



USAID
FROM THE AMERICAN PEOPLE

Understanding the Issue: An Annotated Bibliography on GBV

May 2006

The PowerPoint presentation and its companion guide were produced for review by the United States Agency for International Development. Both were prepared by the POLICY Project.





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The author's views expressed in this publication do not necessarily reflect the views of USAID or the United States government.

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I. PURPOSE

The purpose of this annotated bibliography is to better inform advocacy and interventions related to gender-based violence (GBV) in developing countries. As such, it is targeted toward practitioners and activists and limited primarily to practical guides for program managers and officers, training materials, how-to tools, and literature reviews of promising interventions. Documents presenting research results only, namely those that detail prevalence and the health, economic, and social costs of GBV, are present only to the extent that they may enrich data used in advocacy for policy, programming, and resources to address GBV.

Almost all the documents compiled are relevant for a developing country context; the remaining documents were included as they may be useful tools despite the setting and absence of a document of the same type from a developing country context. Documents not readily available through the World Wide Web or free distribution by a sponsoring organization were left out of the bibliography.

Although the special emphasis here is on the health sector, since GBV is a problem that encompasses practically all sectors, the bibliography covers all major sectors, including the legal and justice system, the education sector, and multisectoral behavior change and community mobilization as well as health.

Moreover, while the bibliography addresses gender-based violence in general, an emphasis was put on intimate partner violence (IPV) and sexual violence—the types of GBV that are common worldwide. However, resources on other categories of GBV, including GBV in conflict settings, female genital cutting (FGC), and trafficking, are also provided in separate sections.

II. Methodology

To compile this bibliography, the following sources were used:

- Databases of online journals and/or articles
 1. PubMed
 2. Popline
 3. FirstSearch databases

- Major organizations' websites working on GBV
 1. World Health Organization (WHO)
 2. Pan-American Health Organization (PAHO)
 3. United Nations Development Fund for Women (UNIFEM)
 4. United Nations Population Fund (UNFPA)
 5. World Bank
 6. Inter-American Development Bank (IDB)
 7. International Center for Research on Women (ICRW)
 8. Center for Women's Policy Studies
 9. United States Agency for International Development (USAID)
 10. Interagency Gender Working Group (IGWG)
 11. International Planned Parenthood Federation (IPPF)
 12. Family Violence Prevention Fund
 13. Population Council
 14. Panos Institute
 15. Alan Guttmacher Institute
 16. Centre for Development and Population Activities (CEDPA)

17. Johns Hopkins University (JHU)-Center for Communications Programs (CCP) and INFO Project's End Violence against Women
 18. Ipas
 19. Reproductive Health Response in Conflict (RHRC) Consortium
 20. Integrated Regional Information Networks (IRIN)
- Websites addressing FGC
 1. WHO
 2. USAID
 3. Research Action and Information Network for the Bodily Integrity of Women (RAINBO)
 4. Foundation for Women's Health, Research and Development (FORWARD)
 5. JHU-CCP and INFO Project's End Violence against Women
 6. Center for Reproductive Rights
 7. Population Reference Bureau (PRB)
 8. Intact Network
 9. Inter-African Committee on Traditional Practices Affecting the Health of Women and Children
 - Websites addressing human trafficking
 1. United States Department of State
 2. International Organization for Migration
 3. The Protection Project
 4. UNFPA
 5. Humantrafficking.org
 6. Vital Voices
 7. Coalition Against Trafficking in Women
 8. Childtrafficking.org

KEY TO DESCRIPTORS

| | | | |
|-----------|-----------------|-----------|-----------------|
| FA | Focus area | LU | Last update |
| GA | Geographic area | PP | Number of pages |
| KW | Keyword | TA | Target audience |
| LA | Language | | |

III. THE BASICS: NATURE, PREVALENCE, AND OTHER STATISTICS

Family Violence Prevention Fund. “The Facts on International Gender-Based Violence.”

<http://endabuse.org/resources/facts/International.pdf>

FA General, Health
GA Global
KW Fact sheet
PP 2
LA English
TA Advocates, Policymakers

For a quick overview of the prevalence and consequences of gender-based violence worldwide, particularly the social, economic, and health costs due to GBV, this two-pager is a good resource. It is also particularly useful as a tool for advocacy, perhaps as a handout.

Garcia-Moreno, Claudia, Henrica A.F.M. Jansen, Mary Ellsberg, Lori Heise, and Charlotte Watts. 2005. WHO Multi-country Study on Women’s Health and Domestic Violence against Women. Geneva: WHO.

http://www.who.int/gender/violence/who_multicountry_study/en/index.html

FA General, Health
GA Global
KW Prevalence study
PP 206, including appendices; summary report and country briefs also available online
LA English and French; Portuguese and Spanish, forthcoming
TA Advocates, Policymakers, Researchers/Academia/Theorists

This study surveyed 24,000 women in 15 sites in 10 countries—Bangladesh, Brazil, Ethiopia, Japan, Namibia, Peru, Samoa, Serbia and Montenegro, Thailand, and the United Republic of Tanzania—to attempt to capture the prevalence of IPV globally. Finding that IPV affects between one in four and one in two women in the participating countries, the study demonstrates that it is indeed a widespread public health problem. The study also looks at IPV’s impact on women’s physical, mental, and social health, including IPV’s link to HIV and the prevalence of IPV during pregnancy. Data on non-partner violence, forced first sex, and child sexual abuse are also included. This landmark study is the first multi-country study that surveys only the prevalence of IPV and related women’s health issues, as opposed to incorporating them into broader demographic surveys. A standalone survey is an important advancement in IPV research in that it is said to more accurately measure the prevalence of IPV.

Jejeebhoy, Shireen and Sarah Bott. 2003. “Non-consensual Sexual Experiences of Young People: A Review of the Evidence from Developing Countries.” New Delhi: Population Council.

<http://www.popcouncil.org/pdfs/wp/seasia/seawp16.pdf>

FA Multisectoral

GA Global
KW Background information
PP 50
LA English
TA Advocates, Policymakers/Lawmakers, Researchers/Academia/Theorists

This document reviews the literature, including small-scale and population-based studies and evaluations of interventions, on sexual coercion among young people ages 10–24 in developing countries. The authors recognize that while studies are scarce, have methodological limitations, and lack consensus in their definitions of sexual coercion, a considerable proportion of young people worldwide—between 2 and 20 percent—have experienced forced sexual relations over their lifetimes. The patterns found point to the need for education and counseling for youth that addresses non-consensual sex; sexuality education that addresses gender stereotypes; sensitization of elders on the importance of communicating with youth about sexual matters; and training for providers on how to identify, treat, and counsel adolescent victims of sexual coercion. The authors also provide recommendations for future research. The document is useful mainly as a source to learn about the prevalence, types, and contexts of sexual violence but also gives a little programmatic direction.

