



**REPORT OF THE SADC PF STANDING COMMITTEE ON GENDER
EQUALITY, WOMEN ADVANCEMENT AND YOUTH DEVELOPMENT ON
ENHANCING PARLIAMENTS' RESPONSE IN THE PREVENTION AND
ELIMINATION OF VIOLENCE AGAINST WOMEN AND GIRLS DURING
PANDEMICS TO THE 50TH PLENARY ASSEMBLY**

Mr President, I beg to move that this Plenary Assembly do adopt the Report of the SADC PF Standing Committee on Gender Equality, Women Advancement and Youth Development to the 50th Plenary Assembly Session of the SADC Parliamentary Forum, laid on the table on 10th December, 2021.

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1.0 COMPOSITION OF THE COMMITTEE

The Committee consisted of the following Members:

1. Hon. Peete Ramoqai, MP, Lesotho (*Chairperson*)
2. Hon. Marie Jeanne d'Arc MASY GOULAMALY, MP, Madagascar (*Vice Chairperson*)
3. Hon. Maria do Carmo do Nascimento, MP, Angola
4. Hon. Marie Joanne Sabrina Tour, MP, Mauritius
5. Hon. Monica Chang'anamuno, MP, Malawi
6. Hon. Maria Marta Fernando, MP, Mozambique
7. Hon. Paula Kooper, MP, Namibia
8. Hon. Nkhensani Kate Bilankulu, MP, South Africa
9. Sen. Busisiwe Dlamini, MP, Eswatini
10. Hon. Goodlucky Kwaramba, MP, Zimbabwe
11. Hon. Shally Joseph Raymond, MP, Tanzania
12. Hon. Anne-Marie Mbilambangu, MP, DRC
13. Hon. Kelly Samynadin, MP, Seychelles
14. Hon. Talita Monnakgotla, MP, Botswana
15. Zambia (TBA)

2.0 TERMS OF REFERENCE

The Standing Committee on Gender Equality, Women Advancement and Youth Development is guided by its mandate in terms of Rule 42(a) of the SADC PF Rules of Procedure.

3.0 NUMBER OF MEETINGS HELD AND MEETING DATES

The Standing Committee on Gender Equality, Women Advancement and Youth Development held one meeting on Thursday, 14th October, 2021 to consider the topic "Enhancing Parliaments' Response in the Prevention and Elimination of Violence against Women and Girls during Pandemics."

4.0 BACKGROUND

Since the outbreak of Covid 19 pandemic, emerging reports had shown that several types of violence against women and girls had intensified. Although Covid 19 was claiming the lives of many, the pandemic's disproportionate impact on women and girls' socio-economic welfare threatened to reverse the hard-won gains in advancing gender equality and women's empowerment.

Gender-based violence was known to be widespread in the Southern African Development Community (SADC) and presented a major obstacle to attaining gender equality and equity. The region had reports of abuse such as intimate partner violence, sexual harassment, child marriage,

female genital mutilation (FGM), domestic and sexual abuse of women and girls that had been exacerbated by lockdowns.

As an illustration, the South African Police Service (SAPS) reported receiving 2,300 calls for help related to gender-based violence at the beginning of 2020. By mid-June 2020, twenty-one women and children had been killed by intimate partners in that country. One emblematic case was the brutal murder of twenty-eight-year-old Tshagofatso Pule, who went missing on 4 June, 2020 and was found four days later, stabbed and hanging from a tree in Johannesburg while eight months pregnant. According to WHO, the dearth of well-documented gender data remained a key challenge towards the roll out of comprehensive and systematic gender-based violence and Covid 19 response and recovery efforts in SADC Member States. The twelve month experience of intimate partner violence, however, estimated an increase of 13 percent across the world and 20 percent across sub-Saharan Africa. In addition, with online learning, cases of online abuse, harassment and exploitation of children had been on the increase.

