bureau of Statistics (UBOS), 2006 and the Uganda Demographic Health Survey, 2006.

HIV and AIDS Workplace Policy

The UJCC HIV/AIDS Workplace policy was developed with an emphasis on practicability of the policy within the organization. Internal sessions on treatment literacy and the current HIV/AIDS status in Uganda are regularly held at UJCC offices for its staff. Knowledge on ARVs is shared with emphasis on adherence to this medication. Information is also shared on the new strands of HIV, and discordant couples.

Candle Light Memorial

UJCC supports and participates in the Candle Light Memorial observance prayers held in solidarity with those individuals, families and communities especially the youth and women infected and affected with the HIV/AIDS epidemic. These prayers were replicated in different churches nationwide and are held on 14th to 16th May at different worship centres. Participants to the memorial services and the general public are reminded of the existence of HIV/AIDS and challenged to take necessary actions to combat HIV/AIDS especially the vulnerable groups.

Empowering CBOs and the dissemination of IEC materials on HIV/AIDS

UJCC under the Stop AIDS Now (SAN) conducts capacity building sessions for a number of CBOs in HIV/AIDS literacy and stigma prevention with an emphasis on knowledge on HIV/AIDS and the provision of support to staff and their families who often feel stigmatized. IEC materials on HIV/AIDS are often disseminated to a wider public using various communication channels.

UJCC Gender policy

The UJCC Gender policy was developed as an operational tool by the UJCC Secretariat. All UJCC programmes have made an effort to practice gender mainstreaming as guided by the Gender Policy. Initiatives have been made to ensure that there is gender sensitivity in the programming and implementation of all UJCC activities.

Women and Youth empowerment

In an effort to enhance the capacity of women and youth with skills and knowledge for improved livelihoods, UJCC trains women and youth from the UJCC member churches of Kampala in entrepreneurial skills using the “learning by doing” approach. Consequently, there has been enhanced capacity in forming groups for income generating projects. After the trainings, UJCC conducts exposure trips to model farms for the trained participants for experience sharing and learning. Thereafter, participants are assisted to take up income generation projects on a trial basis and later share their experiences with others.

9.5 Uganda Joint Christian Council (UJCC) Activities

The UJCC initiated a Peace Village Programme which integrates the Tamar Campaign. It seeks to address ignorance, disunity, and poverty among other concerns. The Tamar Campaign is largely pegged on the International Day of Prayer which draws participants from men and women, the youth and children. The Campaign is also brought to the forefront during the 16 Days of Activism against Gender Based Violence, the week of prayer for Christian Unity, and the International Women’s Day. The Tamar Campaign was an entry point in lobbying and advocating for a National

Action Plan to counter Gender-Based Violence. Further, there was a commitment by the Luweero Women Group to engage in community policing in collaboration with the Police in order to promote the education of the girl-child. Training of Trainers was also held in Karamoja and Kasese which focused on psychosocial support training. Irrespective of the successes registered, a number of challenges remain including the existence of post-conflict communities in Uganda where GBV is rampant. Furthermore certain cultural practices and beliefs reinforce acts of GBV. The problem is further entrenched due to widespread and ever-increasing levels of poverty.

9.6 The Way Forward

To tackle these problems, the international community, Government of Uganda and refugee communities must work together to:

- * recognise that early marriage is both a cause of and a response to reduced livelihood options;
- * reform Uganda's defilement laws to decriminalise consensual sexual relationships between minors;
- * provide alternatives to marriage as a survival strategy eliminate the hostility that girls often encounter in their attempts to pursue even rudimentary education;
- * enforce zero tolerance of sexual harassment in schools by students, teachers and administrators;
- * train senior male and female teachers to provide sexual education and counselling to students and parents;
- * encourage girls to return to school once they have given birth;
- * rethink current policies that force pregnant girls to leave school but allow the boys responsible to continue their education without punishment
- * implement locally-developed restrictions on hours of permitted alcohol sale and consumption;
- * Provide SGBV programmes that specifically target boys' needs and experiences;
- * Increase advocacy efforts to lobby the Government of Uganda to enact and enforce laws that criminalize domestic violence (including marital rape), and to amend discriminatory marriage and property laws.
- * Provide shelters for GBV survivors and their dependent children must be prioritized as well as support programs that can provide legal assistance and counselling services to the survivors.

Faith-based and humanitarian organizations need to launch more aggressive awareness campaigns (such as the Tamar Campaign) to inform the general public about the link between domestic violence and HIV/AIDS and the health risks of harmful traditional practices. These awareness campaigns should inform the national HIV/AIDS strategy.

End Notes

This section has benefited from the insights shared by Mr. Godfrey Mukalazi during the Gender Consultative Forum Workshop in December, 2012.

CHAPTER 10

Gender-Based Violence and the Tamar Experience in Sudan and South Sudan



10.1 Overview

GBV has been prevalent all through the civil wars in the Greater Sudan (Sudan and South Sudan) and still continues in South Sudan even after the end of the war that led to its independence. Rates of rape, abduction, and other forms of GBV are remained high in the context and aftermath of the January 2011 referendum. The Government of Southern Sudan (GoSS) – was established as a result of the January 2005 Comprehensive Peace Agreement (CPA) which ended the conflict between the North and South. However, even after this agreement, people of Sudan and Southern Sudan still face GBV exacerbated by decades of war that have left many children without a proper family structure, education or health care. Most of the population still suffers from deep trauma that prevents them from being fully included in the development process. Incidences of SGBV have been rampant since the beginning of the civil conflict in 2003. Attacks on women and girls within and outside IDP camps are commonplace but remain unspoken due to taboo and fear of stigmatization.⁷³ Efforts by the survivors to seek justice and retribution are handled mainly through customary mechanisms which tend to be biased against women thereby discouraging survivors from reporting these crimes.

