THE REPUBLIC OF UGANDA

THE NATIONAL POLICY ON ELIMINATION OF GENDER BASED VIOLENCE IN UGANDA

REVISED EDITION

MINISTRY OF GENDER, LABOUR AND SOCIAL DEVELOPMENT

August, 2016

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ACRONYMS AND ABBREVIATIONS

CEDAW	Convention on the Elimination of all Forms of Discrimination against Women
CEDOVIP	Centre for Domestic Violence Prevention
CRC	Convention on the Rights of the Child
CSO	Civil Society Organizations
DEVAW	Declaration on Elimination of Violence Against Women
EC	Emergency Contraceptives
FBO	Faith Based Organizations
FGM	Female Genital Mutilation
GBV	Gender Based Violence
HIV/AIDS	Human Immune Virus/Acquired Immune Deficiency Syndrome
HMIS	Health Management Information System
ICGLR	International Conference on the Great Lakes Region
ICPD	International Conference on Population and Development
JLOS	Justice, Law and Order Sector
LC	Local Council
M&E	Monitoring and Evaluation
MDAs	Ministries, Departments and Agencies
MGLSD	Ministry of Gender, Labour and Social Development
MOIA	Ministry of Internal Affairs
MOH	Ministry of Health
MOLG	Ministry of Local Government
NDP	National Development Plan
PEP	Post Exposure Prophylaxis
SDSP	Social Development Sector Plan

STI	Sexually Transmitted Infections
UCHL	Uganda Child Helpline
UDHS	Uganda Demographic and Health Survey
VAC	Violence Against Children
VAW	Violence Against Women

FOREWORD

The National Policy on Elimination of Gender Based Violence (GBV) in Uganda has been developed to address the critical problem of GBV in the Country. The recent Uganda Demographic and Health Survey (UDHS) 2011 revealed unacceptable high prevalence of GBV. Gender-based violence is a gross violation of fundamental human rights and has severe, long-term negative impacts on the physical, and psychological wellbeing of the survivors, their families, and the community.

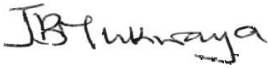
The Ministry of Gender, Labour and Social Development initiated the development of a National Policy to prevent Gender Based Violence, foster a zero tolerance environment, provide comprehensive response, care and support services to survivors/victims as well as to eliminate impunity and end Gender Based Violence.

This Policy is a product of wide consultations with various stakeholders including, Line Ministries, Departments, Development Partners, Local Governments, Civil Society and Faith Based Organisations.

The purpose of this Policy is to assist stakeholders to improve and expand their programmatic efforts to prevent and respond to GBV. Concerted efforts and active participation of all stakeholders will be a catalyst to eliminating GBV from our society.

I therefore, encourage all actors to translate the Policy priority interventions into actions and allocate adequate resources for implementation. I further encourage feedback on best practices. The crucial issue is to ensure that the Policy objectives are mainstreamed in all policies, programs and plans.

Lastly, I call upon all stakeholders, duty bearers and right's holders to use this Policy as a guide for the effective prevention and response to GBV.



Janat B. Mukwaya (Hajat)
Minister of Gender, Labour and Social Development

1.0 BACKGROUND

1.1 Introduction

The term Gender Based Violence (GBV) evolved from the term Violence Against Women (VAW). The UN Declaration on Elimination of Violence against Women (1993) defines violence against women as "any act of gender based violence which results in or is likely to result in physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or are arbitrarily deprivation of liberty, whether occurring in public or private life." Since Gender Based Violence almost always has greater negative impact on women and girls, it is often used interchangeably with the term Violence against Women. However, men also can be victims of GBV. Over time Gender Based Violence has become an umbrella term for any harm that is perpetuated against a person's will on the basis of unequal relations between women and men as well as through abuse of power.

In this Policy, GBV shall be taken to refer to physical, sexual, economic or psychological violations which are subjected to individuals and/or a group of persons based on social expectations of men and women. The Policy shall focus on the following forms of Gender Based Violence;

- Physical violence which includes; battering and beating.
- Sexual violence which includes; rape, child sexual abuse, defilement and incest, sexual assaults, sexual harassment, forced prostitution and trafficking in persons.
- Harmful traditional practices such as Female Genital Mutilation, early and forced marriages and dowry related violence.
- Economic violence such as denial of assets and economic livelihoods.

- Emotional and psychological violence such as verbal abuse, humiliation and confinement.

GBV reinforces inequalities between men and women, girls and boys and compromises the health, dignity and security of those affected. GBV occurs in the households and families (domestic violence), in the community, at work places, in schools and institutions as well as situations of armed conflicts. It has physical, sexual and mental health consequences to those affected. It also has wide implication for the economic and social wellbeing of families and communities (UDHS 2006). Incidences of GBV stem from norms and roles of men and women ascribed by society, male dominance and female subordination leading to unequal power relations in families and the community.

This Policy is meant to promote prevention, response and ending impunity of Gender Based Violations in the country.

1.2 Legal and Policy context

1.2.1 Legal Context

As the Supreme law of the Country, the Constitution of the Republic of Uganda provides a strong legal foundation for the formulation of the National Policy on Elimination of GBV in Uganda. Objective XIV of the Constitution of the Republic of Uganda mandates the State to fulfill the fundamental rights of all Ugandans to social justice and economic development and in particular to ensure that all development efforts are directed at guaranteeing maximum social and cultural well-being of the people. The Constitution further enjoins Government to formulate policies and enact laws to protect all citizens against Human Rights abuse. In recognition of the fact that GBV affects women and girls more than men and boys,

Government has the obligation to protect their rights, taking into consideration their unique status and maternal functions in society as provided for under Article 33(3) of the Constitution.

In line with the above, there are laws to operationalize the provisions of the Constitution that address GBV. These include: The Domestic Violence Act 2010 and its Regulations 2011; The Prohibition of Female Genital Mutilation Act 2010 and regulations; The Prevention of Trafficking in Persons Act 2009; The Penal Code Act, Cap 120, The Children (Amendment) Act 2016 and The International Criminal Court Act 2010.

Other laws include the Land Act, Cap 227, The Employment Act, 2006, The Employment (Sexual Harassment) Regulations 2012 and the Magistrates Courts Act Cap 16.

1.2.2 National Policy Framework

This Policy is consistent with the Uganda Gender Policy (2007) whose goal is gender equality and the empowerment of women. The Policy is also in tandem with the National Development Plan II (NDP) (2015/16 – 2019/2020) which underpins gender equality as basis for development. Eliminating Gender Based Violence (GBV) is a strategic action of the NDP II.