The theme for the meeting of the Standing Committee on Gender Equality, Women Advancement and Youth Development was selected in a quest to bring to light the rise of gender-based violence, as an aspect of the Covid 19 pandemic and the resultant lock downs in the SADC region. The meeting sought to document the sharp increases in gender-based violence by outlining the consequences, emerging priorities, promising practices and highlight their potential to effectively support and protect women and girls from gender based violence as a standard part of response to the Covid 19 pandemic in the region. The meeting also sought to outline some practical evidence-based recommendations to SADC Member States and other stakeholders to ensure that actions against gender-based violence were mainstreamed in their Covid 19 response and recovery activities.

5.0 SUMMARY OF PRESENTATIONS

a) Highlights on Recent Trends and Emerging Forms of Gender-Based Violence in the SADC Region

Based on the presentations made before it, the Standing Committee on Gender Equality, Women Advancement and Youth Development noted the following:

1. Despite enacted laws and policies and various programmes in the SADC region, gender-based violence remained a significant problem with new forms continuing to emerge. According to the World Health Organisation, intimate partner violence was estimated to have increased by 13 percent across the world and 20 percent across sub-Saharan Africa. Actual

experiences of violence were higher than the data indicated as many women did not report the violence due to various barriers that existed.

2. Although the gender machineries existed in the region, they were under-resourced, and not all countries had National Action Plans (NAPs) on violence against women and girls. In addition, gender-responsive budgeting was not applied consistently, which resulted in limited tracking of allocations and execution of the budgets. Other limitations included cross-institutional coordination of efforts and the monitoring and enforcement of commitments.
3. There was a strong civil society trend working towards ending violence against women and girls. The region had networks and movements such as the Council of Traditional Leaders of Africa (COTLA), the African Women's Development and Communications Network (FEMNET), the GBV Prevention Network, HeforShe Campaign Movement, International Gender Champions, and Men Engage. However, the space for civil society to operate varied, and there was a lot more that needed to be done in the partnership.
4. Not all SADC Member States had services accessible in justice and policing, health, social services, shelters, psychosocial counselling and multi-sectoral coordination and governance. In addition, there were inconsistent quality survivor-centered services. It was noted that age, abilities or disabilities, socio-economic status, conflict and disasters and gender identity and sexual orientation further contributed to marginalisation.
5. The Covid 19 pandemic had exacerbated intimate partner violence and other forms of violence, such as child marriage, sexual abuse and exploitation, sexual harassment in public spaces, non-partner sexual violence and technology-facilitated violence which had resulted in adolescent pregnancy, delayed or arrested education, unpaid care work, loss of paid employment, mental health issues and costs to individual women and girls, and families and communities.
6. A variety of factors such as under-funding of essential services for women and girls affected by violence; restrictions in mobility and lockdowns; school closures; loss of income and poor support; limited and changed available referral services for survivors; perceptions and bias from service providers that deferred reporting; lack of information on available services; heavy reliance on technology; lack of investments and reach of social protection measures pre-Covid; pre-existing gender inequitable norms; and limited women's leadership and representation in Covid decision-making bodies had contributed to the increased incidences of gender-based violence during the Covid 19 pandemic.

b) Presentation on Laws and Policies that Address Gender-Based Violence in Zambia – Need for Comprehensive Legal and Policy Framework

The following lessons were drawn from the presentations:

1. Zambia had ratified several international conventions and declarations such as Convention on the Elimination of all Forms of Discrimination against Women (CEDAW), the Convention on the Rights of Child (CRC), and the Convention of the Rights of Persons with Disabilities (CRPD) and its optional protocol, the Maputo Protocol, and the International Covenant on Civil and Political Rights (ICCPR).
2. The National Gender Policy, 2014, provided for a situation analysis on gender-based violence. The policy had identified low reporting levels, high rates of withdrawal of cases and preference to settle matters out of court in order to preserve family reputation and respect. In addition, since most perpetrators were breadwinners, the victims preferred to withdraw cases that risked economic security.
3. The Anti Gender-Based Violence Act, No. 1 of 2011, defined gender-based violence as any physical, mental, social or economic abuse against a person because of that person's gender, and included violence that resulted in, or was likely to result in physical, sexual or psychological harm or suffering to the person, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life; and actual or threatened physical, mental, social or economic abuse that occurred in a domestic relationship.
4. While the legal and policy framework governing issues of gender-based violence in Zambia were adequate, implementation remained poor, which rendered the set policies and laws ineffective. As an illustration, the penal Code Act was in 2005 amended to stiffen the penalties for sexual offences so as to deter would-be offenders, while the Gender-Based Violence Act, No. 1 of 2011 did not provide specific sanctions to go with the different forms of violence defined in the Act.
5. There was a lack of harmonisation of gender-based violence-related laws. For instance, the Anti Gender-Based Violence Act, the Penal Code Act and the Gender Equity and Equality Act needed to be fully operationalised for efficacy. In addition, corroboration, as a requirement of law, posed a challenge for young children.

c) Highlights on the Response to Gender-Based Violence in the SADC Region

The meeting took note of the SADC Strategy and Framework of Action for Addressing Gender-based Violence, 2018-2030, which was anchored on five main objectives, including, prevention and early identification of gender-based violence by addressing associated social, cultural and religious issues; delivery of effective and accessible protection, care and support services to gender-based violence victims; capacity development for efficient and effective response to gender-based violence; information and knowledge management, including sharing of best practices and innovations and effective coordination, networking and partnership building.

Other lessons drawn from the presentation included the following:

1. With half of the world's population on lockdown during the pandemic, gender-based violence was on the increase due to the strain on mental health, security and income and cramped living conditions. In some countries, though domestic violence reports had almost tripled, there were very few shelters which had very limited capacity. Lockdowns also impeded access to HIV and Sexual and Reproductive Health (SRH) services. Women and girls with disabilities also faced disruptions to support networks that were essential for their survival.
2. A critical factor in the prevention of gender-based violence and the effective response to this social ill was the collection, compilation, analysis and use of data and information to inform policies, programmes and service provision.
3. Challenges that hampered effective response to gender-based violence included inadequate knowledge of gender-based violence at all levels; limited knowledge of available legislation on gender-based violence; inadequate interpretation and application of the law; weak coordination mechanisms among gender-based violence service providers and stakeholders; high reliance of government on development partners for both human and financial support, which compromised ownership and sustainability of gender-based violence programmes; lack of alignment of gender-based violence prevention and response activities to enacted laws, adopted policies and action plans; low levels of reporting on gender-based violence cases; weak and insufficiently defined gender-based violence referral systems across service providers; weak monitoring and evaluation of gender-based violence programmes and limited research to inform policies and programmes; and lack of reliable, timely and accessible data on gender-based violence, including administrative data.

6.0 RECOMMENDATIONS

Now, therefore, the Standing Committee on Gender Equality, Women Advancement and Youth Development resolves to:

URGE Member States to integrate violence prevention and support into all Covid 19 emergency response planning, and allocate sufficient supplies and resources for this purpose. Further **URGE** Member Parliaments provide policy advice to SADC States on integrating gender-based violence in national and sub-national Covid 19 response plans and budgets.

IMPLORE all Member States to create an enabling policy and legal framework, resource environments, and National Action Plans for the elimination of violence against women and girls.

URGE Member States to adapt and scale up of evidence-driven prevention programming such as comprehensive, accessible, and quality services for survivors of gender-based violence. Further **URGE** the adaptation and scaling-up of services such as shelters, safe spaces, and essential housing along with psycho-social support and advice for individuals experiencing or at risk of gender-based violence. In so doing, Member States should also train all service providers with regard to the treatment of victims and survivors to ensure that behaviours and attitudes that were victim-blaming and insensitive were done away with.

ENCOURAGE Member States to create an enabling and empowering environment for autonomous girl-led and women's rights organisations to exercise their expertise in addressing gender-based violence, and to prioritise women's involvement in the parliamentary response to Covid 19.