Kapoor, Susman. 2000. “Domestic Violence against Women and Girls.” *Innocenti Digest*. June 2000. New York: UNICEF.

<http://www.unicef-icdc.org/publications/pdf/digest6e.pdf>

FA Multisectoral
GA Global
KW Background information
PP 30
LA English, French, Italian, Spanish
TA Advocates, Policymakers/Lawmakers

This is an excellent overview and background piece on gender-based violence, which may be used as an awareness-raising tool for advocates and to educate policymakers. The publication provides a useful overview and scope of GBV (referred to as domestic violence in the report), focusing not only on its reproductive health impact but also its impact on individual rights and well-being, the economy, and society. Especially noteworthy are the recommendations that emphasize a multisectoral approach to addressing the problem of GBV and promote actions that can be taken by individuals and groups at various levels, such as religious leaders, the private sector, and men’s organizations. Information on regional and international nongovernmental organizations (NGOs) working in this area and suggestions for further reading are also provided.

Kishor, Sunita and Kiersten Johnson. 2004. *Profiling Domestic Violence—A Multi-Country Study*. Calverton, MD: ORC Macro.

<http://www.measuredhs.com/pubs/pdfdoc.cfm?ID=459>

FA Multisectoral, Policy/Advocacy, Behavior Change Communication
GA Global
KW Background information, research, prevalence and nature
PP 141

LA English
TA Advocates, Policymakers/Lawmakers, Researchers/Academia/Theorists

This multi-country study is an ambitious attempt at identifying the prevalence, risk factors, relations to women's status, and health consequences of domestic violence. A thorough analysis is presented, with cross-country data tables. Both bivariate and multivariate analyses are applied to try to determine a wide range of risk factors, including women's marital status, age, age at union, education, and employment status; and the education, occupation, and alcohol use of her partner, which few studies have done. The countries studied include Cambodia, Colombia, the Dominican Republic, Egypt, Haiti, India, Nicaragua, Peru, and Zambia. To fully understand this document, at least a basic knowledge of statistics is required. Also note that the rates of prevalence of GBV found in this study are likely underestimates because the surveys on violence were administered as part of a wider survey on women's health, rather than as a standalone survey.

Krug, Etienne, Linda Dalhberg, James Mercy, Anthony Zwi, and Rafael Lozano, Eds. 2002. World Report on Violence and Health. Geneva: WHO.

http://www.who.int/violence_injury_prevention/violence/world_report/en/full_en.pdf

FA Health, Policy/Advocacy
GA Global
KW Background information, research, prevalence, and nature
Research/Data
PP 372
LA English, French, Russian, Spanish
TA Advocates, Policymakers, Researchers/Academia/Theorists

The publication discusses various types of violence as they relate to health. Chapters 4 and 6, in particular, give a comprehensive overview of the prevalence, dynamics, risk factors, and consequences of intimate partner violence and sexual violence, as well as a review of the types of interventions to address the problems worldwide.

Population Council. 1994. "Forced Sexual Relations among Married Young Women in Developing Countries." New Delhi: Population Council.

<http://www.popcouncil.org/pdfs/popsyn/PopulationSynthesis1.pdf>

FA Multisectoral, Policy/Advocacy, Behavior Change Communication
GA Global
KW Background information, research, prevalence, and nature
PP 4
LA English
TA Advocates, Program Designers/Managers, Researchers/Academia/Theorists

This article provides an overview of research presented at a New Delhi conference on the prevalence and nature of forced marital sex among young women worldwide. Small-scale, qualitative and quantitative studies and large, population-based surveys demonstrate that a considerable number of women experience forced sex in marriage, but most do not report it due to shame, fear of reprisal, or acceptance of it as a norm. Gender norms are considered the main cause for the perpetuation of sexual coercion, but the article includes evidence that suggests that these norms can and are changing.

United Nations Population Fund. 1999. Violence against Girls and Women: A Public Health Priority. New York: UNFPA.

<http://www.unfpa.org/publications/detail.cfm?ID=56&filterListType=1>

FA Multisectoral
GA Global
KW Background information
PP 27
LA English, Spanish, French
TA Advocates, Policymakers/Lawmakers

Overall, this publication is a valuable tool for advocacy and policy reform. Although it focuses on the sexual and reproductive health impacts of gender-based violence, it provides an excellent comprehensive review of the various types of gender-based violence. Moreover, its policy recommendations take a multisectoral approach, including increased research for advocacy and policy; legal reform; the instituting of screening, treatment, and referral protocols in health centers; information, education, and communication campaigns; and interagency collaboration.

World Health Organization. 2002. “Facts: Intimate Partner Violence.” Geneva: WHO.

http://www.who.int/violence_injury_prevention/violence/world_report/factsheets/en/ipvfacts.pdf

FA Multisectoral, Health
GA Global
KW Background information
PP 2
LA Albanian, English, French, Macedonian
TA Advocates, Policymakers/Lawmakers

A great tool to use as a handout to distribute to policymakers, this fact sheet provides a brief summary of a chapter on intimate partner violence found in WHO’s World Report on Violence and Health. It covers the extent (prevalence) of intimate partner violence, its consequences, risk factors, and strategies to respond to and prevent the problem.

World Health Organization. 2002. “Facts: Sexual Violence.” Geneva: WHO.

http://www.who.int/violence_injury_prevention/violence/world_report/factsheets/en/sexualviolencefacts.pdf

FA Multisectoral, Health
GA Global
KW Background information
PP 2
LA Albanian, English, French, Macedonian
TA Advocates, Policymakers/Lawmakers

This is also a great tool to educate policymakers, particularly on sexual violence. Like the fact sheet on intimate partner violence above, it summarizes data on the extent (prevalence) of sexual violence, its consequences, risk factors, and strategies to respond to and prevent the problem.

IV. HEALTH SECTOR

Bott, Sarah, Alessandra Guedes, María Cecilia Claramunt, Ana Güezmes. 2004. Improving the Health Sector Response to Gender-based Violence: A Resource Manual for Health Care Managers in Developing Countries. New York: IPPF, Western Hemisphere Region (IPPF/WHR).

http://www.ippfwhr.org/publications/publication_detail_e.asp?PubID=63

FA Health, Policy/Advocacy, Multisectoral
GA Latin America and the Caribbean (LAC)
KW Manual for program managers
PP 225
LA English, Spanish
TA Program Managers, Monitoring and Evaluation Specialists, Trainers

Based on the experiences of an IPPF/WHR regional initiative to integrate services for victims of gender-based violence into reproductive health programs, this manual provides tools and guidelines for program managers working in developing countries. Topics include planning a program, implementing routine screenings, providing specialized and emergency services, building reference networks, and legal advocacy. It also includes practical tools to determine provider attitudes toward gender-based violence, establish support groups, establish legal definitions and responsibilities, and monitor the quality of care. [As reviewed by publisher.]

Epstein, Helen. 1998. “The Intimate Enemy: Gender Violence and Reproductive Health.” Panos Briefing No. 27. London: Panos Institute.