10.2 The Legacy of SGBV in Sudan and South Sudan

Women in Sudan and South Sudan are among the poorest and most marginalized people on earth especially in Southern Sudan where violence against women remains a significant problem. Decades of under-development and conflict have left Sudanese women “the poorest of the poor and the marginalised of the marginalised.”⁷⁴ This provides an ideal environment for violence against women and girls to be perpetuated. More than two women in Southern Sudan die from complications of pregnancy or delivery for every 100 live births, making Sudan the most dangerous place in the world to give life. Girls are more likely to die in childbirth than to finish primary school. The girls and women of South Sudan face high rates of sexual and domestic violence. Many are forced into early arranged marriages. About 48% of young girls in South Sudan between 15-19 years are forced into marriages by their families, who are often given generous gifts as dowries in return. Girls risk violent actions from their families if they dare to resist including physical violence, rape or murder.⁷⁵

Sexual violence has frequently been used as a weapon of war in the Greater Sudan which affects the entire family and community at large. Sexual violence against women and girls has been prevalent for a considerable period of time in Darfur especially during its turbulent past of warring groups. According to one report on the Darfur crisis:

*Abuses against women are an integral part of the conflict and are too often neglected. They must urgently be taken into account in the Sudanese government and international community's response to the crisis.*⁷⁶

⁷³ UNICEF, October 2006

⁷⁴ Late President John Garang

⁷⁵ Data based on Report by Human Rights Watch,

⁷⁶ Amnesty International. 'Rape as a weapon of war: sexual violence and its consequences' (19th July, 2013)

Humanitarian organizations have created awareness of human rights violations and widespread sexual attacks in total disregard of international observers. During the most violent confrontations, Arab militias sexually violated the non-Arab communities (who do not practise circumcision) to forced FGM/C. During such confrontations, SGBV was used as a weapon of war in contempt of the customs and practices of the non-Arab ethnic groups. In parts of Sudan, the Sharia law has been used to relegate women to an inferior position which is a violation of the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW). A report by Save the Children UK, on the crisis in the Darfur region of western Sudan, documented testimonies by survivors of rape. Many survivors reported being gang-raped, some of them while pregnant. Incidences of rape initially took place as part of attacks on villages and then spread around the IDP camps.

Legal Barriers

Women in South Sudan face several legal barriers to justice, both in customary and formal legal



A group work session during the Women Consultation (South Sudan, 2012)

systems; formal law includes the Sudanese constitution and statutes passed by the Sudanese and South Sudanese governments. Ninety percent of civil and criminal cases in Southern Sudan are decided on the basis of customary law, which is generally localized customs and norms that are perpetuated by elders and that govern most public and private conduct. Formal laws about rape and sexual violence create barriers for women seeking justice. Customary laws have failed to provide legal protection to women living in both North and South Sudan. Moreover, survivors

of GBV in South Sudan face numerous barriers to justice. These barriers are cultural (the marginalized role of women in their families and social stigma attached to survivors of sexual violence). Other barriers include formal and customary laws and procedures that discriminate against women and give them few legal rights, lack of infrastructure, government resources and personnel. Ultimately, these barriers make it almost impossible for survivors of GBV to seek and obtain justice.

Cultural Barriers

Women in Southern Sudan have very little power under customary law. Community leaders are usually men who control the law. Under customary law, which governs most conduct in Southern Sudan, women survivors are sidelined while perpetrators and survivors' families handle the dispute. The customary laws of Southern Sudan's largest ethnic groups provide punishment for the crime of rape where the rapists compensates the father of the rape victim (with either money or cattle), and a fine or imprisonment may also be required. Women who try to seek justice for GBV

in legal proceedings face discriminatory processes and procedures that further burden their efforts. To prove that she did not consent to a sexual act, a woman must meet an exceptionally high burden of proof. The law requires her to produce four witnesses who will attest to the fact that the sexual act was not consensual, and it is up to the judge to waive this requirement. In addition, many courts accept the testimony of a man swearing on the Qur'an that the act was consensual but do not allow a woman to use this same method to declare that she was raped.

10.3 South Sudan's Action Plan to address SGBV

The Government of Southern Sudan (GoSS) recognises the need to tackle GBV and equally protect the rights of women and men. Survivors of sexual assault need emotional support, safe and private spaces for healing and access to resources, information and networks. The CPA provides for affirmative action and support to women to become part of the reconstruction process and also recognises the need to combat sexual violence⁷⁷. Unfortunately, incidents of SGBV often go unreported due to taboo and fear of stigmatization. Although Southern Sudan has few resources to address GBV aggressively, it has committed women's organizations. Accordingly, a GBV Working Group was set up in January 2006 to bring together representatives from UN agencies, GoSS Ministries of Gender, Social Welfare and Religious Affairs and Southern Sudanese women's associations.

The agenda was to discuss strategies for developing programmes to address GBV issues in South Sudan by exchanging information and implementing collaborative activities. The Working Group scheduled consultations with government, military and NGO stakeholders in the southern cities of Wau, Malakal and Juba to address the following:

- * Lack of GBV-related legislation at GoSS and state levels;
- * Preference to settle GBV cases through traditional (customary) courts, which do not consider the best interests of women and girls;
- * Lack of technical support to assist the GBV working groups;
- * Lack of specific funding to support activities related to GBV in Southern Sudan.

Sudanese women delegates at to the April 2005 Oslo Donors Conference identified GBV as a key priority area and proposed mechanisms to protect women and girls from exposure to violence. Sudanese women delegates to the April 2005 Oslo Donors Conference identified GBV as a key priority area and proposed mechanisms to protect women and girls from exposure to violence. The Transitional Constitution of South Sudan affirms the need to equally protect the rights of women and men.

A Gender Policy Awareness Conference was held in three states of the Greater Equatoria Region with the agenda of focussing on issues concerning justice, GBV and ways of increasing funding for the gender budget. Other activities included the distribution of the CBS to create awareness on GBV in Eastern, Central and Western Equatoria region. However, mechanisms are yet to be implemented to monitor the use of the Manual and its impact at both the church and community levels.