The Policy gives legitmacy to other commitments such as the National Action Plan on Women (2007), the Uganda Action Plan on UN Security Council Resolutions 1325 & 1820, the Justice, Law and Order Sector Investment Plan, the Social Development Sector Plan (SDSP), and Health Sector Strategy and Investment Plan (HSSIP) among others.

1.2.3 Linkages with other policies

This Policy will address gaps left by other policies regarding discrimination and inequalities. It shall not be implemented in isolation but seeks to supplement efforts by other policies especially those that address gender based violence and other negative practices that pose a threat to human dignity. Other policies that the Elimination of GBV Policy seeks to complement include:

- **The National Community Development Policy for Uganda (2015):** This Policy recognises gender sensitivity as one of its guiding principles and an action area on male involvement for reproductive health as well as community dialogue approach to address GBV and other harmful cultural practices.
- **The Equal Opportunities Policy (2006),** Gender is one of the priority areas with a focus on equitable access and control of resources, and addressing negative cultural practices that limit opportunities for marginalised men and women.

- **The Uganda Gender Policy (2007)** which, under the priority of gender and rights, seeks to address issues of gender inequality in access to justice, socio-cultural discrimination against women and girls, Gender Based Violence and limited awareness about rights.

- **The Uganda National Culture Policy (2006)** seeks to promote community action on cultural practices that promote and that impinge on human dignity.

- **The National Health Policy (2012)** recognizes domestic violence, rape, sexual abuse, abuse of children, which are often related to excessive use of alcohol as some of the common ills that

affect the health outcomes of Uganda. The Policy seeks to address these ills through health promotion and prevention.

1.2.4 International and regional instruments

This Policy takes cognizance of the international and regional instruments that address GBV which Uganda is a signatory to. These include; Convention on Elimination of all Forms of Discrimination against Women (CEDAW), International Conference on Population and Development (ICPD) 1994, Convention of the Rights of the Child (CRC) 1990, The Beijing Declaration and Platform for Action (1995) and the Declaration on Elimination of Violence against Women (DEVAW) 1993. Others are; UN Security Council Resolution (SCR) 1325 on Women, Peace and Security, UN SCR 1820 on Sexual Violence in Situations of Armed Conflict and the International Conference on the Great Lakes Region Protocol (ICGLR) 2006 which aims to provide protection for women and children against the impunity of sexual violence in the Great Lakes region.

2.0 SITUATION ANALYSIS

The Uganda Demographic and Health Surveys (UDHS) of 2006, 2011 and 2016 as well the National GBV Survey 2010 reveal that GBV is wide spread and affects all people irrespective of their social, economic and political status. GBV occurs in families, communities, workplaces and institutions. However, GBV within families is often hidden from public sight and those who bear the burden usually suffer in silence either due to fear of repercussions of reporting or lack of awareness of their rights and services available.

There is high prevalence of GBV in Uganda manifested through emotional, physical and sexual violations. According to the Uganda Demographic and Health Surveys (2011), GBV prevalence rate stood at 56% for physical violence, 27.7% for sexual violence and 42.9% for spousal emotional violence. The majority of GBV victims/survivors are women and children although the trend of men experiencing violence increased from 20% in 2006 to 22% in 2011.

The UDHS 2016, shows that the prevalence of GBV is at (51%) of women and 52% of men who have ever experienced physical violence since age 15. Twenty two percent (22%) of women and 8% of men have ever experienced sexual violence. On the other hand 56% of ever-married women and 44% of ever-married men have experienced spousal violence, whether physical, sexual or emotional.

The UDHS report (2016) reveals the percentage of ever-married women age 15-49 who have ever experienced emotional, physical, or sexual violence committed by their husband/partner by region as follows: Acholi 60%, Lango 59%, Karamoja 62%, Teso 61%,

Bunyoro 50%, Tooro 58%, Ankole 73%, Kigezi 59%, Busoga 49%, Bukedi 72%, Elgon 54%, North Central 47%, South Central 46% and Kampala 38%.

The Ministry of Gender, Labour and Social Development conducted a study in 2017 to generate data and information on the underlying causes of GBV as well as the contributing factors that result in the high prevalence across the country. The study established that GBV is rooted in the social and cultural perceptions, norms and practices of all communities that reinforce unequal power relations at household and societal level. Various factors operate in an interrelated manner within the framework of inequality to contribute to or drive the occurrence of GBV. These factors/drivers include; poverty, misuse of ICT and media, HIV and AIDS, alcohol and substance abuse, unemployment, limited education and poor parenting practices.

Spousal Violence

More women (59.7%) than men (42.3%) reported having experienced some form of violence perpetuated by their sexual partners (UDHS, 2011) in the twelve months preceding the survey. Similarly, more women (44.5%) than men (32.7%) reported to be experiencing violence from their sexual partners. Spousal violence encompasses the different forms of violations, physical, emotional, economical and sexual. Overall, according to UDHS 2016, about one-third of ever-married women (37%) and men (33%) aged 15-49 reported that their current or most recent spouse/partner had ever exhibited three or more specific types of controlling behaviours.

According to the Study report on the Drivers of GBV in Uganda (MGLSD 2017) there are regional variations regarding the drivers

of spousal violence. In the Central region it was attributed to lack of economic empowerment among women and girls particularly in rural areas which leaves them dependent on their husbands; limited awareness about their rights especially among the less educated women and girls; producing children of the same sex which is usually blamed on the woman and oppressive cultural practices that favour men at the expense of women and girls.

In Eastern and Karamoja regions, the issue of limited livelihood options was a major cause of Spousal violence for example failure for women to provide the basic needs such as food for the family.

The main drivers of spousal violence in the Northern region are the social norm of treating women as "property" of men and where girls are believed to be 'transient' members of the family.

In this post conflict region, the Ministry of Health Report, 2007 revealed that GBV occurs within households and is mainly perpetrated by intimate partners; in families by relatives and in the community where it was perpetrated by armed combatants, gatekeepers and those in authority. The report highlights the most prevalent forms of GBV as wife battering (30%) and marital rape (13%).

The study pointed out that Spousal violence is higher among poorer households in all regions, mainly due to the frustration of several unmet basic needs compared to the middle income category with means to meet their basic needs.