<http://www.panos.org.uk/PDF/reports/IntimateEnemy.pdf>

FA Health, Policy/Advocacy, Multisectoral
GA Global
KW Conference report, literature review, research
LU 1998
PP 25
LA English
TA Advocates, Policymakers

This document provides a quick snapshot of the health and social issues related to gender-based violence. It is an excellent resource to use as a quick reference or guide for advocates and public officials who are trying to make gender-based violence a health issue. It also provides brief recommendations and synopses of promising interventions in the areas of health, the community, the legal sector, and the media. It should be noted, however, that this document is not current.

Garcia-Moreno, Claudia and Nadine France. 2001. “Violence against Women and HIV/AIDS: Setting the Research Agenda.” Geneva: WHO.

<http://www.genderandaids.org/downloads/topics/VAW%20HIV%20report.pdf>

FA Health
GA Global

KW Conference report, literature review, research, HIV/AIDS
LU 2000
PP 33
LA English
TA Advocates, Policymakers, Researchers/Academia/Theorists

This report summarizes research findings up to October 2000 (both conventional and interventions-based) that link violence against women and HIV/AIDS. The report provides a menu of the various links between GBV and HIV/AIDS, some evidenced by the research presented, as well as policy and programmatic recommendations that would be useful for activists and program designers. Nonetheless, as is evident in the report, few conclusions have been made in the research documented here regarding the causal relationship between GBV and HIV. As such, the document's recommendations are directed mainly toward specific areas and types of research needed to broaden existing knowledge in this area. Although this is a helpful, one-stop resource on the links between GBV and HIV, it is not current, as further research on the link has been completed in the past five years.

Guedes, Alessandra. 2004. "Addressing Gender-based Violence from the Reproductive Health/HIV Sector: A Literature Review and Analysis." Washington, DC: USAID, Bureau for Global Health.

www.prb.org/pdf04/AddressGendrBasedViolence.pdf

FA Health
GA Global
KW Literature review, promising interventions
PP 115
LA English
TA Advocates, Policymakers, Researchers/Academia/Theorists

This review highlights the unique and promising interventions of four different approaches to addressing GBV in developing country settings, including behavior change communication, community mobilization, service provision, and policy. Special sections address specific groups—youth and another group categorized as refugees, internally displaced populations, and returnees. Although there is a dearth of rigorously evaluated programs, the author makes a commendable attempt at classifying and analyzing the effectiveness of the programs reviewed. The author concludes with key elements that should be incorporated into all GBV programs, including investing in long-term, multisectoral programs with well-designed evaluations; ensuring the safety and autonomy of survivors and the cultural appropriateness of interventions; incorporating a human rights perspective into all initiatives; and promoting system-wide changes. Programmatic priorities are also offered.

Heise, Lori, Mary Ellsberg, and Megan Gottemoeller. 1999. Ending Violence against Women. Population Reports Series L, No. 11. Baltimore: Johns Hopkins University School of Public Health, Population Information Program, December 1999.

<http://www.infoforhealth.org/pr/l11edsum.shtml>

FA Health
GA Global

KW Background information, impact on health, lessons learned
PP N/A
LA English
TA Advocates, Policymakers, Program Designers/Managers, Researchers/Academia/Theorists

This is the leading, perhaps most widely cited piece on gender-based violence as it relates to health today. Comprehensive, yet succinct and well-organized, this piece offers the basic information on GBV, including definitions, prevalence statistics, risk factors, and health consequences, as well as guidelines for improving the health service response to GBV.

Maman, Suzanne, Jessie Mbwambo, Margaret Hogan, Gad Kilonzo, Michael Sweat, and Ellen Weiss. 2001. "HIV and Partner Violence: Implications for HIV Voluntary Counseling and Testing Programs in Dar es Salaam, Tanzania." Washington, DC: The Population Council.

<http://www.popcouncil.org/pdfs/horizons/vctviolence.pdf>

FA Health, Communication for Social and Behavior Change
GA Africa
KW Research findings, HIV/AIDS
PP 40
LA English
TA Advocates, Policymakers, Program Designers/Managers, Researchers/Academia/Theorists

This study demonstrates key links between GBV and HIV, namely that women who test positive for HIV are 2.68 times more likely to have experienced violence by their partners, and that the leading reason for women's nondisclosure of their HIV status to their partners is fear of abuse or abandonment. These important findings are valuable for advocating for policy, programs, and resources in today's public policy and donor environment that is highly focused on HIV/AIDS. Policy and program recommendations include the need to encourage couple communication about HIV/AIDS and HIV testing when promoting voluntary counseling and testing (VCT); train HIV counselors to ask questions about partner violence and to encourage disclosure when appropriate; and perhaps most importantly, institute community-based efforts to address sexuality and violence.

Velzeboer, Marijke, Mary Ellsberg, Carmen Clavel Arcas, and Claudia García-Moreno. 2003. Violence Against Women: The Health Sector Responds. Washington, DC: PAHO.

<http://www.paho.org/English/AD/GE/VAWHealthSector.htm>

FA Health
GA Central America
KW Background information, lessons learned, best practices, strategy planning
PP 114
LA English
TA Advocates, Policymakers, Program Designers/Managers

This report provides a strategy for addressing this complex problem and concrete approaches for carrying it out—not only for those on the front lines attending to the women who live with violence, but also for

the decisionmakers who may incorporate the lessons in the development of policies and resources. Chapter 1 gives an overview of why gender-based violence is a public health problem. Chapters 2 and 3 discuss the development, implementation, and achievements of PAHO's integrated strategy for addressing GBV, starting with how their study to determine the "critical path" of GBV victims helped define the strategy. In the next four chapters, the strategy's application is presented along with the "lessons learned" at the macro or political levels (Chapter 4), within the health sector (Chapter 5), in the clinic (Chapter 6), and beyond the clinic to the community at large (Chapter 7). The WHO contributed the final chapter (Chapter 8), which offers a global perspective on how the lessons learned and the integrated strategy may be applied in other communities around the world. [Adapted from publisher.]

Warshaw, Carole and Anne Ganley. 1998. Improving the Health Care Response to Domestic Violence: A Resource Manual for Health Care Providers. San Francisco: Family Violence Prevention Fund.

<http://endabuse.org/programs/display.php3?DocID=238>

FA Health
GA United States
KW Guidelines, protocols, manual, practical tools
LU 1998
PP 134, plus appendices
LA English
TA Program Designers/Managers, Trainers

Although this manual was written for the United States setting and, thus, is most appropriate for a developed country context, it is an invaluable and high-quality resource for healthcare providers on the proper protocols and procedures to screen for, treat, and refer cases of gender-based violence. Included in the document are patient education materials, sample screening and documentation forms, and other tools necessary for becoming more effective in identifying, intervening in, and preventing domestic violence. The manual is written with the following guiding principles in mind:

- Regard the safety of victims and their children as a priority.
- Respect the integrity and authority of each battered woman over her own life choices.
- Hold perpetrators responsible for the abuse and for stopping it.
- Advocate on behalf of victims of domestic violence and their children.
- Acknowledge the need to make changes in the healthcare system to improve the healthcare response to domestic violence.