⁷⁷*Southern Sudan gained its independence as a result of the January 2005 Comprehensive Peace Agreement (CPA) which ended the conflict between the North and South Sudan.*

10.4 Ecumenical Responses to SGBV



Group picture of participants during the workshop on UN SCR 1325 organised by FECCLAHA and South Sudan Council of Churches. (Juba, 2012)

The Sudan Council of Churches (SCC)⁷⁸ National Women Programme had closed down in 2006 due to the downsizing of staff. However, in 2009, the Women and Youth Programme was reactivated in the Equatoria Region. Further, the National Women Programme was also reactivated in 2012. Although the Tamar Campaign Contextual Bible Study was being used by various churches in South Sudan, the Campaign had not been launched within the council. However, the Women Desk within the council had engaged in a number of related activities. The views in this section were provided by Florence Guliba during the Gender Consultative Forum facilitated by FECCLAHA in 2012.⁷⁹ The

following sub-sections provide a summary of the activities of the Women's Desk in Southern Sudan. The Women Day of Prayer with the theme: "Let Justice Prevail" was celebrated and brought together different denominations into closer fellowship. More than 2000 women participated and the monetary collections were used to meet the needs of the most disadvantaged vulnerable women.

10.4.1 Sexual Exploitation and Abuse (SEA) Campaign in South Sudan

South Sudan was set to launch the first ever nation-wide prevention of Sexual Exploitation and Abuse (SEA) campaign on November 26, 2013 in Juba with officials behind the campaign stating that it would be conducted during the 16 Days of Activism. Led by the South Sudanese Government, the activity was supported by United Nations agencies and other development partners in South Sudan. The campaign is intended to raise awareness among the most vulnerable groups in the country and provide them with sufficient knowledge to identify, prevent or report sexual exploitation. According to the United Nations Mission in South Sudan (UNMISS), Chief of Conduct and Discipline, Nathalie Ndongo-Seh:

Sexual abuse refers to actions that coerces someone into unwanted sexual activity such as rape or sex with children. It [sexual exploitation] is immoral and criminal.⁸⁰

Regina Osu Lullo, the Director General in the Ministry of Gender, Child and Social welfare clarified that this Campaign is meant to target "people with power" such as Members of Parliament, community leaders, employers and members of the armed forces. In her words:

Sexual Exploitation and Abuse (SEA) takes place where there is a weaker side ... made to subdue to a stronger side. Sexual exploitation is evil. If you want to help, do so without asking for extra favours.

⁷⁸ Currently called South Sudan Council of Churches (SSCC).

⁷⁹ Florence Guliba is the Women and Youth Officer (Equatoria Region) at the South Sudan Council of Churches (SSCC).

⁸⁰ Ndongo Seh is also the co-chair of the task force in charge of the Campaign.

The Government has made significant progress by taking measures such as developing a reporting and investigating procedure, which is pending review by the Council of ministers. Moreover, the Government has established special protection units in most states to handle cases of GBV. However, as a direct result of the prolonged war in Sudan, many citizens of South Sudan still have a “conflict mentality” that cannot be changed overnight.⁸¹ The Government has therefore resolved to continue the public awareness exercise even after the launch to sensitize citizens about their rights and to report GBV violations.

10.5 Challenges and the Way Forward

There are many causes of GBV in South Sudan and many barriers for survivors seeking justice. The Government of Southern Sudan, the Government of Sudan, and international actors involved in the region can and must take action to protect women and children from GBV, to enable them to secure justice for the abuses they have suffered, and to hold perpetrators accountable. Some of the challenges facing the SSCC Women’s Desk include understanding the Tamar Campaign Contextual Bible Study Manual and how to use it effectively; the need for translation of the Manual into Arabic and other local languages; as well as Logistic and Financial constraints. However, the SSCC Women’s Desk anticipates launching the Tamar Campaign Contextual Bible Study Manual as a tool for advocacy. In collaboration with the National Women’s programme, the SCC targets disseminating Arabic translations of the Manual within the Equatoria region and beyond. In addition, there is need to have Training of Trainers on how to effectively use the Tamar Campaign Contextual Bible Study Manual targeting women, pastors and youth audiences. The South Sudan Council of Churches (SCC) also seeks to strengthen the capacity of its Women’s Desk with financial and technical assistance from FECCLAHA.

End Notes

This Chapter benefited from information provided by Florence Guliba during the Gender Consultative Forum (December, 2012). She is formerly the Women and Youth Officer (Equatoria Region) at the South Sudan Council of Churches (SSCC). It is pertinent to note that as Africa’s newest State, Southern Sudan has only recently begun using the CBS and hence, is still in its formative stages of owning the Campaign. There also is an urgent need for the CBS to be translated into Arabic and local languages in Southern Sudan to increase its readership.

⁸¹Regina Osu Lullo, the Director General in the Ministry of Gender, Child and Social welfare



THE WAY FORWARD



Students from St. Paul's University during the Tamar Campaign Peaceful March (Nairobi, 2006)

CHAPTER 11

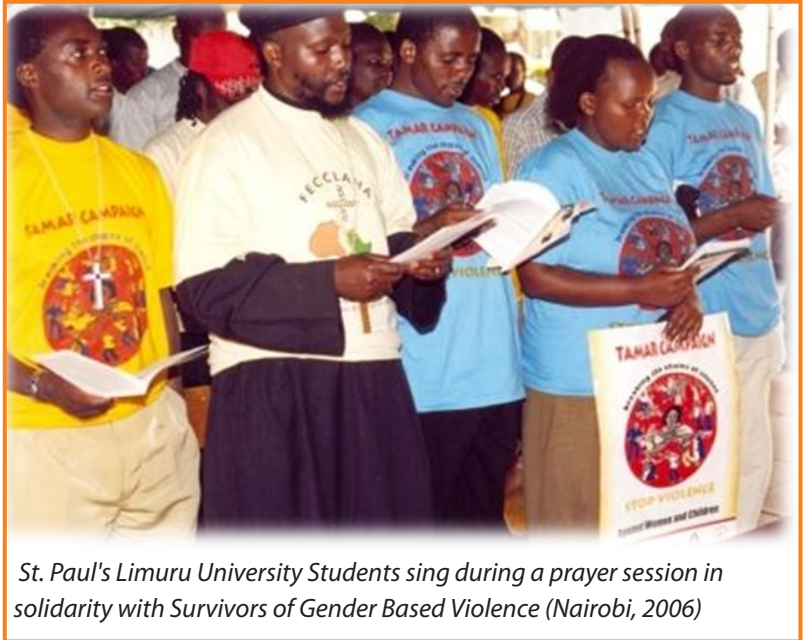
Enhancing the Tamar Campaign through an Effective Advocacy Strategy