Sexual Violence

Sexual violence has significantly decreased from 39% (2006) to 28% (2011). According to the UDHS 2016, Twenty-two percent of women and 8% of men have ever experienced sexual violence since

the age of 15, while in the past year, 13% of women had experienced sexual violence, compared to 4% of men.

The most common forms of sexual violence according to the MGLSD, 2017 Study Report include, rape, defilement, sexual harassment and incest which are largely affecting women and girls. In the same Study, Sexual violence was associated with alcohol and drug abuse, negative media and the desire by girls and the youth to acquire basic needs which exposes them to sexual abuse. The MGLSD Study report of 2017 highlights the main driver across all the regions as alcohol abuse and the study also revealed circumstances under which rape occurred, namely; when women are sick, exhausted with heavy workload and/or after child- birth. The Study further revealed rape among discordant couples especially where the woman is free from HIV and AIDS and the man is infected. Unfaithfulness in marriage by both husbands and wives was cited as a driver and manifestation of sexual violence; in addition sexual violence was linked to alcoholism and drug abuse among the fishing communities compounded with the belief that such communities are in transit therefore there is no need to have permanent sexual partners.

Physical Violence

Physical violence incidences according to UDHS 2011 have slightly decreased among women aged 15-49 years from 34% in 2006 to 27% in 2011, while 16% of pregnant women who are experiencing violence have remained the same. The women in rural areas without education and/or low level of education are more likely to experience physical violence, in comparison to women in the same age group living in urban areas. The UDHS 2016, explores women's and men's attitudes towards wife beating and half of the women

and 41% of men agree that a husband is justified in beating his wife for at least one of the following reasons: if she burns the food, argues with him, goes out without telling him, neglects the children, or refuses to have sex with him. Both women and men are most likely to agree that wife beating is justified if the wife neglects the children (39% and 28%, respectively).

The main drivers of physical violence across all regions according to the MGLSD Study report 2017 include; loss of livelihood, alcohol abuse, increasing workload by women, socialization, self- defense against alcoholic and violent husbands, land wrangles, refusal by the wife to hand over proceeds from sale of agricultural produce, denial of conjugal rights, failure to provide for family wellbeing, cultural norms and male ego.

Emotional Violence

Regarding emotional violence, the UDHS 2006 revealed that 49% of women and 35% of men had experienced emotional violence. The UDHS 2011 Report reveals a wide range of emotional violence committed against women in marital relationships. The contributing factors include; men being jealous when women talk to other men (59%), tracking women's movement outside the home (56%), suspicions of being unfaithful (34%), isolation of women from friends and family at 29% and 20% respectively.

The 2017 MGLSD Study report cites the main drivers of emotional violence to include; abusive language, humiliation by a partner, isolation of the older men by their spouses and children, withdrawal of conjugal rights by either sex, withdraw of support or meeting the welfare of the families, disappearance from matrimonial homes, women's failure to meet the "expectations" of the in-laws, poor use of ICT and media mostly among the educated

people. Emotional violence on economic grounds is largely faced by unemployed men.

Economic Violence

The MGLSD Study Report 2017 indicates that women are still worse off in terms of ownership of land and other assets. The Organization for Economic and Development (OECD) survey 2014 indicates that only 37% of women owned a house alone or jointly with someone else compared to 54% of men. The UBOS and ICF, 2018 survey further informs us that 31% of women in Uganda age 15-49 owned land alone or jointly with someone else compared to 48% men. This resulted from the socio-cultural norms and values that determine women's position in society and sets guidelines and boundaries for socio-economic interaction and entitlements. This has grossly contributed to GBV as women have limited powers over land jointly owned and proceeds from land customarily owned.

The Uganda Demographic Health Surveys of 2011 and 2016 established that economic violence exists in the country. For instance, among the married women aged 15 – 49 years who have access to cash only 53% decide its usage. 38% in 2016 up from 31% in 2011 decide jointly as a couple, while 14% in 2011 with a decrease to 9% in 2016 indicated that the decision is made solely by the husbands.

The MGLSD Study report 2017 established the main drivers of economic violence across all regions to include; men's control over agricultural produce and finances in the households, cases of men controlling their spouses' Bank ATM cards, unpaid care and domestic work, husbands selling off their wives' assets such as

goats without their consent, denial of access to late husband's properties.

Some religious sections have instituted spiritual activities that undermine productivity at household level through engaging their members especially women in routine and continuous engagements. This consumes both time and energy away from productivity. This culminates into violence by spouses and other family members.

Harmful Traditional Practices

a) Female Genital Mutilation (FGM)

The high prevalence of GBV in Uganda is perpetuated by traditional myths, beliefs, and customs. These cultural practices are responsible for some of the worst forms of GBV such as Female Genital Mutilation (FGM), Child marriage, polygamy and son preference.

In Uganda, FGM is practiced in the eastern part of the country among the Sabiny in Sebei region and among the Pokot, Kadam, Tepeth and Ike in Karamoja region. FGM/C is also reported to be practiced among migrant communities by internally displaced persons in Kamuli and Bugiri districts of the Busoga region; and among some refugee communities such as the Somali and Eritrean communities.

The Uganda Demographic and Health Survey (UDHS) 2016 puts national FGM prevalence at 0.3%, a decrease from 1.4% in 2011. The prevalence is highest in Karamoja at 6.4% compared to Sebei at 2.6%.

The UBOS National Survey on FGM (2017), established that regional prevalence in Karamoja is as follows in the practicing

districts; Moroto 52%, Nakapiripiriti 49% and Amudat 42%. In Sebei region the prevalence is: Bukwo 27.7%, Kween 21%, and Kapchorwa 13%. Prevalence is however not uniform among different age groups for instance, among women aged 45 years and above prevalence is at 68% while for the age group 15-24 years, it is at 8%.

The key drivers of FGM/C are embedded in the perceived benefits that include; economic gains, acceptance for marriage, acceptance by peers, considered clean/hygienic, and ensures faithfulness to one's husband.

Despite the above social benefits of FGM, it reduces a woman's ability to have children, to sexually satisfy her husband as well as other negative health effects.

However, with the enactment of the law prohibiting FGM, social practices around FGM such as communal celebrations are changing.

b) Early Marriage

The MGLSD (2017) report affirms that early marriages are common across the regions and associated with other forms of GBV such as sexual violence (defilement and rape), physical and emotional violence. Girls are prepared and married off earlier than the Constitutional age of 18 years mainly because parents want bride price in return or want to abdicate their responsibility of caring and educating their girls.