WHO. 2003. Guidelines for Medico-legal Care for Sexual Violence Victims. Geneva: WHO.

<http://whqlibdoc.who.int/publications/2004/924154628X.pdf>

FA Health, Justice and Legal
GA Global
KW Guidelines, protocols, manual, training tool
PP 154
LA English
TA Program Designers/Managers, Trainers

These guidelines seek to (1) help national health systems improve the quality of treatment and support provided to victims of sexual violence; (2) provide protocols to guide the process of forensic evidence collection; and (3) act as an educational tool for healthcare professionals seeking to increase their capacity to provide an adequate level of care. The guidelines include an overview of current research regarding the nature and dynamics of sexual violence; general guidance on the nature of the provision of services to victims of sexual violence, including advice on the establishment of suitable healthcare facilities; detailed guidance on all aspects of the medical examination of victims of sexual violence, including the recording and classifying of injuries; steps in the collection of forensic evidence; treatment options and follow-up care; special guidelines for sexual violence against children, with parallel categories to those for adult sexual violence above; and finally, a section on documentation and reporting, including the provision of written reports and court testimony. Although the guidelines have been tested in geographically diverse countries, they should be adapted to individual country settings. While they are comprehensive, they may be overwhelming for a service provider working in a low-resource setting.

V. POLICY/ADVOCACY AND LEGAL RESOURCES

Center for Reproductive Law and Policy (Now known as the Center for Reproductive Rights):

2000. *Women of the World: Laws and Policies Affecting Their Reproductive Lives, East Central Europe.* New York: Center for Reproductive Law and Policy.

http://www.reproductiverights.org/pub_bo_wowece.html

2000. *Women of the World: Laws and Policies Affecting Their Reproductive Lives, Latin America and the Caribbean, Progress Report.* New York: Center for Reproductive Law and Policy.

http://www.reproductiverights.org/pub_bo_wowlatam.html#progressreport

2001. *Women of the World: Laws and Policies Affecting Their Reproductive Lives, Anglophone Africa Progress Report.* New York: Center for Reproductive Law and Policy.

http://www.reproductiverights.org/pub_bo_wowafrika.html

2000. *Women of the World: Laws and Policies Affecting Their Reproductive Lives, Francophone Africa Progress Report.* New York: Center for Reproductive Law and Policy.

http://www.crlp.org/pub_bo_wowfr.html

2004. *Women of the World: Laws and Policies Affecting Their Reproductive Lives, South Asia.* New York: Center for Reproductive Law and Policy.

http://www.crlp.org/pub_bo_wowsa.html

FA Policy, Justice and Legal

GA East and Central Europe, LAC, Africa, and South Asia

KW Laws and policies

LU LAC: 2000

PP East and Central Europe: 194; LAC: 88; Anglophone Africa: 173; Francophone Africa: 201; South Asia: 242

LA LAC: English, Spanish; Francophone Africa: English, French; all others: English only

TA Advocates, Policymakers/Lawmakers

The Center for Reproductive Rights and NGOs in East and Central Europe, LAC, Africa and South Asia have surveyed laws and policies in several countries in each region, with respect to reproductive health and the legal, economic, and social status of women. Topics included gender equality, marriage, labor, property, credit, education, and physical integrity, including violence and harassment. The aim of this document is to inform advocates and policymakers about the state of national laws and policies regarding reproductive rights. In the publications on Africa, laws on female genital cutting are also addressed.

Duvury, Nata, Caren Grown, and Jennifer Redner. 2004. "Cost of Intimate Partner Violence at the Community and Household Level." Washington, DC: ICRW.

http://www.icrw.org/docs/2004_paper_costingviolence.pdf

FA Policy/Advocacy, Multisectoral

GA Global

KW Costs of gender-based violence
PP 70
LA English
TA Advocates, Researchers/Academia/Theorists

This report provides a framework to measure the direct, quantifiable monetary costs of intimate partner violence at the community and household levels, such as the costs of health care services related to GBV. It includes a step-by-step guide on the components of such costs to be measured. The study does not actually measure those monetary costs for sample countries or settings, since cost data are not available. Nonetheless, the authors argue that the framework would be useful to lobby for the collection of such data.

Garcia-Moreno, Claudia, Melissa Rendler-García, Susan Timberlake, and Andrew Wilson. 2005.
“Addressing Violence against Women and Achieving the Millennium Development Goals.” Geneva: WHO.

<http://www.who.int/gender/documents/MDGs&VAWSept05.pdf>

FA Policy/Advocacy, Multisectoral
GA Global
KW Development
PP 45
LA English
TA Advocates, Researchers/Academia/Theorists

Written with policymakers and advocates in mind, this paper highlights the connections between the Millennium Development Goals (MDGs) and the prevention of violence against women by showing how working toward the MDGs will reduce violence against women and preventing violence against women will contribute to achieving the MDGs. The document also provides recommendations of how poverty reduction and development efforts in general can more effectively consider and address violence against women. The authors conclude that many MDG targets will be missed if violence against women—one of the most blatant manifestations of gender inequality—is not addressed.

Jacobs, Gloria (ed.). 2003. Not a Minute More: Ending Violence against Women. New York: UNIFEM.

http://www.unifem.org/resources/item_detail.php?ProductID=7

FA Policy/Advocacy, Justice and Legal
GA Global
KW Costs of gender-based violence
PP 112
LA English
TA Advocates, Policymakers/Lawmakers

Providing a global overview of campaign efforts against violence against women and laws and policies that address the problem, this publication is a useful resource for activists and policymakers seeking to understand the role of policy and advocacy to stop violence against women, as well as good practices on how to do so through laws and policies. It assesses what advances have been made and what still needs to be done worldwide through campaigns, legislation, and policies. Overall, the document has a strong human rights focus.

Luciano, D., S. Esim, and N. Duvvury. 2003. "How to Make the Law Work? Budgetary Implications of Domestic Violence Policies in Latin America." Washington, DC: ICRW.

http://www.gender-budgets.org/en/ev-66722-201-1-DO_TOPIC.html

FA Policy/Advocacy, Justice and Legal
GA LAC
KW Literature review, gender analysis, lessons learned
PP 33
LA English
TA Advocates, Policymakers/Lawmakers

This paper describes the legal reform that Latin American governments have made on preventing and ending domestic violence, including an analysis of the strengths and weaknesses of the legal framework and its implementation. It also provides a draft "Framework for Monitoring Budgetary Allocations of Domestic Violence Laws," which "describes the four stages of the budgetary process and discusses the roles of each stakeholder involved in the process of implementing domestic violence legislation." It is important to note that this framework has not yet been tested in the field and is limited to the Latin America and Caribbean region.