11.1 Overview

*Women's rights are human rights –when women's, girls', men and boys' human rights are promoted, respected and protected, gender equality is achieved.*⁸²

On the whole, the Tamar Campaign has had a significant impact in the fight against GBV within the Eastern African region despite the various challenges in each of the countries. FECCLAHA is committed to addressing these challenges by working in tandem with its member councils, development partners and stakeholders to ensure that the Tamar Campaign remains relevant and has an even greater impact in



St. Paul's Limuru University Students sing during a prayer session in solidarity with Survivors of Gender Based Violence (Nairobi, 2006)

Eastern Africa and beyond. All local, regional and international actors involved in SGBV programmes should explicitly acknowledge the experience of men and boy survivors, respect their right to confidentiality, and include them in programmes that meet their distinct needs.

Prevention efforts should attempt to change the deep-rooted attitudes and behaviours that foster GBV, which includes women's low status, unequal gender roles and an imbalance of power between intimate relationships. Primary prevention strategies should recognize that it is important not only to influence individuals (women and men experiencing/perpetrating violence) but also the broader community, which is influential in creating a culture of non-tolerance for violence. The prevention of GBV requires a significant transformation in the value of culture at individuals and the community level. Religious leaders and faith-based organizations need to be role models who value compassion and community building over constraining gender roles. In addition, places of worship need to be places of solace and healing for the survivors of violence. FBOs and religious leaders therefore need to be more pro-active in redefining masculinity and encouraging younger men to affirm women as equals in need of protection and not as instruments to edify their masculinity through subjugation and violence.

Religious institutions such as churches and mosques must lead the way in redefining masculinity. This can be done by reinforcing legal and policy structures so that laws prohibiting violence against women and girls are enforced. Finally, Faith-Based Organizations (FBOs) in collaboration with religious leaders need to foster close relationships with journalists and media watchdog

⁸² Norwegian Church Aid Strategy to Support Partners in Eastern Congo to Reduce Gender-Based Violence (2010-2015)

groups. The spokespersons must be articulate, knowledgeable and preferably with personal experience in dealing with the issue. The print and electronic Media has the capacity to reach a wider audience and therefore needs to be used as a channel of advocacy that targets all levels of society. A multi-media approach includes engaging key public institutions, the disciplined forces and institutions of higher learning.

11.2 Enhancing the Tamar Campaign Advocacy Strategy

The strategy to enhance efforts at combating GBV will entail adopting a more aggressive and multi-media approach consisting of the following:

- * Encourage information on GBV based on objective research and analysis, advocacy, communications, coordination and international, regional, national and local networking.
- * lobby and advocate for legislative, administrative and policy decisions needed to eliminate sexual and gender-based violence as part of restorative justice;
- * Conduct public education and awareness campaigns are necessary to empower women and re-orient culture in Kenya;
- * establish a Special Fund for the compensation of survivors of sexual and gender-based violence, as well as to sensitise the courts, the police, prosecuting agencies and Gender Desks;
- * provide the survivors of SGBV with safe spaces to find healing, psychological rehabilitation services and financial support. A core component of this support is for the survivors to be counselled and provided with safe spaces (as part of their therapy and healing) on sharing their experiences and thereby, breaking the silence that so often surrounds the various forms of abuse and violence.
- * In consultation and coordination with the Government, faith-based groups, human rights groups and the international community can work to eliminate sexual and gender-based violence, while also establishing a credible Truth, Justice and Reconciliation Commission.
- * Form coalitions with FBOs, NGOs and Development Partners to support advocacy efforts against the various kinds of GBV.
- * Facilitate and support faith and community-based organizations in carrying-out initiatives to address the root causes of SGBV within their communities and build up gender sensitive structures to reintegrate survivors.
- * Work in tandem with like-minded organizations to enhance the care, support and rehabilitation of GBV survivors and promote their reintegration in local communities. In addition.
- * Churches and FBOs need to comprehensively address GBV and publicly speaking out against the vice and to lobby for laws and policies to combat GBV and other forms of violence;
- * Develop programmes with a focus on GBV and clearly emphasize the link between GBV and HIV/AIDS within the programs;
- * Enhance partnerships that will assist GBV survivors through legal, psychological, health care liaisons.

11.3 Combating GBV through Advocacy and Coalitions

A coalition consists of individuals or organizations that join forces to pursue a common social change goal while maintaining their own autonomy. Coalitions are important because they provide safety, strength, legitimacy and avoid redundancy and duplication of efforts. Currently, most NGOs and humanitarian organizations are more concerned with sharing their findings with their donors rather than consolidating and sharing information and experiences with like-minded organizations also concerned with addressing the vice. The overall effect is a duplication of efforts

with little impact on the vice. Many of these NGOs are more concerned with writing reports to meet the demands of their donors rather than working with other organizations to find practical solutions to address the vice.

In order to make a significant impact nationally and internationally, the coalitions will need to be inter-denominational/religious with the support of key religious leaders, faith-based organizations, the Civil Society, key sectors of government and the private sector. Such a coalition must have focus in developing advocacy objectives and the various strategies to effectively lobby and engage different target audiences. This calls for training in advocacy and lobbying techniques to effectively combat SGBV using a multi-media approach. However, it must be emphasized that adequate financial and human resources are required to conduct a successful advocacy strategy.