This is corroborated by the UDHS (2016) where 7% of women age 20-24 are married by age 15, while 34% are married by age 18. The median age at first sexual intercourse for women age 25-49 is 16.9

years, compared to 18.5 years among men of the same age group. Women get married nearly two years after sexual initiation at age 18.7. Ugandan men marry much later than women at a median age of 23.3 years. Within 0.5 years of marriage, women have their first birth. The median age at first birth for women is 19.2 years.

The Social Institutions and Gender Index (SIGI) (2015) report by UBOS further confirms that early marriages remain pervasive and widely accepted across Uganda more especially in the East Central, Mid-Eastern and Mid-Northern sub-regions. The report notes that on average one in two women was married before turning 18 years, while two in three women in the East Central, Mid-Eastern and Mid-Northern sub-regions were married before turning 18 years. The report emphasizes the fact that early marriage is widely accepted; 45% of respondents declared that girls should be married by 18, while 85% believe that men should be married later (UBOs, 2015).

Violence against Children

Violence Against Children (VAC) is manifested through child neglect, sexual violence, physical violence, human trafficking and emotional/ psychological abuse. Anyone including fellow children can be perpetrators of VAC however in the past couple of years that the Uganda Child Helpline has been operational; the trend has seen men especially fathers mentioned as the worst perpetrators of violence against children. The effects of child abuse will not only affect children in the present but more often than not cascade into the future. Below is a table showing the categories of VAC and how they affect girls and boys.

	Child Neglect	Sexual Abuse	Physical Abuse	Child Exploitation	Child Trafficking	Murder	Emotional Abuse	Online Child Sexual Abuse & Violence
Female	621	788	172	55	35	9	5	2
Male	792	11	225	35	18	14	6	0
Unknown	36	0	9	3	4	2	0	2

a) Sexual Violence Against Children

It is also critical to note, that the majority of the GBV survivors are children. Fifty five percent (55 %) of female survivors of sexual violence had the first sexual abuse before 19 years old (UDHS 2006) reflecting high levels of defilement in the Country.

The above scenario is aggravated by challenges related to access to justice. The Uganda Annual Police Crime Reports of 2013 and 2014 indicate that defilement continues to lead in sexual violence crimes. A total of 12,077 defilement cases were investigated in 2014 compared to 9,598 cases in 2013, thus giving an increase of 25.8% while 1,099 cases of rape compared to 1,042 cases in 2013 hence an increase of 5.4%. In 2014, a total of 3,006 cases of domestic violence were investigated compared to 3,426 cases in 2013 giving a decrease of 12.2%. With regard to trafficking in persons, a total of 105 cases were registered in 2014 compared to154 cases in 2013 giving a 31% decrease.

b) Physical Violence Against Children

Common forms of physical violence against children include; punching, kicking, whipping, or beating with an object, strangling, suffocating, burning intentionally, threatening with a knife, gun or other weapon.

The above information from the UCHL is supported by information from the Uganda Violence Against Children Survey 2017(MGLSD) which identified that perpetrators of violence against children in Uganda are; parents, adult caregivers and other adult relatives (Female 45% and male 49%), adults in the community 31% female compared to 41% males, intimate partner at 6% female and 3%male while physical violence by a peer stands at 22% female as opposed to 39% male.

c) Emotional violence Against Children

The VAC survey highlights these types of emotional violence; when a child is told that they are not loved, or did not deserve to be loved, said they wished you had never been born or were dead, when they are ridiculed or put down, for example if they said that you were stupid or useless.

The prevalence of emotional violence per region before age 18 is as follows; Central 46.0%male in contrast to 38.8% female, Eastern region 34.7% male compared to 37.8% female, Northern region 29.1% male and 25.9% female while western region stands at 30.6% male and 28.2 female respectively.

The VAC survey further reveals that 75% of the females and 76% of the males had experienced multiple types of violence before age 18.

Risk Factors for violence against children.

Violence against Children is catalyzed by a number of factors that predispose the victims and survivors at various points in time. Risk factors include; age and gender whereby younger children are more vulnerable because of close dependence on caregivers while boys are more likely to experience physical violence and girls are more vulnerable to sexual violence due to gender power relations.

In addition, disability is deeply rooted in cultural prejudices that underlies most of the emotional, physical and economic violence faced by children. More so, some forms of disability especially emotional/mental disability are viewed with negativity due to fear that it is contagious or a result of witchcraft.

Family related factors such as low parental education, parents abuse of alcohol and drugs, young age of parents as well as marital status greatly determine the vulnerability of children to violence.

Poverty and unemployment work independently but also in complementarity to cause violence and family stress. These factors are closely related to family size and structure as well as family stability.
The fore mentioned factors are underlined by strong social and cultural norms which shape the way people think and behave.

Violence Against Men

Gender Based Violence is also manifested as Violence against Men especially perpetrated by elite and economically empowered women, a trend that is relatively new in Uganda.

Conclusion

Overall, the underlying causes and key drivers of Gender-Based Violence in Uganda include; unequal power relations, poverty, misuse of ICT and media, HIV and AIDS, alcohol abuse, polygamy, unemployment, limited education, biases in socialisation, poor parenting practices, and impunity.

Cost Benefit Analysis

The cost benefit analysis indicates that response is more costly than prevention; thus a need to invest more in prevention so that we avoid the high cost of caring for survivors.

3.0 PROBLEM STATEMENT

GBV has diverse effects on the individual, families, community and country at large. GBV survivors face discrimination, stigmatization, and isolation often leading to loss of self-confidence. In families, it creates an unpredictable and frightening environment. In the communities and country at large it has a huge cost in terms of income lost due to ill health and diminished motivation to work by the victims.

GBV is wide spread and affects all people irrespective of their social, economic and political status and it occurs in families, communities, workplaces and institutions.

Responding to GBV in terms of law enforcement, health services, court and legal proceedings and social services require substantial human and financial resources. It is estimated that health care providers spend about UGX 18.3 billion annually to deal with the effects; Police spends 19.5 billion while local councils spend 12.7 billion (UK Aid CEDOVIP, 2012).

Eliminating GBV therefore, is currently a pressing challenge which requires the political will and commitment at national, local government and community levels.

The Policy therefore seeks to progressively reduce incidences of GBV by 15 percent in the first five years through comprehensive interventions aimed at changing attitudes, providing holistic services and creating an enabling environment for stakeholder accountability and zero tolerance.