Morrison, Andrew, and María Beatriz Orlando. 2004. "The Costs and Impacts of Gender-based Violence in Developing Countries: Methodological Considerations and New Evidence." World Bank Working Paper Series. Washington, DC: World Bank.

[http://wbln0018.worldbank.org/LAC/LACInfoClient.nsf/8d6661f6799ea8a48525673900537f95/67f858a8d6afa16585256f4300014f62/\\$FILE/Costs%20and%20Impacts%20of%20GBV.pdf](http://wbln0018.worldbank.org/LAC/LACInfoClient.nsf/8d6661f6799ea8a48525673900537f95/67f858a8d6afa16585256f4300014f62/$FILE/Costs%20and%20Impacts%20of%20GBV.pdf)

FA Policy/Advocacy, Multisectoral, Economics
GA Global
KW Costs of gender-based violence, research
PP 60
LA English
TA Advocates, Policymakers/Lawmakers, Researchers/Academia/Theorists

Gender-based violence has significant health, economic, and social consequences not only for individuals but also for society as a whole. While there have been numerous studies that have made this evident in the developed world, less than a handful of studies have made the case for countries in the developing world. Using a relatively new methodology—propensity score matching—this paper generates comparable, cross-country estimates of the impacts of GBV in Haiti, Peru, and Zambia, with data from the Demographic and Health Surveys. The data presented demonstrates the impact on various health measures, education, and the income-generation of survivors of GBV, as well as the impact on the health and education of their children. The authors found some unexpected results, however, illustrating the need for further research. Note that a thorough comprehension of the paper requires at least an intermediate understanding of statistics and econometrics.

Waters, H., A. Hyder, Y. Rajkotia, S. Basu, J.A. Rehwinkel, A. Butchart. 2004. The Economic Dimensions of Inter-personal Violence. Geneva: WHO, Department of Injuries and Violence Prevention.

<http://whqlibdoc.who.int/publications/2004/9241591609.pdf>

FA Policy/Advocacy, Multisectoral, Economics
GA Global
KW Costs of gender-based violence, literature review
PP 70
LA English
TA Advocates, Policymakers/Lawmakers, Researchers/Academia/Theorists

This is an excellent resource to use in demonstrating the economic and social impacts of gender-based violence. It reviews and summarizes the current literature that attempts to estimate the costs of inter-personal violence worldwide. Chapters 2.3 and 2.4 discuss the costs of intimate partner violence and sexual violence, respectively. One should note, however, that—as the authors attest—there are various methodological challenges to measuring the costs of gender-based violence. For example, many cases often go unreported; survivors often do not seek services; and several social costs, such as the cost of lost civic participation, cannot be measured monetarily. Thus, the data here should not be taken strictly at face value.

WHO. 1999. “Summary of International and Regional Human Rights Texts Relevant to the Prevention and Redress of Violence against Women.” Commissioned by the Global Commission on Women’s Health. Geneva.

[Not available online.]

FA Justice and Legal
GA Global
KW International human rights texts
PP
LA English
TA Advocates, Policymakers/Lawmakers

This document provides a summary of the protection against violence afforded to women by international law and the commitment by the international community to eliminate such violence. References are made to legally binding conventions and non-legally binding declarations and resolutions, as well as the conclusions of other relevant UN and international conferences and of special rapporteurs appointed by the UN.

VI. COMMUNICATION FOR SOCIAL AND BEHAVIOR CHANGE

In addition to the resources listed here, please see The Johns Hopkins University Center for Communication Program's End Violence against Women website at <http://www.endvaw.org/>, an online resource of documents, reports, journals, articles, policy, documentation, training materials, posters, radio programs, and other important information developed to provide researchers, health communication specialists, policymakers, and others with the information and materials they need for their work to end violence against women.

Drezin, Jenny and Megan Lloyd Laney. 2003. Making a Difference: Strategic Communications to End Violence against Women. New York: UNIFEM.

http://www.unifem.org/resources/item_detail.php?ProductID=6

FA Communication for Social and Behavior Change
GA Global
KW Media campaign toolkit
PP 49
LA English, Russian
TA Advocates

“Making a Difference” is an indispensable tool for planning strategic communications to raise awareness about and combat gender-based violence. A toolkit that gives step-by-step information on developing a media campaign, it answers questions such as “what are the secrets to effective communications?” and “how can we know we are really making a positive difference in people’s lives?” There are instructions, tips, and checklists for a variety of situations, such as how to prepare and use a press release. Lastly, useful case studies, focus group methods, pre-testing of materials, and guidance for short and long-term communication strategies are provided. [As reviewed by publisher.]

Drezin, Jenny (ed.). 2001. Picturing a Life Free of Violence: Media and Communications Strategies to End Violence against Women. New York: UNIFEM.

http://www.unifem.org/resources/item_detail.php?ProductID=8

FA Communication for Social and Behavior Change
GA Global
KW Media, campaign materials
PP 86
LA English, Spanish
TA Advocates

“Picturing a Life Free of Violence” showcases a wealth and variety of media and communications strategies and materials used around the world to end violence against women. More than 2,500 activists worldwide compiled materials from projects that have already had success in reaching their target audience in order to produce this publication. Aside from highlighting materials and campaigns, the publication provides descriptions of innovative communication methods specific to domestic violence, sexual assault and harassment, harmful traditional practices, trafficking and commercial sexual exploitation, and HIV/AIDS. [As reviewed by publisher.]

UNFPA. 2002. "Entertainment-Education." Communication/Behavior Change Tools: Program Briefs No. 1. New York: UNFPA.

http://www.unfpa.org/upload/lib_pub_file/160_filename_bccprogbrief1.pdf

FA Communication for Social and Behavior Change
GA Global
KW Entertainment education or edutainment
PP 6
LA English
TA Program Designers/Managers

Although this brief does not focus solely on gender-based violence, it provides a good overview of what entertainment education is and its utility in affecting behavior change in the area of sexual and reproductive health. It also provides key elements and brief examples of entertainment education from around the globe.

Spindel, Cheywa, Elisa Levy, and Melissa Connor. 2000. With an End in Sight: Strategies from the UNIFEM Trust Fund to Eliminate Violence against Women. New York: UNIFEM.

http://www.unifem.org/resources/item_detail.php?ProductID=14

FA Communication for Social and Behavior Change, Policy/Advocacy, Justice and Legal
GA Global
KW Best practices, lessons learned, case studies
PP 132
LA English
TA Advocates, Researchers/Academia/Theorists

"With an End in Sight" narrates inspiring stories about efforts to end violence against women through building community commitment, forging partnerships with police and judiciary, and developing public and institutional support through research and advocacy. Candid and at times heart-wrenching, these case studies provide excellent insights to the implementation of research and interventions on GBV across the globe. The lessons learned are nicely summarized at the close of each case study and chapter.