Churches and FBOs need to work in collaboration with local leaders and Muslim Imams to advocate against GBV. They should involve the disciplined forces, political leaders and the civil society in the advocacy process against GBV. Religious leaders need to become more informed and knowledgeable about contemporary issues in their socio-political environment. Effective lobbying can be achieved through the presentation of persuasive arguments to policy makers such as local chiefs, Members of Parliament, Governors, Senators and County Representatives. Effective lobbying will entail religious leaders familiarizing themselves with the legislative process, soliciting advice from skilled legal experts and coordinating such methods with other advocacy tools. Efforts must also focus on strengthening the cooperation between local authorities and FBOs in the prevention and control of GBV. This can be achieved through the establishment of a network for cooperation between local authorities, the community, and the police to combat SGBV

11.4 Combating GBV through Transformative Masculinity

The fight against GBV is not a “women only” campaign but requires the joint efforts of men and the youth. In essence, everyone needs to be involved for successful advocacy against GBV. Religious institutions must lead the way in redefining masculinity. FBOs and religious leaders therefore need to be more pro-active in redefining masculinity and encouraging younger men to affirm women as equals in need of protection and not as instruments to edify their masculinity through subjugation and violence. This can be done by reinforcing legal and policy structures so that laws prohibiting violence against women and girls are enforced Christians need to create healthy discourse based on Biblical teachings on the true definition of what defines gender and masculinity. Faith-based leaders must be in the forefront at changing perceptions on GBV and negative masculinity. Religious leaders need to preach from the pulpit what really defines masculinity and advocate against GBV in churches and mosques.

The efforts to combat GBV and foster a culture of gender parity and upholding the rights of vulnerable groups such as women and girls faces many challenges because most of the strategies adopted often alienate men and boys rather than bringing them on board. Consequently more resources need to be set aside to merge synergies comprising of men and women’s empowerment. In Kenya today, organizations such as “Maendeleo ya Wanaume” (“Development of Men”) apparently with the agenda of advocating for the rights of men and boys have emerged in response to the empowerment of women and support of the girl child. Rather than the organizations advocating for the rights of men on one hand and women on the other combining

their efforts to jointly combat GBV, each side views the other with suspicion and outright rivalry. Ultimately, this impacts negatively and undermines the efforts to combat GBV.

The whole community should be aware of and be sensitive to issues surrounding SGBV. It should understand that potential victims include males. Men and boys need to know that the threat or fact of sexual violence against them is recognised and understood. Women and girls need to know that their male relatives and friends might suffer from SGBV and that its occurrence will be taken seriously and dealt with confidentially. Many survivors try to cope in isolation, unaware that other survivors have similar or related experiences. Joining a group of fellow survivors can be empowering and healing because individuals are able to situate their experiences in a safe space of fellow SGBV survivors.

The Tamar Circles offer such a space where survivors can encourage each other and offer support. Such support could encourage self-help activities and allow group members to refer survivors for counselling and legal support. IEC materials such as posters and leaflets with information about SGBV should be placed in strategic locations such as waiting rooms, counselling rooms, and meeting spaces. This information should show that men and boys as well as women and girls are potential survivors of sexual violence and list services and contact information for those requiring support. Sensitization efforts should also target refugee groups and IDP camps to explain the full range of sexual violations, the shared and specific vulnerabilities of women, men, boys and girls, and the range of support services that are available to survivors and their households.

Survivors must have assured access to medical care, including to drugs that can prevent pregnancy and the transmission of HIV. Trained medical personnel must be available to perform the complicated surgeries necessary to repair injuries caused by sexual violence. Support for survivors must extend beyond care for their physical wounds. Many women and children need culturally sensitive psychosocial counselling to deal with the psychological impact of sexual violence. Training for survivors is often required to help them learn to support themselves in new ways, as all too often they are forced out of their homes and communities. Creating awareness within communities is also needed so that survivors, including children born as a result of rape, are helped, not ostracised.

11.5 Creating Awareness through a Multi-Media approach

Messages must be appropriately tailored and packaged for the different categories of audiences. Different tools and channels of communication should be appropriately adapted for different audiences. Different channels of communication will include the use of posters, and leveraging on the media to collect and transmit current information promptly and efficiently for sensitization and awareness creation amongst the masses. The advocacy strategies should be tailored to address the specific situation in Eastern DRC. A case in point are the traditions and customs that oppress women such as a widow not being able to inherit property after her husband's death or women not being able to acquire property in their own names.

Information can be used to educate, empower, mobilize, stimulate discussion, harness allies and for pro-active advocacy strategies. However, the information must be relevant, correct, current, convincing and conclusive. The use of different media is critical to effectively engaging in public policy advocacy against GBV. Sensitizing the public and creating awareness also entails empowering both men and women to become active participants and to speak out against GBV rather than reinforcing the culture of silence that has often characterized acts of domestic violence,

rape or child defilement. The Campaign and the CBS are instruments that persuade people to turn their opinions into actions that can influence positive outcomes to create a better society and tangible benefits such as gender justice and equity. Children need to be sensitised and trained from an early age about their human rights. Men, women and the youth need to mobilize and form coalitions that would be more influential and effective in advocating against GBV.

The Media as Advocacy Partners

In many societies sexual violence is the ultimate taboo, the one crime for which the victim is often punished rather than the perpetrator. Individuals and communities are often reluctant to talk about it for fear of retribution and stigmatisation. There is need to utilize a multi-media communication approach which entails working with the print and electronic media, theatre groups, women and men's community groups to promote awareness, influence attitudes and convey awareness campaigns and messages to sensitize the public about SGBV, harmful and retrogressive cultural practices, to promote hope and trust in the ability to change. Media attention to sexual violence can raise awareness and pressure governments and the humanitarian community to support prevention measures and support for survivors. However, the media must take care to report the phenomenon accurately and sensitively. The media can be used to offer relevant and timely and interesting human stories provide factual and credible information. The inter-faith community can leverage on the press to reach the general population as part of their advocacy against GBV, which should target all levels of the community. A multi-media approach can be used to engage key public institutions including the disciplined forces and institutions of higher learning. Moreover, there needs to be open dialogue about the relation between GBV and the increase in HIV/AIDS infection rates.