4.0 POLICY RATIONALE

Gender Based Violence impacts negatively on socio-economic development of the country. The cost of GBV on the individual, families, the community and the nation at large is very high. As a result of GBV, the country requires more investment in the health care, Judiciary and Social care service delivery systems. The causes and effects of GBV are multidimensional and require a multi-sectoral approach. There is therefore need for a Policy to guide actions of different stakeholders in prevention, response and management of GBV in the country with a view of eliminating Gender Based Violence from the society.

5.0 GOAL, OBJECTIVES AND GUIDING PRINCIPLES FOR THE POLICY

5.1 Goal

The goal of the Policy is to eliminate Gender Based Violence from all societies in the country.

5.2 Policy Objectives

i. To **reduce** the prevalence of gender based violence and foster a zero tolerance environment.

ii. To **promote** comprehensive care and support services to survivors/victims of gender-based violence.

iii. To **provide a framework** for ensuring accountability and elimination of impunity for gender-based violence.

5.3 Expected Outcomes

The implementation of the National Policy on Elimination of Gender Based Violence in Uganda will lead to the following outcomes:

i. Reduced negative attitudes and practices that fuel Gender Based Violence particularly against women and girls.

ii. Reduced prevalence of Gender Based Violence

iii. Increased access to justice, health and other psychosocial services among GBV victims/survivors.

5.4 Guiding Principles

The implementation of the policy shall be guided by the following core principles;

i. Human rights Based Approach

In cognizance of the fact that GBV is a serious human rights violation, the Policy shall promote and protect the rights of all

women, men, girls and boys to live in a society free of Gender Based Violence.

ii. Gender Equality

Gender equality is a goal of equal opportunity for women, men, girls and boys to resources, capabilities and income in order to reach their full potential. Gender equality is necessary for the achievement of other development goals. GBV is a direct manifestation of gender inequality. It is a human rights violation and serves to perpetuate poverty and impede development. This Policy prescribes interventions to address the underlying causes of GBV which emanate from unequal power relations between men and women

iii. Survivor Centered Approach

The Policy recognizes that GBV leads to stigmatization and dehumanization of survivors/victims. All interventions to implement this Policy shall ensure confidentiality, privacy and respect of the survivors/victims. All service providers and duty bearers shall ensure that information about survivor/victims shall only be divulged with their consent in order to ensure safety and security.

iv. Delivery of timely services

All duty bearers along the referral pathway are obliged to ensure easy and timely access to services by the survivors/victims. Justice delayed is justice denied. Realization of justice requires timely examination, investigation, preservation of evidence and psychosocial support.

v. Effective Participation

Enhancing effective community level involvement to address GBV is core to the Policy implementation. This Policy seeks to institute positive cultural values and practices for addressing GBV, as well as establishing appropriate community structures to enhance community participation, support and response.

vi. Male involvement

Males also experience some forms of Gender Based Violence both in and outside the family set up. The involvement of males as partners in this regard will be promoted specifically to encourage reporting of GBV cases and collaboration with other stakeholders in combating violence. Male involvement is also meant to enable them explore the power relations between men and women. Significant change is possible when collective responsibility for shifting the violent norms that exist is taken.

vii. Multi – Sectoral Approach

The Policy shall promote multi-sectoral collaboration among different actors to ensure effective and efficient service delivery to survivors/victims including legal redress, health care and psychological support.

6.0 POLICY STRATEGIES

The Policy objectives shall be achieved through the following strategies;

- Creating awareness and strengthening sensitization on positive social norms and attitudes within the community and at household level.
- Promoting male involvement in prevention and response to GBV with a focus on masculinity, socialisation, gender relations and polygamy. Hence, there is a need to recognize and address men's and boys' particular vulnerabilities and needs in order to eliminate GBV among them and enable them become agents of change. Some of the possible approaches include development and implementation of community codes of conduct, building capacity for reporting, tracking, referral and response to cases of GBV, supporting the creation of community groups or organizations as well as working with religious and cultural leaders on prevention and reduction of GBV.
- Strengthening community-based prevention programmes including theatre for development.
- Mobilizing and engaging the print and electronic media in broadening the knowledge about GBV prevention and response including misuse of ICT that perpetuates GBV.
- Strengthening coordination among Government institutions, FBOs, CSOs and the Private Sector for GBV prevention and response.
- Mainstreaming GBV issues in legislation, sectoral policies, programmes and strategic plans.

- Building capacities of vulnerable groups and people at risk to protect themselves against GBV and reinforce economic empowerment.
- Enhancing access to essential services for survivors/victims taking into account their unique needs.
- Mobilization of financial resources to support services at all levels for GBV intervention.
- Building a coherent and common system for GBV data collection and management for ease of monitoring and evaluation of the Policy interventions.
- Strengthening Public Private Partnership among Government institutions, Private sector, Faith Based and Civil Society Organizations to expand the coverage and scope of interventions for prevention and response to GBV.
- Supporting the families and communities to play a critical role in transforming the negative social and cultural norms and practices that are driving and perpetuating GBV in Uganda.
- Supporting survivors and/or victims of GBV to break the silence and report cases of GBV to designated institutions so as to hold perpetrators accountable.
- Building family and community capacity to provide social protection services; follow-up GBV cases through home visits to find out how the survivors are managing the after effects of GBV and to provide economic support to the survivors.
- Improving women and girls' access to and utilization of sexual and reproductive health services; promotion and protection of women's rights to have control and decide freely over matters related to their sexuality; family-planning possibilities and HIV/AIDS prevention.

7.0 PRIORITY ACTION AREAS

The priority areas of intervention for Policy implementation are based on the situation analysis. The main focus of this Policy is to prevent Gender based violations and to eliminate and end impunity for GBV. However, where GBV has occurred, emphasis shall be on providing care and support services to the survivors/victims. Within the framework of the multi-sectoral approach, the Policy shall focus on the following priority intervention areas;

7.1 Prevention of Gender-Based Violence

Gender based violations are rooted in the structural imbalances of power between men and women. Most societies condone Gender Based Violence as acceptable forms of behaviour. Prevention strategies shall emphasize a shift in people's mind-set in order to promote positive cultural practices while discouraging the negative ones. The specific strategies shall include;

- Sensitization of all people to promote understanding of the forms, causes, and effects of Gender Based Violence.
- Sensitization of parents, guardians and caregivers on creating GBV free family environments.
- Create awareness among the people at risk particularly the girl child to be able to detect and protect themselves against Gender Based Violence.
- Promotion of male involvement in elimination of all forms of Gender Based Violence in the family, community, schools and institutions as well as workplaces.
- Integration of strategies to eliminate GBV in the education curricular at all levels of education so as to foster attitudinal change among pupils, students and teachers.