Michau, L., and D. Naker. 2003. Mobilizing Communities to Prevent Domestic Violence: A Resource Guide for Organizations in East and Southern Africa. Nairobi: Raising Voices.

<http://www.raisingvoices.org/publications.php>

FA Community Mobilization, Communication for Social and Behavior Change, Policy/Advocacy
GA Africa
KW Planning tools, training materials
PP 336, including appendices
LA English
TA Advocates, Program Designers/Managers, Trainers

This resource presents an action plan to mobilize the community to prevent domestic violence. Although designed for the African context, it has been tested and adapted in other regions as well. Activities are organized around five phases:

1. **Conducting a community assessment** to gather information on attitudes and beliefs about domestic violence and to begin building relationships in the community and preparing staff for the project.
2. **Raising awareness** within the general community and various professional sectors (e.g., social and health services, law enforcement, teachers, religious communities, and so forth) of domestic violence and its negative consequences on women, men, families, and community life.
3. **Building networks** of support within the general community and various professional sectors that empower and enable individuals to take action and foster change.
4. **Integrating action** against domestic violence into everyday life and systematically within institutions.
5. **Consolidating programs** and activities working against domestic violence to ensure their sustainability, continued growth, and progress.

White, Victoria, Margaret Greene, and Elaine Murphy. 2003. Men and Reproductive Health Programs: Influencing Gender Norms. Washington, DC: USAID.

http://www.synergyaids.com/SynergyPublications/Gender_Norms.pdf

FA Men and GBV, Multisectoral
GA Global
KW Best practices, promising interventions, case studies, research
PP 64
LA English
TA Program Designers/Managers

This literature review highlights programs that have demonstrated the ability to change gender-related attitudes and the behavior of men, especially with respect to reproductive health and violence. It explains the methodologies each program employed to achieve this goal and presents findings from evaluations conducted to assess their efficacy. Common features of successful programs include collaborating with other institutions; sharing personal experiences as a starting point for behavior change; using well-trained gender-sensitive facilitators for the activities; integrating programs into communities in creative ways; working with males separately from females; suffusing mass media with gender-equitable images; and lastly, doing at least quasi-scientific evaluations of the programs to demonstrate that they are worthwhile.

VII. EDUCATION SECTOR

Leach, Fiona, Vivian Fiscian, Esme Kadzamira, Eve Lemani, and Pamela Machakanja. 2003. *An Investigative Study of the Abuse of Girls in African Schools*. London: Policy Division of the Department for International Development.

<http://www.dfid.gov.uk/pubs/files/investudyafricaedpaper54.pdf>

FA Education
GA Africa
KW Research, sexual violence
PP 208
LA English
TA Advocates, Policymakers/Lawmakers, Program Designers/Managers

Using a participatory rural appraisal as the principal research method, Leach and colleagues illustrate the contexts, dynamics, and simple realities that African girls face regarding various forms of abuse in schools. The in-depth look at perceptions and attitudes toward gender-based violence in schools may be helpful in shaping behavior change programs. Recommendations are provided for the school, community, district, and ministry levels—although they must be sifted out, as the document is not very succinct.

Mirsky, Judith. 2003. *Beyond Victims and Villains: Addressing Sexual Violence in the Education Sector*. London: The Panos Institute.

<http://www.panos.org.uk/PDF/reports/Beyond%20Victims.pdf>

FA Education, Policy/Advocacy
GA Global
KW Literature review, sexual violence
PP 31
LA English
TA Advocates, Policymakers/Lawmakers, Program Designers/Managers

This literature review summarizes current, global research findings on the prevalence and nature of sexual harassment and sexual violence in schools. Both quantitative and qualitative data are cited. Although not comprehensive, some strategies and sample interventions to address the problem of sexual violence in schools are presented, such as formal policy statements, working with teachers, the incorporation of gender and gender-based violence in school curriculum, peer group work and anti-bullying strategies, among others.

Wellesley Centers for Research on Women and DTS. 2003. "Unsafe Schools: A Literature Review of School-Related Gender-Based Violence in Developing Countries." Washington, DC: USAID.

www.usaid.gov/our_work/cross-cutting_programs/wid/pubs/unsafe_schools_literature_review.pdf

FA Education, Policy/Advocacy
GA Africa

KW Literature review, bibliography
PP 158
LA English
TA Advocates, Policymakers/Lawmakers, Program Designers/Managers, Researchers/Academia/Theorists

This document is particularly useful for policymakers, advocates, and other researchers. Program designers and managers may also find it helpful during the preliminary planning of programs. A comprehensive review of the literature pertaining to school-related gender-based violence, this document discusses the prevalence, context, and implications of the problem; and summarizes a range of interventions to address it, including curriculum development efforts, youth leadership, teacher training, and advocacy and community outreach. In addition, policy considerations and recommendations for action and research are given. Especially useful is the extensive annotated bibliography on the topic and corollary topics, including HIV/AIDS and reproductive health among youth.

VIII. GBV IN REFUGEE SETTINGS

GBV Global Technical Support Project, RHRC/John Snow, Inc. (JSI) Research and Training Institute. 2004. Checklist for Action: Prevention and Response to Gender-based Violence in Displaced Settings. Arlington, VA: RHRC Consortium.

<http://www.rhrc.org/pdf/Checklist.pdf>

FA Refugee Settings, Multisectoral
GA Africa
KW Action checklist
PP 8
LA English
TA Program Designers/Managers

This document is a broad checklist for designing programs to prevent and respond to GBV in refugee camps, with recommendations for program planning, staff training, and staff management; for preventing GBV through providing proper humanitarian assistance to women and girls; and for responding to survivors' legal, health, safety, and psychosocial needs. It places strong emphasis on minimizing women's vulnerability to GBV in refugee settings; for example, by ensuring that women and girls have clothes, shoes, easy access to food and water, and sex-segregated bathing facilities; that education is promoted and, where possible, provided for girls; and that women have access to income-generating activities. Although the checklist is comprehensive, it does not provide a guide for implementation.

United Nations High Commissioner for Refugees (UNHCR). 2003. Sexual and Gender-based Violence against Refugees, Returnees, and Displaced Persons: Guidelines for Prevention and Response. Geneva: UNHCR.

<http://www.unhcr.org/cgi-bin/texis/vtx/publ/openssl.pdf?tbl=PUBL&id=3b9cc26c4>

FA Refugee Settings, Multisectoral
GA Africa
KW Programmatic guidelines
LU 2003
PP 168
LA English
TA Program Designers/Managers

This is a comprehensive guide for best practices in working to prevent/respond to GBV in refugee settings. The guide includes background/statistical information on gender, GBV, and human rights issues specific to refugee populations; causes, risk factors, and consequences of GBV against refugees; and detailed guidelines for program design, implementation, monitoring, and evaluation. The guide focuses on multisectoral programs for refugee camps. Specific programs include developing community awareness campaigns, establishing a referral/reporting system, providing medical response and reproductive healthcare to victims, and working with local legal systems. Overall, this is a more comprehensive, detailed version of RHRC's Checklist for Action.

