



# Engaging with Faith Groups to Prevent Violence Against Women & Girls in Conflict-affected Communities

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**HEAL AFRICA**



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Violence Against Women and Girls

# Intervention Design

- **Goal: Social norm change in target communities** so that;
  - 1. **Violence against women and girls (VAWG) is no longer acceptable.**
  - 2. Men and women experience **more equitable, violence free relationships.**
  - 3. Women and girl **survivors experience reduced stigma** and have **increased support & access to available support services** (medical, psychosocial, justice).
- **Theory of Change:**
  - **Harmful social norms, related to gender inequality, and often influenced and justified by religious beliefs,** are recognized as **key root causes of VAWG** within communities, so addressing these underlying factors is vital for effective prevention.
  - By mobilizing and equipping **faith leaders as catalysts,** and **working with men and boys,** women and girls within communities, this project aims to **support local actors to transform underlying causes of VAWG;** gender inequality, harmful social norms.
    - **Location:** Orientale Province, Democratic Republic of Congo (**DRC**)
    - **Timeframe:** 36 months

# Engaging and equipping local Agents of Change



## Key catalysts:

- 75 Faith leaders
- 30 'Gender Champions'
- 15 Community Action Groups (225 men+women)

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# Engaging and equipping local Agents of Change (cont.)

- **Tearfund is working with local partner organisation HEAL Africa** to engage, train and equip, and provide ongoing mentoring and support for these local agents of change.
- **Trainings in Year 1 on:**
  - VAWG, including sexual violence, IPV, root causes and theological perspectives (3 days)
  - Needs of survivors and how to support them: service mapping /referral pathways (2 days)
  - Gender Justice: Transforming Masculinities (2 days Faith Leaders, 3 days Gender Champions)
  - ‘Healing of Memories’ narrative therapy for supporting survivors’ emotional healing (2 days)
  - Basic principles for counselling / mediation (2 days)
- Trainings will be followed and sustained by an **ongoing mentoring process** for the faith leaders and gender champions(meeting fortnightly), to support personal transformation and facilitate **peer learning** opportunities, as well as annual **refresher trainings**.
- Training **manuals and tools** are being developed/ adapted and shared.

# Community interventions

- **Faith leaders will act as role models**, using their position of influence in the wider community to speak out against VAWG and stigma, advocate for gender equality, non-violence and survivor rights, and teach alternative understandings of faith texts on gender and VAWG, through their **existing activities within their faith groups**;
  - Sermons/ preaching in churches and mosques
  - Prayer / study groups – including men’s groups, women’s groups, youth groups
  - Couples counselling/ mediation, pastoral counselling and household visits
  - Advocacy through faith networks
- **Gender Champions will act as role models** within the community, speak out against VAWG, and encourage social norm change around gender equality, and stigma by;
  - **Facilitating Community Conversations (monthly)**
  - Positions of leadership /decision making in the community, eg. as teachers.
- **Community Action Groups** (includes FLs and GCs, meet monthly) will share information and support survivors to access services, and advocate for survivor rights.

# Integrated Research component

- **Research partner: Stellenbosch University**, to **measure impact** over the whole project period; mixed method, qualitative research approach.
  - Working with a **local Research Assistant for primary data collection** in target communities (personally trained by Lead Researcher),
  - **Panel study** (20 FLs, 10 GCs; tracking sessions every 6 months; key Informant interviews and focus group discussions, MSC process and ongoing self-assessment questionnaires),
  - Baseline and endline research with **survivors** (focus group discussions),
  - Annual research with selected **community members** who participate in faith groups / community conversations, etc (key informant interviews and focus group discussions)
  - Endline **evaluation** research by Lead Researcher in target areas.
- **Quantitative KABP baseline and endline survey by Gamos**
  - KABP Baseline data collection (trained local enumerators) completed 31 July 2015
  - Target sample size of 840 (Random sampling) - Actual: 1,200 (52% female)
  - Confidence interval 5%; 95% confidence



# Initial Findings: Baseline KABP

## Communities are religious

- 96% of the combined sample declaring a religious affiliation,
- 84% attending their religious institution with various degrees of regularity,
- that leaves 80% (N=961) of the sample that are actively engaged with a religious institution

# Initial Findings: role for faith groups

## Community perspectives on the potential role for faith groups:

- 84% of all respondents felt that religious institutions should play an active role in promoting gender equality;
- 83% felt that religious institutions should be a safe space for those affected by SGBV;
- 86% felt religious institutions should counsel men and boys on harmful attitudes/ practices.

## Current scope:

- 64% of respondents (engaged with a religious institution) said that their religious institution provided counselling of some kind.
- 49% said that it provided some kind of counselling or support for those affected by SGBV.
- 51% said their institution actively advocates for those who have been affected by SGBV.



## Reality for survivors:

- Nearly all respondents who identified themselves as survivors received no support from their religious institutions.
- Support from the community (not specified) was slightly better, but still only 17% of survivors said the community had been supportive.
- Note the two are linked ( $r_s = 0.49$ ,  $p = 0.000$ ), suggesting that some survivors were able to access support from community and church, and others were isolated.

# Initial Findings: attitudes

<b>Agree/Strongly agree:</b>	<b>Male</b>	<b>Female</b>
A man is superior to a woman	87%	79%
God created man and woman equal	47%	53%
A good woman obeys her husband even if she doesn't agree	81%	72%
A man is entitled to sex with his partner, even if she doesn't feel like it	67%	63%
When married, a woman has no right or control over her body according to Scriptures	79%	73%
There are times when a woman deserves to be beaten	46%	42%
The Scriptures command a man to physically discipline his wife if she does something wrong	55%	52%
A man is justified in rejecting his wife if she has been raped	35%	28%

# Initial Findings: social norms

**For three behaviours (linked to the project goal, key social norm changes ):**

- Beating a wife/partner; Forced sex; Supporting survivors

**Six social referents:**

- Partners; Friends; Parents; Family members; Community Leaders; Religious leaders
- Majority already viewed both the violent behaviours as harmful (both attitudes + stated subjective norms are negative)
- Motivation to comply: respondents indicated behaviour less likely to be influenced by peer pressure than by individual beliefs
- **Religious leaders are the ONLY social referent that respondents (both men and women) were relatively strongly motivated to comply with.**

# THANK YOU

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