APPEAL to SADC governments to adopt a holistic approach to ending gender-based violence, to coordinate and unite entities to prevent and eradicate violence, including through implementing well-resourced national strategies that outlined roles and responsibilities, and a risk-based approach that could be applied before, during and after Covid 19.

ENTREAT Member States to strengthen information and knowledge platforms for sharing of lessons and good practices. Further **ENTREAT** Member States to reinforce documentation and reporting on gender-based violence to understand the status in order to inform prevention and response initiatives, including reporting on gender-based violence to the SADC Council and to Heads of State summit.

URGE Member States to incorporate anti-violence messages and available resources and social, psychological, health and legal services available for survivors into mass media and social media campaigns and ensure that

women's centres, shelters, domestic violence helplines, police protection, legal aid and other critical services were identified as essential services, and identify safe spaces where victims could report abuse without alerting perpetrators.

APPLAUD Member States whose traditional leaders had been influential in sensitising communities on negative traditions and cultural norms that exacerbated gender-based violence and that had developed by-laws to ban harmful traditional practices such as child marriage and spouse inheritance.

7.0 CONCLUSION

The Committee took note that Covid 19 had compounded the already existing gender inequalities, and increased risks of gender-based violence. The protection and promotion of the rights of women and girls should, therefore, be prioritised. National strategic plans for Covid 19 preparedness and response must be grounded in strong gender analysis and must ensure meaningful participation of affected groups, including women and girls, in decision-making and implementation. In that regard, SADC Member States should integrate violence prevention and support into all Covid 19 emergency response planning, and allocate sufficient supplies and resources for this purpose.

The Committee wishes to express its gratitude to the Secretariat for the support and guidance rendered to it. The Committee is also indebted to the resource persons for their expert presentations on the theme under consideration.

8.0 APPENDIX I – LIST OF OFFICIALS

Ms Boemo Sekgoma, Secretary General
Ms Clare Musonda, Director – Corporate Governance
Ms Yapoka Mungandi, Director – Administration, Finance and Human Resources
Mr Sheuneni Kurasha, Programme Manager – DGHR
Mrs Edna Kanguya Zgambo, Committee Secretary – TIFI
Ms Betty Zulu, Committee Secretary – GEWAYD
Mrs Sharon Muteto Nyirongo, Committee Secretary – FANR
Mr Dennis Gondwe, Committee Secretary – HSDSP
Ms Luziela Fernandes, Committee Secretary – RWPC
Mr Ronald Windwaai, Webmaster
Ms Paulina Kanguatjivi, Programmes Coordinator
Mr Wilfried Kongolo, ICT Intern
Ms Agnes Lilungwe, Personal Assistant to the Secretary General
Mr Modise Kabeli, Media Officer

APPENDIX II – OBSERVERS

Ms Yande Kalengo, Action Aid, Zambia
Ms Chama Nshindano Mwandalesa, Oxfam, Zambia
Mr Hachangu Hachangu, MEL Office, Zambia
Ms Angela Machonesa, Plan International, Zimbabwe
Ms Molline Marume, UN Women, South Africa
Mr Adolf Mavheneke, Zimbabwe, SAfAIDS, Zimbabwe
Ms Faith Shange, Groutville Youth Organisation, South Africa
Ms Marie-Nella AZEMIA, Citizens Engagement Platform (CEP), Seychelles
Mr Johannes Chiminya, Action Aid, Mozambique
Mrs Monica Kanjimana-Hayward, Non-governmental Gender Organisations Coordinating Council, Zambia
Mr Banana Hatahata, Lesotho National Broadcasting Service (LNBS), Lesotho

Appendix III – Resource Persons

1. Ms Hazel Gooding, Deputy Representative for UN Women Multi-country, South Africa;
2. Ms Keketso Maema, UN Women, South Africa
3. Ms Catherine Jere, Senior Legal Officer, National Legal Aid Clinic for Women
4. Ms Kealeboga Kelly Dambuza, Programme Officer, Gender Unit – SADC Secretariat