Economic Empowerment of GBV survivors

A large proportion of the survivors of GBV are women and children who economically disadvantaged and disempowered. Advocacy efforts must therefore incorporate skills training and the provision of resources that will economically empower the survivors of GBV and make them less dependent on the abusive spouse. This has been very successful in Tanzania where the Vicoba village community banks were established specifically to empower the locals at the village level (including survivors of GBV) on entrepreneurship skills as a means of improving their living standards.

11.6 Lessons Learnt and the Way Forward for the Tamar Campaign

Faith based organizations have a wide network of contacts in both rural and urban areas. They are well placed to address the root causes of gender based violence and promote gender equity within their own constituencies as well as protection strategies for survivors of GBV. Church leaders are in a position to effectively re-address deeply held opinions of the value of women and men, where women, historically and today, are systematically marginalized and devalued. The Tamar Campaign is an effective instrument of intervention for faith-based organizations and institutions in the local communities advocate for the right to justice and to support strategies and interventions that fight stigma and discrimination of survivors of GBV.

All religions have holy books with some form of message condemning violence against humanity. Theological based references from the Koran and Bible could be used as a legitimate basis to

preach against GBV and related themes such as the spread of HIV/AIDS through sexual violence. Religious leaders and faith-based organizations need to be role models who value compassion and community building over constraining gender roles. In addition, places of worship need to be places of solace and healing for the survivors of violence. The inter-faith platform has an obligation to lobby for this.

Religious leaders need to be well-informed and up-dated on current affairs and to make efforts to communicate effectively if their advocacy efforts are to have a significant impact on the targeted audiences. Religious institutions must comprehensively address GBV and work towards a reduction in the HIV/AIDS infection rates. A top-down approach needs to be implemented where religious leaders interrogate the notions of gender relations and speak openly about the derogatory nature of SGBV. Church leaders and other faith-based institutions were urged to form coalitions and partnerships to effectively lobby for legislation and harsh punishment against perpetrators of GBV.

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Annexes



Annex 1

Gender Focal point consultation Workshop (December, 2012)

NOTE

This section provides a consolidated account of the responses to a Questionnaire distributed to the National Council Gender Representatives on the impact of the Tamar Campaign in Eastern Africa. The Gender Focal Point Consultation workshop was held at the AACC in December 2013. The primary objective was largely to provide a capacity building and sharing platform for the National Council Gender Representatives. In attendance were five participants, directly and/or indirectly working with Women Programmes from Ethiopia Evangelical Church Mekane Yesus (EECMY), Uganda Joint Christian Council (UJCC), National Council of Churches of Burundi (CNEB), Sudan Council of Churches (SCC), and Christian Council of Tanzania. The participants shared their successes and challenges in implementing the Tamar Campaign/Women Programme activities. Their responses are summarized in the Tables:

Country & Resource Person	Summary of Reports / Findings
<p>ETHIOPIA EECMY Respondent: Mrs. Tedelech Loha, Former Women Ministry Coordinator (EECMY)</p>	<p>GBV is a priority area for the Women Ministry Department of EECMY. The Tamar Campaign was launched in 2010/2011 and it has helped the participants know clearly and interpret to their own context the issues mentioned in Story of Tamar.</p> <p>Tamar Campaign has facilitated Churches/people to give due attention/emphasis on the Story of Tamar in the Bible, something that had not been happening. Tamar Campaign has also enabled participants be able to conduct Bible Studies at different levels on the theme.</p> <p>Former Women Ministry Coordinator of EECMY, Mrs. Tedelech Loha, rated her knowledge and expertise in the use of the Tamar Campaign Manual as excellent, having used the Tamar Campaign Manual and spoken about the Campaign in Churches, Conferences, and Workshops. Approximately, she uses the manual twice a year.</p> <p>The Coordinator disclosed that they have found the Tamar Campaign Manual useful during the 16 Days of Activism Against Violence on Women and the International Women's Day.</p> <p>The Coordinator has trained all synods and work areas of EECMY Leaders; Synod leaders; Parish leaders; Congregation leaders; Women Groups at different levels of the Church, youth groups among others. The Coordinator felt that the Tamar Campaign Manual is easy to use. They have attempted to translate bits of the manual to local language and it worked well.</p> <p>She suggested that the following should be included as an objective among the six Tamar Objectives: To encourage/build the capacity of pastors and evangelists to include Tamar Campaign issues, that is other Gender Based Violence in their teachings so as to speak about them at the pulpit.</p>

<p>TANZANIA CCT (Rev. Leita Ngoy Mwakilima, Women and Gender Representative, CCT)</p>	<p>The presenter explained that in CCT the TAMAR Campaign is often an advocacy program that aims to break the silence on gender based violence with the focus on rape and domestic violence as well as FGM. The following are responses from the questionnaire:</p> <p>She had heard of the Tamar Campaign from a training/workshop by the Christian Council of Tanzania (CCT) during the “Women Leaders’ Workshop” that was held in 2011. The Campaign was launched in the Council in 2008 and they have been able to utilize the Tamar Campaign within their constituency.</p> <p>The Tamar Campaign has been a very useful tool for CCT constituency because through this campaign, they have been able to unveil the evil of FGM. They have also been able to suggest new ways to stop the practice with a success of 75%.</p> <p>As regards her knowledge and expertise in the use of the Tamar Campaign, she rated herself as having good skills. She has used these skills and knowledge in workshops although she has not used the manual to train others.</p> <p>She disclosed that the Tamar Campaign Manual was easy to use, and that approximately she uses the manual quarterly in a year. She has previously used this manual during the 16 Days of Activism Against Violence on Women.</p>
<p>UGANDA UJCC (Mr. Godfrey Mukalazi Programme Officer Justice, Peace, and Reconciliation)</p>	<p>The Tamar Campaign in UJCC was launched in 2006. The Tamar Campaign and the CBS Manual usage has been integrated in the Peace Building & Conflict Transformation Trainings that the programme carries out among some Ecumenical Joint Action Committees (EJACs). (EJACs are UJCC structures at regional, district, sub county, Parish, and Church level.</p> <p>The respondent had already heard about the Campaign at a Training Workshop. He has used the CBS manual within the council’s constituency especially in illustrating selfishness, ill advice, and violence and in offering psychosocial support. He has done this in Churches and workshops. Approximately, he uses the CBS Manual more than four times a year.</p>
<p>SOUTH SUDAN SCC (Mrs. Florence Guliba, Women and Youth Officer)</p>	<p>The respondent said that she had heard about the Tamar Campaign in 2010. The Tamar Campaign had not yet been launched within SCC (Now South Sudan Council of Churches – SSCC)</p> <p>The Tamar Campaign is especially a useful tool because of its Biblical framework. She asserted that the matters addressed by the Tamar Campaign relate to the situation of women from background of conflict where GBV is rife.</p> <p>She submitted that there was a need to build their capacity on how to use the CBS manual. This will enable them to professionally use it. They requested for facilitation to translate the Tamar Campaign Manual to local languages.</p>

Annex 2

Monitoring & Evaluation of the Tamar Campaign since its launch in Nairobi (2005).