- Enhancing economic empowerment of women in order to reduce poverty and economic dependence.
- Promoting participation of faith based organizations, cultural institutions, civic and political organizations as well as other opinion leaders as champions in ending Gender Based Violence.
- Building and strengthening media partnership on GBV interventions.
- Promotion of legal education and awareness on existing laws addressing GBV.
- Enacting and/or reviewing laws addressing GBV
- Domesticating and implementing regional and international instruments on elimination of GBV.
- Integrating GBV in the National Planning framework, legislation, policies, sectoral and Local Government plans and programmes.
- Developing programmes to increase the capacity of vulnerable groups to protect themselves against GBV and re-enforce economic empowerment.
- Designing and implementing programs aimed at addressing the major root causes of GBV incidences such as patriarchal attitudes, behaviours, and practices.
- Engaging children in programs aimed at family wealth creation.

7.2 Provision of care and support services to GBV survivors/victims

GBV survivors/victims experience trauma, depression, and a wide range of health problems. Government shall promote provision of comprehensive and integrated response services to GBV

survivors/victims. These shall include legal, health, psychosocial services as well as safety and security. The specific strategies shall include;

- Establishing and managing emergency shelters for GBV survivors/victims.
- Creation of assistance services for cases of violence at police stations, hospitals, schools, neighbourhoods and communities.
- Ensuring provision of timely medical services including Emergency Contraceptives (EC), Post Exposure Prophylaxis (PEP) and STI treatment, among others.
- Strengthening law enforcement procedures to ensure enhanced timely access to justice.
- Strengthening community-based justice mechanisms which should be in the best interest of the survivor/victims and in accordance with the law.
- Establishing and strengthening psychosocial services for GBV survivors/victims.
- Supporting initiatives for economic empowerment of women and improving livelihoods of survivors/victims.
- Establishing and strengthening GBV referral pathways and linking survivors to referral services that are available within communities.

7.3 Ending impunity for Gender Based Violence

Ending impunity entails holding GBV perpetrators accountable for their actions in order to curtail occurrence of repeated offences.

Some forms of GBV are however widely condoned which renders punishing perpetuators extremely difficult due to the mindset among the community members as well as the service providers in

the service delivery system. Fear of recrimination by the survivors and their families is also wide spread.

To end impunity, Government shall provide political will and commitment at National, District and Community levels to eliminate all practices that condone and perpetuate GBV in the society. Specifically, the following strategies shall be employed; ensuring that GBV perpetrators are adequately handled within the law as a deterrent for the would-be perpetrators.

In addition, mechanisms for developing alternative conflict resolutions measures will be enhanced to hold perpetrators accountable while taking into account the best interests of the survivors/victims.

- Putting in place mechanisms for survivors/victims who seek legal redress as well as whistle blowers who provide information in-order to protect them from reprisals and further harm.
- Support the establishment and strengthening of the special courts and procedures for GBV cases in the police, judiciary and health units.
- Establishing appropriate mechanisms to investigate and prosecute GBV crimes.
- Establishing mechanisms to provide safety and security for GBV survivors/victims, their relatives as well as relatives of the perpetrators.

8.0 INSTITUTIONAL FRAMEWORK

The major actors in the implementation of this Policy include the Government, i.e. Central and Local Governments, Civil Society Organizations(CSOs), Faith Based Organizations (FBOs), Institutions of Traditional or Cultural leaders, the Private Sector, communities, Families and Individuals both males and females.

The following matrix outlines key responsibilities of the main GBV stakeholders at various levels of implementation of the Policy. The allocation of responsibilities takes into consideration the mandates of the different institutions, and the national and local governments' planning and resource allocation frameworks.

INSTITUTIONS	ROLES/RESPONSIBILITIES
Ministry of Gender, Labour and Social Development	• Spearhead and lead coordinated prevention and response of GBV in the Country. • Establish appropriate coordination mechanisms for implementing the Policy at different levels for networking, sharing of information and effective synergies. • Set standards and develop GBV guidelines, disseminate and monitor their operationalization. • Build capacity of district staff to handle prevention and response to GBV. • Create awareness on socio-cultural practices that perpetuate GBV incidences.

INSTITUTIONS	ROLES/RESPONSIBILITIES
	• Coordinate the Monitoring and evaluation of the Policy at all levels • Build capacity of different stakeholders to handle GBV issues in their program design and implementation for effective prevention and response. • Establish and manage a centralized National GBV Database and GBV information documentation Centre. • Coordinate Line Ministries and other institutions in the prevention, response and management of GBV. • Provide toll free telephone lines for rapid response to GBV cases.
Parliament of Uganda	• Enact laws on Gender Based Violence. • Monitor the implementation of International Instruments that promote Human Rights. • Establish an appropriate mechanism to monitor enforcement of existing laws addressing GBV. • Collaborate with MGLSD on GBV elimination strategies.

INSTITUTIONS	ROLES/RESPONSIBILITIES
Ministry of Finance, Planning and Economic Development	• Mobilize, allocate and release resources for GBV related activities.
Ministry of Education and Sports	• Integrate GBV issues and concerns into Education Sector policies, plans, programmes. • Build capacity of teachers/lecturers in all institutions of learning for proper handling of GBV victims/survivors including counselling victims/survivors of GBV. • Prioritize research on GBV in higher institutions of learning. • Put in place mechanisms to apprehend GBV perpetrators in educational institutions and work places. • Sensitize staff, pupils and parents on effects of GBV on the education sector. • Integrate GBV in the education curricula at primary, secondary and tertiary levels.

INSTITUTIONS	ROLES/RESPONSIBILITIES
Ministry of Health	• Build capacity of staff on counselling of GBV victims/survivors. • Provide appropriate medical services to victims of Gender Based Violence. • Build capacity of health workers as potential expert witnesses for GBV cases. • Allocate adequate resources for GBV interventions in the Health Sector. • Support GBV incident and case management data collection as part of HMIS. • Establish appropriate emergency services for GBV victims/survivors. • Sensitize communities on the implications of GBV to the mental and physical health of an individual. • Establish forensic services to support medico-legal services for GBV cases.
Ministry of Internal Affairs	• Sensitize communities about the law on Prevention of Trafficking in Persons (TIP) and FGM and ensure their enforcement. • Commit adequate resources for program implementation on GBV sector-specific issues.