Vann, B. 2002. Gender-based Violence: Emerging Issues in Programs Serving Displaced Populations. Arlington, VA: JSI on behalf of RHRC.

http://www.rhrc.org/resources/gbv/vann_toc.html
http://www.rhrc.org/pdf/gbv_emerg_French.pdf
http://www.rhrc.org/pdf/gbv_emerg_portuguese.pdf

FA Refugee/Conflict-Affected Settings, Multisectoral
GA Global
KW Programmatic Guidelines, Case Studies
PP 158
LA English, French, Portuguese
TA Program Designers/Managers

This paper provides a history of the emergence and development of GBV programs for refugees/conflict-affected populations and describes in depth the recommended multisectoral model for GBV programs for refugee populations. The paper includes seven case studies that demonstrate real challenges and strategies for pending, fledgling, and established GBV programs for refugees and conflict-affected populations.

Ward, Jeanne. 2002. If Not Now, When? Addressing Gender-based Violence in Refugee, Internally Displaced and Post-conflict Settings. A Global Overview. New York: RHRC Consortium.

<http://www.rhrc.org/resources/gbv/ifnotnow.html>

FA Refugee Settings/Conflict-Affected Settings, Multisectoral
GA Global
KW Programmatic guidelines, case studies, lessons learned
PP 113
LA English
TA Program Designers/Managers, Policymakers/Lawmakers, Donors

The objective of this source is to “provide a baseline narrative account of some of the major issues, programming efforts, and gaps in programming related to the prevention of and response to GBV among conflict-affected populations worldwide.” The author assessed GBV programs in 12 countries to highlight problems they face and to provide recommendations to program managers, health providers, law enforcement and legal officials, policymakers, and donors to improve the effectiveness of programs.

IX. FEMALE GENITAL CUTTING (FGC)

Asha A. Mohamud, Nancy A. Ali and Nancy V. Yinger. 1999. “Female Genital Mutilation. Programmes to Date: What Works and What Doesn’t. A Review.” Geneva: WHO, Department of Women’s Health.

http://www.who.int/reproductive-health/publications/fgm/fgm_programmes_review.pdf

FA FGC, Interventions
GA Africa
KW Promising programs
PP 162, including annexes
LA English
TA Program Designers/Managers, Advocates, Policymakers/Lawmakers

The purpose of this report is “to document the current status of and trends in anti-FGC programming and to identify crucial elements that need to be prioritized for future support.” Although somewhat outdated, the authors provide a comprehensive review of findings gathered from a literature review, a survey of programs, and five field assessments. Detailed case studies are provided that highlight promising approaches to put an end to FGC. Recommendations are also directed at various audiences, including governments, international actors, and program designers.

Bodiang, Claudia Kessler. 2003. “Addressing Female Genital Mutilation: Challenges and Perspectives for Health Programs.” Eschborn: GTZ.

<http://www.intact-network.net/main2/document/fullarticlepdf/kesslerdeckblatt.pdf>

FA FGC, Interventions
GA Africa
KW Promising programs
PP 44, including annexes
LA English
TA Program Designers/Managers, Advocates, Policymakers/Lawmakers

This publication offers an overview of the various approaches employed to end FGC. International experience is evaluated and presented in the form of the ten most important approaches: the human rights approach, the legal approach, the health approach, the ‘religious’ approach, training health workers as change agents, training and reconversion of traditional circumcisers, establishing alternative rituals, IEC and behavior change campaigns, the comprehensive social development approach and the research approach. Background information on and examples of each approach are readable and clear, and recommendations on how best to approach the theme of FGC in a project context are also included. Among other things, the annex includes possible components of a training curriculum for health professionals.

WHO. 2000. A Systematic Review of the Health Complications of Female Genital Mutilation Including Sequelae in Childbirth. Geneva: WHO.

<http://www.who.int/reproductive-health/docs/fgm.html>

FA FGC, Health
GA Global
KW Literature review, research
PP 180
LA English
TA Advocates, Program Designers/Managers, Policymakers/Lawmakers, Researchers

This document is a systematic review of the primary resources providing evidence of the health impacts of FGC, with a particular focus on consequences during childbirth, including psychosexual outcomes. Extremely comprehensive in its research methodology, this review contains information from Internet searches, journals (both on and offline), and unpublished papers obtained through personal networking. Since information from journals is difficult to access from the field, this is an excellent available resource that summarizes the literature. The document is directed mainly toward researchers by identifying areas for further research. Nonetheless, it contains important conclusions for policymakers and program designers.

WHO. 2001. “Female Genital Mutilation: Policy Guidelines for Nurses and Midwives.” Geneva: WHO.

http://www.who.int/reproductive-health/publications/rhr_01_18_fgm_policy_guidelines/fgm_policy_guidelines.pdf

FA FGC, Policy/Advocacy
GA Global
KW Policy guidelines
PP 15
LA English
TA Policymakers/Lawmakers, Program Designers/Managers, Service Providers

The purpose of this document is to provide policymakers (both at the government and institutional levels) guidelines in designing policy for nurses and midwives regarding FGC. The specific guidelines given seek to promote and strengthen the case against the medicalization of FGC; support and protect nurses, midwives, and other health personnel in adhering to WHO guidelines not to close an opened up infibulation; empower nurses and midwives to carry out FGC-related functions that are outside their current legal scope of practice; and encourage the appropriate documentation of FGC in clinical records and health information systems. A teacher’s guide and student manual for instruction on FGC accompany this document.

WHO. 2001. Female Genital Mutilation: Integrating the Prevention and the Management of Health Complications into the Curricula of Nurses and Midwifery: A Teacher’s Guide. Geneva: WHO.

http://www.who.int/reproductive-health/publications/rhr_01_16_fgm_teacher_guide/index.html

FA FGC, Health, Training
GA Global
KW Teacher’s guide
PP 143
LA English
TA Trainers

Intended for use with the complementary WHO policy guidelines and student manual on FGC, the three documents aim to provide strategies for the prevention of FGC and the knowledge and skills necessary for nurses and midwives to manage clients with FGC complications. Besides covering basic knowledge on FGC, the principles of ethical treatment of FGC, and legal implications and human rights related to FGC, the document provides a step-by-step guide to the assessment, counseling, and referral of clients, as well as for surgery to open up of Type III FGC. The teacher's guide provides recommendations on teaching methods and aids. Both the teacher's guide and the student manual provide reference materials and/or learning resources for further education.

WHO. 2001. Female Genital Mutilation: Integrating the Prevention and the Management of Health Complications into the Curricula of Nurses and Midwifery: A Student's Manual. Geneva: WHO.

http://www.who.int/reproductive-health/publications/rhr_01_17_fgm_student_guide/index.html

FA FGC, Health, Training
GA Global
KW Student's manual
PP 103
LA English
TA Service Providers

See entry above.