(Assessment of the Successes, Challenges, Lessons and Way Forward)

Country	Resource Person	Questionnaire & Interview questions
KENYA	Monica Njoroge	<ul style="list-style-type: none"> * Provide an Overview of the Tamar Campaign and Contextual Bible Study since it was launched. (Personalize it to be your story working at FECCLAHA). * After the Tamar Campaign was launched by the NCKK, what happened? How have member churches of the national council engaged with different aspects of GBV? * What are the lessons learnt and the challenges experienced especially with regard to FECCLAHA mainstreaming Gender Awareness into its Programming * What are the positive stories with regard to the production of the Contextual Bible Study Manual on GBV, Healing and Reconciliation? Comment about the success stories and challenges of translating the Manual into different languages as well as the challenges in implementing it within the region * Any challenges in forming networks with like-minded institutions or selling the campaign to Pastors? Any success stories from the Nairobi Youth Workers and Pastors Network (NAYNET), an umbrella body of over 250 Youth Pastors in Kenya. Any stories on the impact of the International Women's Day whose theme was "Shaping Progress through Healing & Tamar Campaign together with Tukomeshe Unajisi? * Any challenges with regard to combating harmful cultural practices particularly in Kenya for instance between Patriarchy, Redemptive Masculinity, the relationship between GBV and HIV/AIDs, etc?

Core Area – Redemptive Masculinity

KENYA	<p>St. Paul's University Prof. Esther Mombo</p> <p>EHAIA Rev. Pauline Wanjiru Njiru</p>	<ul style="list-style-type: none"> * What is the relationship between masculinity and gender-based violence? * Drawing from real life experiences, can you give practical experiences of how Gender-based Violence (GBV) is rooted in unequal power relationships between men and women? * What is the link between negative masculinities and the increase of GBV in Kenya and other parts of the Eastern African Region? * Give practical examples of how we can deconstruct masculinity and reconstruct masculinity.
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KENYA		<ul style="list-style-type: none"> * Are there any success stories demonstrating alternative ways of defining masculinity in Kenya? * How have you managed to integrate the Contextual Bible Study (CBS) in your syllabus at St. Paul's University? (Please relate this to the 5cs (Community, Context, Criticality, Conscientization, Change) * What have been the challenges experienced particularly dealing with the patriarchal dominance in society as well as in the Bible? * How can we apply redemptive masculinity that is found in the personalities of individuals like Jesus and Jairus in the Bible in our African society? In other words, how can particularly men forgo the privileges that patriarchy and gender brings for the betterment of society? * Are there any success stories about creating dialogue channels through which discussions on cultural practices, values and beliefs can be reflected upon?
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Core Area – Female Genital Mutilation

TANZANIA	Tamar Campaign activities and the YWCA in Tanzania	<ul style="list-style-type: none"> * FECCLAHA was involved in the initial training and introduction to the TAMAR campaign and CBS methodology. FECCLAHA also played a role in the translation and publication of the Kiswahili translation of the CBS. How has this benefited member churches? * How has the YWCA used the Tamar Campaign to help women, children and families to move out of violence-based environment and given them better lives to live? * What are the activities of the YWCA Tamar Campaign Committee in addressing different forms of violence meted out to women in different contexts? (Provide possible success stories about individuals)
TANZANIA	Tamar Campaign through the Christian Council of Tanzania (CCT)	<ul style="list-style-type: none"> * How has the Christian Council of Tanzania (CCT), Women Development Children and Gender (WDCG) program been engaged in promoting women empowerment in the advocacy against GBV and FGM in the 5 districts of Kiteto, Singida, Tarime, Serengeti and Rorya? * Any success stories or lessons learnt?

	Children Festival against FGM in Singida	<ul style="list-style-type: none"> * Any success stories in the advocacy program against FGM in Singida district? Could you give any stories by individuals or groups? What lessons learnt during this festival? How did the children benefit? What were the indicators of the success of this programme? * What activities has the CCT been involved in with regard to the Tamar Campaign? * Has the CCT held any workshops or training to sensitize its members about GBV?
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CORE AREA – HARMFUL TRADITIONAL PRACTICES (HTPs)

ETHIOPIA	Mrs. Tedelech Loha, Former Women Ministry Coordinator (EECMY)	<ul style="list-style-type: none"> * Any success stories of how any of these trainings or use of the CBS has impacted on specific members especially in dealing with domestic violence and harmful traditional practices? * What challenges have been faced in the effort to abolish GBV and harmful traditional practices against women? * What lessons have been learnt about involving both men and women to fight harmful traditional practices? * What impact has the Tamar Campaign and Contextual Bible Study had with regard to Gender based Violence and HIV/AIDS concerns? * Have you found it relevant in addressing related harmful cultural practices that encourage the spread of HIV/AIDS in the region?
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CORE AREA – GBV and HIV/AIDS