INSTITUTIONS	ROLES/RESPONSIBILITIES
Ministry of Justice and Constitutional Affairs	• Draft effective legislation to prevent GBV. • Advise on legal framework to address GBV. • Sensitize and build capacity of JLOS Sector staff in the management of GBV cases. • Monitor effective implementation of the laws on Gender Based Violence and all other relevant legislations.
Ministry of Public Service	• Provide guidelines to public sector institutions and Local Governments on the Code of Conduct so as to eliminate sexual harassment or any other form of GBV. • Include GBV prevention and response in the in –service training for public officers at the Civil Service College Uganda and the National Leadership Training Institute Curricular. • Revise and update the Government Standing Orders to include GBV.
Ministry of Local Government	• Guide Local Governments on enactment and enforcement of byelaws and ordinances on elimination of GBV. • Incorporate GBV prevention and response as a performance measure in assessment of Local Governments.

INSTITUTIONS	ROLES/RESPONSIBILITIES
	• Sensitize civic leaders on effects of GBV on development.
Equal Opportunities Commission	• Create awareness on equal opportunities for all. • Investigate complaints made by any member of the public on any allegation of Gender Based Violence. • Promote prevention and response to GBV in line with the human rights based approach.
Uganda Human Rights Commission	• Increase sensitization on human rights through dissemination of the GBV Acts and regulations • Investigate GBV cases committed against groups of individuals in specific circumstances (war, prison, trafficking etc.)
DPP	• Provide effective mechanisms for timely court processes to ensure that perpetrators are apprehended and survivor's/victims access justice. • Provide legal assistance and support to the GBV survivor's/victims. • Plan and adequately budget for GBV case management. • Record and manage the statistics of prosecuted GBV cases.

INSTITUTIONS	ROLES/RESPONSIBILITIES
	• Put mechanisms to support collection of evidence and protection of witnesses.
Judiciary	• Build capacity of the Judicial Officers on handling GBV cases. • Establish mechanisms for special court sessions to handle GBV cases. • Plan and budget for adequate resources with regard to prosecuting perpetrators. • Establish necessary procedures for presiding and procuring justice for victims/survivors of GBV.
Uganda Police Force	• Build capacity of the police staff on GBV issues. • Provide security for GBV victims/survivors as well as relatives. • Establish an effective mechanism for timely procedures to ensure that perpetrators are apprehended and survivor's/victims access justice. • Plan and budget for adequate resources with regard to arresting perpetrators, investigations, detentions and other necessary procedures for bringing culprits of GBV to book. • Sensitization of the offenders and the community on the implications of GBV crimes.

INSTITUTIONS	ROLES/RESPONSIBILITIES
	• Investigate reported cases, pursue perpetrators and ensure collection of medico-legal evidence. • Record and manage the statistics of reported GBV cases. • Mobilize communities on prevention and response to GBV through the framework of the community policing strategy.
UBOS	• Incorporate a module on GBV in periodic surveys such as UDHS. • Collect, document and disseminate gender disaggregated data and information on GBV. • Collaborate with MGLSD and other MDAs on data collection and analysis regarding GBV.
Local Governments	• Integrate GBV prevention and response in Local government plans. • Institute and Implement bye-laws on the contributing factors that perpetuate GBV including poverty eradication and alcohol consumption. • Monitor response and management of GBV cases in local Governments to ensure effective & efficient services

INSTITUTIONS	ROLES/RESPONSIBILITIES
	delivery to men and women, boys and girls. • Manage the National GBV Database (NGBVD) within their District / Municipality. • Establish a coordination mechanism for GBV at district/ municipality and sub-county levels. • Mobilize communities to prevent and respond to GBV through the existing local government structures. • Monitor the implementation of different GBV prevention and response interventions including the GBV shelters and advisory centers.
Institution of Traditional or Cultural Leaders	• Promote and conserve positive cultural practices that promote human rights and women's empowerment. • Mobilise communities to preserve cultural practices that promote peace, prevent GBV and discourage practices that enhance GBV.
CSOs and FBOs	• Translate the Policy into organizational policies, programmes and activities. • Advocate for Policy implementation and legislation.

INSTITUTIONS	ROLES/RESPONSIBILITIES
	• Develop and implement programmes that address key intervention areas in the Policy. • Creating awareness among communities on elimination of GBV at all levels. • Encourage community members to undertake project activities as part of their spiritual growth.
Media	• Raise public awareness on GBV prevention and response through the various media channels. • Promote gender responsive reporting and eliminate gender stereotypes. • Build capacity of media personnel on ethical reporting of GBV.
LC (I and II)	• Sensitize communities on issues relating to GBV. • Establish a mechanism to ensure timely response of LC II courts to GBV cases. • Implement bye-laws for elimination of GBV.
Household and communities	• Establish surveillance mechanisms to prevent and respond to GBV. • Establish support structures such as Male Action Groups, GBV activists and survivor support groups.

INSTITUTIONS	ROLES/RESPONSIBILITIES
	• Encourage a zero tolerance norm to GBV in families and communities. • Promote a culture of all family members; parents and children working together for household wealth creation.

9.0 STRATEGY FOR DISSEMINATING THE POLICY

Implementation of the Policy shall involve active engagement of various State and Non-State actors including government Ministries, Departments and Agencies; Faith Based and Civil Society Organisations, Academia, Media and Institutions of Cultural or Traditional Leaders. The Ministry of Gender, Labour and Social Development will organize a national launch of the Policy and thereafter organize regional level dissemination meetings, workshops and orientation engagements. Through these, stakeholders shall appreciate their roles within their respective mandates. The Ministry will further organize dissemination of the policy at local government level to enhance Policy implementation at the grassroots. Copies of the Policy and Action Plan will be distributed to all stakeholders.

10.0 IMPLEMENTATION OF THE POLICY

The 5-year National Action Plan shall operationalize implementation of this Policy. In line with the roles of different stakeholders described in Section 8, the Policy shall be implemented through a multi-sectoral approach. The National Action Plan describes strategic actions under each of the Policy priority areas.