Yoder, Stanley, Nouredine Abderrahim, and Arlinda Zhuzhuni. 2004. "Female Genital Cutting in the Demographic and Health Surveys: A Critical and Comparative Analysis." DHS Comparative Reports No 7. Calverton: ORC Macro.

<http://www.measuredhs.com/gender/fgc-cd/PDFs/FGCComparativeReport.pdf>

FA FGC, Health
GA Africa, Yemen
KW Prevalence, comparative analysis
PP 65
LA English
TA Advocates, Policymakers/Lawmakers, Program Designers/Managers, Researchers

Building on a previous DHS report by Dara Carr, this report summarizes data on FGC from 20 surveys administered between 1989 and 2002 in 15 African countries, plus Yemen. The study outlines data patterns that are deemed important to inform programming on FGC, including prevalence by sub-region, whether prevalence is increasing or decreasing, prevalence by ethnic groups and other demographic variables, who is performing the procedure, health consequences of FGC, and perceptions of FGC. The report also highlights how the Demographic and Health Surveys on FGC have varied over time.

X. TRAFFICKING IN PERSONS

International Organization for Migration (IOM). 2005. Data and Research on Human Trafficking: A Global Survey. Geneva: IOM.

http://www.humantrafficking.org/resources/pubs/2005_06/IOM_Data_Research_Human_Trafficking.pdf

FA Trafficking in Persons, Research, Policy/Advocacy
GA Global
KW Literature review, research
PP 342
LA English
TA Researchers, Advocates, Policymakers/Lawmakers

The information gathered in this book provides a comprehensive collection of the research to date on human trafficking worldwide. Reviews of the literature are presented in separate chapters for eight regions, including sub-Saharan Africa, North America, Latin America and the Caribbean, South Asia, East Asia, South-East Asia and Oceania, Europe, and the Middle East. A bibliography by region is also provided. The reviews demonstrate that there are few studies based on extensive or empirical research. The book suggests a number of ways to improve research and data on human trafficking.

United States Department of State, Office to Monitor and Combat Trafficking in Persons. 2005. Trafficking in Persons Report. Washington, DC: Department of State.

<http://www.state.gov/g/tip/rls/tiprpt/2005/>

FA Trafficking in Persons, Policy/Advocacy
GA Global
KW Prevalence, comparative analysis
PP 65
LA English
TA Advocates, Policymakers/Lawmakers, Program Designers/Managers

This comprehensive worldwide report by the U.S. State Department assesses the efforts of 150 governments to combat severe forms of trafficking of persons, including sex trafficking and trafficking for involuntary servitude, peonage, slavery, or debt bondage. The report includes country narratives that describe the scope and nature of the trafficking problem and the reasons for including the country in the report. Country profiles contain an assessment of the government's compliance with the minimum standards for the elimination of trafficking, as laid out in the U.S. government's Trafficking Victims Protection Act of 2000, and include recommended actions to combat trafficking. A special section provides international best practices. As the authors write, the tool is to be used as "a catalyst for government and non-government efforts to combat trafficking in persons around the world" by "continued dialogue, encouragement, and a guide to help focus resources on prosecution, protection, and prevention programs and policies."

UNIFEM/United Nations Inter-Agency Project on Human Trafficking in the Greater Mekong Sub-region (UNIAP). 2002. "Trafficking in Persons: A Gender and Rights Perspective." Bangkok: UNIFEM-East and Southeast Asia Regional Office/UNIAP.

<http://www.unifem-eseasia.org/resources/others/traffkit.pdf>

FA Trafficking in Persons, Policy/Advocacy
GA East and Southeast Asia
KW Briefing kit
PP 22
LA English
TA Advocates, Policymakers/Lawmakers

This briefing kit is a useful tool that highlights the facts and figures related to human trafficking from a gender perspective. The kit is divided up by sheets that provide quick snapshots of the essential information, including a general introduction and definition of trafficking; the magnitude of the problem and main trafficking routes; why trafficking is a gender issue and who is vulnerable to trafficking; the abuses and consequences of trafficking; the importance and elements of a rights-based approach to responding to trafficking; strategic interventions; and good practices and international conventions and protocols related to human trafficking. Although the authors' focus area is on trafficking in persons in the Mekong Region of Southeast Asia, the information is useful for understanding and responding to trafficking worldwide.

UNIAP. Year unknown. Training Manual for Combating Trafficking in Women and Children. Yangon, Myanmar.

http://www.un.or.th/TraffickingProject/trafficking_manual.pdf

FA Trafficking in Persons, Policy/Advocacy
GA East and Southeast Asia
KW Training Manual
PP 99
LA English
TA Trainers

This draft manual is the product of a multi-donor effort (Save the Children, United Nations, International Organization for Migration) to train those involved in the return and re-integration of trafficked persons. Part One provides background information essential for understanding the issue of trafficking. This includes the various definitions on trafficking, the differences between migration and trafficking, the stages of trafficking, and the concepts that underpin the process of return and reintegration. Part Two brings to life the concepts and theories presented in Part One through exercises aimed at involving participants in the various aspects of trafficking interventions.

XI. MULTISECTORAL RESOURCE GUIDES

Bott, Sarah, Andrew Morrison, and Mary Ellsberg. 2005. “Preventing and Responding to Gender-based Violence in Middle and Low-income Countries: A Global Review and Analysis.” World Bank Working Paper Series 3618. Washington, DC: World Bank.

http://econ.worldbank.org/external/default/main?pagePK=64165259&theSitePK=469372&piPK=64165421&menuPK=64166093&entityID=000112742_20050628084339

FA Multisectoral
GA Global
KW Best practices, promising interventions, literature review
PP 61
LA English
TA Policymakers/Lawmakers, Program Designers/Managers

The authors present a review of interventions that they deem to be “promising approaches” to addressing two common forms of gender-based violence—intimate partner violence and sexual violence. The authors recognize, however, that few programs have undergone a rigorous evaluation. Interventions in various sectors are reviewed, including justice, health and education, and those applying a multisectoral approach. Table 2.5 provides a nice summary of the “promising approaches” by sector.

Ellsberg, Mary and Lori Heise. 2005. *Researching Violence against Women: A Practical Guide for Researchers and Advocates*. Washington, DC: WHO, Center for Health and Gender Equity.

http://www.path.org/files/GBV_rvaw_complete.pdf

FA Multisectoral, Research
GA Global
KW Research guidelines
PP 257, including annexes
LA English
TA Researchers, Activists

With decades of collective experience researching violence against women, the authors outline some of the tools to study violence against women, as well as the methodological and ethical challenges in doing so. They also use country case studies to describe a range of innovative techniques that have been used to address these challenges. For activists, the authors give tips on how to go from “research to action” by disseminating research findings in an effective manner. The manual focuses on intimate partner violence, although many of the insights apply to other types of violence against women.