UGANDA	UJCC (Mr. Godfrey Mukalazi, Programme Officer Justice, Peace, and Reconciliation)	<ul style="list-style-type: none"> * What have been the activities of Uganda Joint Christian Council (UJCC) and its church members, as an advocacy, lobbying and capacity building organization against GBV? * Who are its target beneficiaries? * Where is GBV most rampant in post conflict communities within Uganda? * Describe the Peace Village Program as an initiative that encompasses the Tamar Campaign. * Any success stories from the Tamar Campaign, the international Day of Prayer and the 16 days of Activism against violence on women? * Any Lessons learnt and success stories from advocacy and lobbies against Gender Violence? * Any success stories from community liaison policing and collaborations with Police (Luweero Women’s Group) on Girl Child Education? * Any lessons learnt and success stories from Training of Trainers in Karamoja and Kasese focusing on providing psychosocial support training with the Tamar Campaign as an entry point? * What are some of the challenges experienced with regard to culture, tradition, poverty levels, etc. that hamper the effective application of the Tamar Campaign and CBS?
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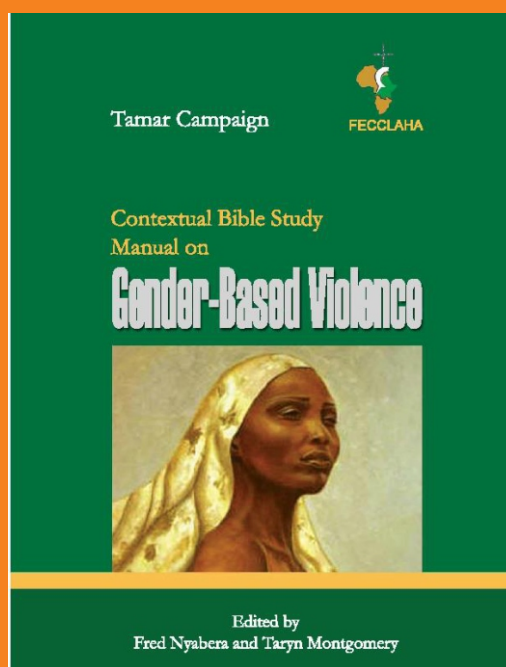
CORE AREA – SGBV

<p>BURUNDI</p>	<p>CNEB (Mrs. Perpetue Kankindi - Women, Family, and HIV/AIDS Coordinator)</p>	<p>Please give us your personal experience on the following: When was the Tamar Campaign launched in Burundi by the National Council of Burundi? How many member churches were involved? How many people participated in the event? How successful was the launch? Who was in attendance? What activities took place? Has the CNEB had collaborations and networks with others in Burundi to advocate against SGBV? What kind of support has been offered to the sufferers of SGBV? What challenges have you encountered applying the contextual bible study? Any challenges from the government or from the society at large in implementing the Tamar Campaign? What issues make women, children and men vulnerable to violence attacks in Burundi? What challenges have been faced in the Church trying to ensure that women and children are safe from these atrocities that take place during conflicts? What lessons can be learnt about how the Church in Burundi can take on a more significant role in implementing the Tamar Campaign and using the Contextual Bible Study? * Do you have any stories that reflect successes of the Campaign? These stories could be your own personal experiences or those of beneficiaries directly impacted on by the Campaign or use of CBS. * What lessons have been learnt in trying to champion this campaign and its effort to confront the spread of HIV/AIDS in the region? * What challenges have been encountered especially with regard to advocacy or confronting harmful cultural practices? * The Contextual Bible Study manual has become a key resource for collaborating institutions addressing concerns linked to Gender-Based Violence like HIV/AIDS</p>
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Please give us your personal experience on:

<p>RWANDA</p>		<ul style="list-style-type: none"> * When was the Tamar Campaign launched in Rwanda? * How many member churches were involved? * How many people participated in the event? * How successful was the launch? Who was in attendance? * What activities took place? <p>Have you engaged in any collaborations and networks with others in Rwanda to advocate against SGBV? What kind of support has been offered to the sufferers of SGBV? What challenges have you encountered applying the Contextual Bible Study? Any challenges from the government or from the society at large in implementing the Tamar Campaign?</p> <ul style="list-style-type: none"> * Any success stories from the survivors? * What harmful Cultural Practices make women, children and men vulnerable to violence attacks in Rwanda? * What challenges have been faced in the Church trying to ensure that women and children are safe from these atrocities that take place during conflicts? * What lessons can be learnt about how the Church in Rwanda can take on a more significant role in implementing the Tamar Campaign and using the Contextual Bible Study?
<p>SOUTHERN SUDAN</p>	<p>South Sudan Council of Churches (SCC) (Mrs. Florence Guliba-Women and Youth Officer.)</p>	<ul style="list-style-type: none"> * What are the common problems associated with violence against women in the Sudan? * What have been the activities of the SCC National Women Programme? * Is the Tamar Campaign Contextual Bible Study being used in any churches? Has the Campaign been launched within the Council? * What happened during the Women’s Day of Prayer? What was the theme and who participated? * How would greater implementation of the Contextual Bible Study benefit the region? * What challenges is the SCC Women Desk facing with regard to GBV, understanding and implementing the Contextual Bible Study?

Gender Based Violence and The Impact of The Tamar Campaign In The Great Lakes and Horn of Africa



Gender-Based Violence (GBV) is a serious global health, human rights, and development issue. While GBV is prevalent in all societies, crisis situations including civil strife and armed conflict usually exacerbate the extent and incidence of the problem, particularly with regard to sexual violence against women and girls. It is often used as a weapon of war with the bodies of vulnerable groups in a community becoming the new battlefield. In 2005, FECCLAHA facilitated the launch of the Tamar Campaign in Nairobi with the aim of providing an advocacy strategy mainly for churches and Faith-Based Organizations to address Gender-Based Violence (GBV). Since then, this Campaign has since been rolled out to different countries in the Great Lakes Region coordinated by FECCLAHA's member national councils and collaborating partners in the region. The approach is rooted in a Contextual Bible Study methodology which provides a relevant and effective tool for religious leaders to boldly confront sensitive issues such as rape, incest or the increase of HIV/AIDS infection rates. This publication documents some of the experiences and challenges faced in implementing the Tamar Campaign within the Great Lakes Region of Eastern Africa. Together, the Tamar Campaign and the Contextual Bible Study Manual provide a safe space and Bible-based resources to break the silence that surrounds SGBV.

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