11.0 MONITORING AND EVALUATION

Monitoring and evaluation functions shall be undertaken at all levels of Policy implementation to determine progress, enhance accountability and effectiveness. The process will involve developing and establishing monitoring and evaluation mechanisms, which include the following:

i. Developing monitoring indicators for activities in every sector beginning with the planning stage;

ii. Establishing internal evaluation structures to assess the effectiveness and impact of this Policy;
iii. Preparing and disseminating the reports ;
iv. Reviewing the Policy after every 10 years

11.1 Policy Outcome Indicators

The M&E information for the indicators of this Policy shall be obtained from surveys and studies conducted by the Uganda Bureau of Statistics. Regular collection of GBV Incident and case management data to enable comprehensive planning and reporting shall be undertaken through the National GBV Data Base processes coordinated by Ministry of Gender, Labour and Social Development. The successful implementation of the Policy shall be measured against the following indicators:

I. Percentage reduction in GBV incidence
II. Percentage reduction in the levels of community tolerance of GBV.
III. Percentage increase in levels of access to care and support services of GBV survivors/victims.
IV. Percentage change in attitudes, behaviours and practices towards abandonment of GBV at the national and community levels.

12.0 FINANCING OF THE POLICY

Gender Based Violence is a multi-sectoral problem that requires a multi-sectoral approach to implementation at all levels. Government Ministries, Departments and Agencies including Central and Local Governments shall therefore be required to identify Gender based violations and budget for relevant interventions within their budget ceilings to support prevention

and response. In addition, funding shall be mobilized from and by Private Sector, Civil Society Organizations, Institutions of Traditional or Cultural Leaders, Faith-Based Organizations as well as community owned resources.

GLOSSARY

- **Child:** A person below/under the age of eighteen years.
- **Coercion:** Forcing, attempting to force another person to engage in behaviours against his/her will by using threats, verbal insistence, manipulation, deception, cultural expectations or economic power.
- **Consent:** When a person makes an informed choice or agrees freely and voluntarily to engage in an act.
- **Defilement:** Unlawful sexual act with a person below the age of 18 years.
- **Detention with sexual intent:** Detaining a person in any place or brothel for the purpose of having unlawful carnal knowledge.
- **Domestic relationship:** A family relationship, a relationship similar to a family relationship or relationship in domestic setting that exists or existed between a victim and a perpetrator.
- **Domestic violence:** Constitutes any act or omission of a perpetrator which;
    a) harms, injures or endangers the health, safety, life, limb or well-being, whether mental or physical, of the victim or tends to do so and includes causing physical abuse, sexual abuse, emotional, verbal and psychological abuse and economic abuse;
    b) harasses, harms, injures or endangers the victims with a view to coercing him or her or any other person related to him or her to meet any unlawful demand for any property or valuable security;

c) has the effect of threatening the victim or any person related to the victims by any conduct mentioned in paragraph (a) or (b); or
d) otherwise injures or causes harm, whether physical or mental, to the victim;

- **Duty bearer:** States, institutions and individuals having specific obligations and responsibilities towards the community to respect and fulfil the rights of others.
- **Economic abuse:** Includes deprivation of all or any economic or financial resources to which the survivor/victim is entitled under the law or custom, whether payable under an order of a court or otherwise or which the survivor/victim requires out of necessity.

  Disposal of household effects, alienation of assets whether movable or immovable, shares, securities, bonds or similar assets or property in which the survivor/victim has interest or is entitled to use by virtue of the domestic relationship or which may be reasonably required by the survivor/victim or his or her children or any other property jointly owned or separately held by the survivor/victim. Prohibiting or restricting access to resources or facilities which the survivor/victim is entitled to use or enjoy by virtue of the domestic relationship, including access to the shared household.

- **Female genital mutilation:** Refers to all procedures involving partial or total removal of the external female genitalia for non-medical reasons
- **Forced marriage:** The marriage of individuals against their will (includes child marriage).
- **Forced prostitution:** Forced/coerced sex trade in exchange for material resources, services and assistance, usually

targeting highly vulnerable women or groups unable to meet basic human needs for themselves and/or their children.

- **Gender:** Social and cultural construct of roles, attributes, opportunities, privileges, status, access to, and control over resources and benefits between women and men, boys and girls in a given society.
- **Gender Based Violence:** Is an umbrella term used to describe any harmful act that is perpetrated against a person's will on the basis of unequal relations between women and men as well as through abuse of power.
- **GBV Shelter:** A privately or publicly operated residential facility providing survivors/victims with temporary refuge, lodging, food and other services including counselling and medical assistance.
- **Intimate Partner Violence:** Behaviour by an intimate partner that causes physical, sexual or psychological harm, including acts or physical aggression, sexual coercion, psychological abuse and controlling behaviours.
- **Perpetrator:** A person who is alleged to commit an actual or threatened act of Gender Based Violence**.**
- **Physical abuse**: Any act or conduct which is of such a nature as to cause bodily pain, harm or danger to life, limb or health or which impairs the health or development of victim and includes assault, criminal intimidation and criminal offence.
- **Psychological abuse**: A pattern of degrading or humiliating conduct towards a victim, including but not limited to – repeated insults, ridicule or name-calling repeated threats to cause emotional pain; other repeated exhibition of possessiveness or jealousy which is such as to constitute a serious invasion of the victim's privacy, integrity or security;

- Any act or behaviour constituting domestic violence within the meaning of the Domestic Violence Act 2010.
- **Rape:** Unlawful carnal knowledge of woman or girl without consent or with her consent if the consent is obtained by force.
- **Rights Holder** Every individual either a man or woman or child of any race, ethnic group or social condition. To some extent groups entitled to the rights as established by the international human rights instruments.
- **Service provider:** A governmental or nongovernmental organisation, company or institution whose objectives include the protection of the rights of survivors/victims of violence.
- **Sexual abuse:** Includes any contact of a sexual contact that abuses, humiliates, degrades or otherwise violates the dignity of any person.
- **Sexual assault:** Any form of unwanted sexual contact/touching that does not result in or include penetration.
- **Sexual harassment:** Sexual harassment is taken to mean any unwanted conduct of a sexual nature or other conduct based on sex affecting the dignity of women and men or unwelcomed physical, verbal or non-verbal conduct. Conduct amounts to sexual harassment if;
  I. The conduct is unwanted, unreasonable or offensive to the recipient;
  II. The recipients rejection of or submission to the conduct is used as a basis for adverse decisions affecting the recipients employment.
  III. The conduct creates a humiliating, intimidating or hostile environment.
- **Survivor/victim:** A person who has been directly or indirectly exposed to acts of Gender Based Violence.

Notes

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