Zimbabwe Country Case Study

Effective law and policy on gender equality and protection from sexual and gender-based violence in disasters
The International Federation of Red Cross and Red Crescent Societies (IFRC) is the world’s largest volunteer-based humanitarian network. Together with our 189 member National Red Cross and Red Crescent Societies worldwide, we reach 97 million people annually through long-term services and development programmes as well as 85 million people through disaster response and early recovery programmes. We act before, during and after disasters and health emergencies to meet the needs and improve the lives of vulnerable people. We do so with impartiality as to nationality, race, gender, religious beliefs, class and political opinions.

Guided by Strategy 2020 – our collective plan of action to tackle the major humanitarian and development challenges of this decade – we are committed to ‘saving lives and changing minds’.

Our strength lies in our volunteer network, our community based expertise and our independence and neutrality. We work to improve humanitarian standards, as partners in development and in response to disasters. We persuade decision-makers to act at all times in the interests of vulnerable people.

The result: we enable healthy and safe communities, reduce vulnerabilities, strengthen resilience and foster a culture of peace around the world.

© International Federation of Red Cross and Red Crescent Societies, Geneva, 2017

Copies of all or part of this study may be made for noncommercial use, providing the source is acknowledged. The IFRC would appreciate receiving details of its use. Requests for commercial reproduction should be directed to the IFRC at secretariat@ifrc.org.

The opinions and recommendations expressed in this study do not necessarily represent the official policy of the IFRC or of individual National Red Cross or Red Crescent Societies.
Zimbabwe Country Case Study

Effective law and policy on gender equality and protection from sexual and gender-based violence in disasters
Table of Contents

Acknowledgements 4
Acronyms 5
Executive Summary 6

Part 1
Introduction and Background 9
  1.1 Introduction 9
    Terminology 10
    Methodology 10
    Zimbabwe Red Cross Society Initiatives 12
  1.2 Country Background 12
    Disaster Risk In Zimbabwe 12
    Incidence of Sexual and Gender-Based Violence In Zimbabwe 12

Part 2
Law and Policy Frameworks on Gender and SGBV 15
  2.1 International and regional frameworks 15
  2.2 Zimbabwe’s constitutional provisions 15
  2.3 National law and policy on SGBV and gender equality 17

Part 3
Implementation of the SGBV protection laws 20
  3.1 Awareness and promulgation 21
  3.2 Access to justice 21
    Role of police 22
    Legal aid 22
    Family and community normalisation of SGBV 22
    Child marriage 23
  3.3 Contribution of the laws to prevention and response to SGBV 23

Part 4
Legal framework for disaster management (civil protection) 25

Part 5
Implementation of the Civil Protection law 27
Part 6
Findings and recommendations  28
  6.1 Gender and SGBV legislation challenges  28
  6.2 Disaster management challenges  29
  6.3 Good practices for operational integration  30
  6.4 Recommendations  31

References  33

List of organizations and focus group communities interviewed  35
Acknowledgments

This country case study report was undertaken by Florence Mangwende, IFRC Consultant, with technical advice and editing support from Mary Picard, Lucia Cipullo, Isabelle Granger, Kaisa Laitila, Tina Tinde, Amjad Saleem and David Fisher from the IFRC.

The IFRC wishes to thank the Zimbabwe Red Cross Society for its partnership in the case study and especially for hosting the community visit, in particular Maxwell Phiri, Secretary-General, and Ernest Maruza, gender and diversity focal point.

The project partners wish to thank all those who participated in interviews and focus group discussions in Zimbabwe, as their input was invaluable in understanding implementation of the legal and policy frameworks, and in providing insights into the nature of sexual and gender-based violence as it occurs in Zimbabwe, both in normal times and in disaster contexts.

This research was made possible with support from the Swedish Red Cross, to which the IFRC expresses its gratitude.
### Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Full Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>CEDAW</td>
<td>Committee on the Elimination of All Forms of Discrimination Against Women</td>
</tr>
<tr>
<td>CEDAW</td>
<td>Convention on the Elimination of All Forms of Discrimination Against Women</td>
</tr>
<tr>
<td>COMESA</td>
<td>Common Market for Eastern &amp; Southern Africa</td>
</tr>
<tr>
<td>CPRA</td>
<td>Child Protection Rapid Assessment (CPRA)</td>
</tr>
<tr>
<td>CSO</td>
<td>Civil Society Organisation</td>
</tr>
<tr>
<td>DCP</td>
<td>Department of Civil Protection</td>
</tr>
<tr>
<td>DM</td>
<td>Disaster Management</td>
</tr>
<tr>
<td>DRM</td>
<td>Disaster Risk Management</td>
</tr>
<tr>
<td>DVA</td>
<td>Domestic Violence Act</td>
</tr>
<tr>
<td>GBV</td>
<td>Gender Based Violence</td>
</tr>
<tr>
<td>GBVNCG</td>
<td>GBV National Coordination Group, under HRP Protection Sector</td>
</tr>
<tr>
<td>GWEN</td>
<td>Girls and Women Empowerment Network</td>
</tr>
<tr>
<td>HIV</td>
<td>Human Immunodeficiency Virus</td>
</tr>
<tr>
<td>HRP</td>
<td>Humanitarian Response Plan (HRP Protection Sector)</td>
</tr>
<tr>
<td>IFRC</td>
<td>International Federation of Red Cross and Red Crescent Societies</td>
</tr>
<tr>
<td>IOM</td>
<td>International Organization for Migration</td>
</tr>
<tr>
<td>NGO</td>
<td>Non-Governmental Organizations</td>
</tr>
<tr>
<td>SADC</td>
<td>Southern African Development Community</td>
</tr>
<tr>
<td>SGBV</td>
<td>Sexual and Gender-Based Violence</td>
</tr>
<tr>
<td>UNFPA</td>
<td>United Nations Population Fund</td>
</tr>
<tr>
<td>VFU</td>
<td>Victim Friendly Unit (of Police)</td>
</tr>
<tr>
<td>ZRCS</td>
<td>Zimbabwe Red Cross Society</td>
</tr>
<tr>
<td>ZWLA</td>
<td>Zimbabwe Women Lawyers’ Association</td>
</tr>
</tbody>
</table>
The country case study was conducted in order to contribute to:

- Implementing Resolution 3 of the International Conference of the Red Cross and Red Crescent on ‘Sexual and gender-based violence: Joint action on prevention and response’ (32IC/15/3); and

- Filling a knowledge gap on gender equality in disaster risk management laws, policies and their implementation, that was identified in the IFRC and UNDP 2014 study, Effective Law and Regulation to Support Disaster Risk Reduction: A Multi-Country Report.

The case study was undertaken as a desk review of national laws, policies and secondary resources, followed by interviews with key informants in Harare and focus group discussions with women in rural communities in the Muzarabani district of Zimbabwe, to address the issues around implementation. This district, on the Zambezi river flood plain in northern Zimbabwe, experiences both floods and drought, and at the time of the study was affected by a two-year drought.

This was a pilot case study, the first of three country studies, and lessons learned from this methodology were then used to adapt the terms of reference for the companion case studies in Ecuador and Nepal.

The case study looks at both gender equality and sexual and gender-based violence in times of disaster. The definition of SGBV used in the report recognises that SGBV mainly affects women and girls, but can also affect boys and men. However, it is also noted that the policy and public discourse on these issues in Zimbabwe is focused almost entirely on women’s equality and prevention of violence against women.

Although informants have indicated there is an increase in SGBV incidence and complaints during disasters, there is no data available to quantify the extent of this. In slow-onset disasters, such as the community impoverishment triggered by a two-year drought, it was also difficult to make a distinction between SGBV issues related to the disaster (loss of family income and livelihoods, insufficient food) or those related to broader cultural attitudes (toleration towards some types of SGBV).

The report identifies two frameworks of law and policy that are relevant to gender equality in disaster risk management (DRM) and to addressing sexual and gender-based violence (SGBV) in disasters:
There is an extensive legal framework related to gender equality, criminalisation and prevention of violence against women in normal times (outside the context of disasters). This is also intended to operate during disasters. The report focuses on the Domestic Violence Act, which creates offences and establishes a system for protection orders and survivor support, and also on the Sexual Offences Act 2002, now part of the Criminal Law. Police Victim Friendly Units are also part of this framework. Consultations for the case study indicated that there are social and economic barriers to sanctioning SGBV as unacceptable, and to women accessing support services and the justice system, even outside the disaster context. The institutional frameworks for SGBV protection and legal aid are also under-resourced, and are additionally stressed by disasters and emergencies; and

The Civil Protection Act essentially establishes an institutional structure for disaster preparedness and response, but does not include or mandate policy content on priorities in disaster management, and is silent on questions of gender and SGBV protection in disasters.

There is currently no formal connection between the framework to deal with SGBV in normal times, and the civil protection system that is engaged during disasters. There are also no specific provisions for disaster-resilience of SGBV support services, and no mechanism for coordination with the civil protection system on SGBV during disasters.

The report finds that, although there is a legal framework for SGBV support, during normal times and during disasters, implementation is a challenge due to (a) lack of institutional resources, (b) insufficient legal aid for SGBV survivors, and (c) community attitudes of tolerance towards SGBV within families that create social barriers to accessing support services and the justice system. The additional strain placed on this framework during disasters magnifies the existing challenges, and there is no specific mechanism in place to ensure the framework is disaster-resilient.

The report also notes two existing good practice structures with potential for improving coordination on gender equality and SGBV during disasters, both slow-onset and rapid-onset. These are the national Anti-Domestic Violence Council under the Domestic Violence Act, and the GBV National Coordination Group (GBVNCG) established under the humanitarian cluster system in Zimbabwe.

The report recommends that:

1. The Government uses its legislative discretion under the Domestic Violence Act, to expand the membership of the Anti-Domestic Violence Council, to increase awareness of the need for family support services for SGBV prevention and access to justice during disasters, including slow-onset disasters triggered by drought. The DVA already specifies that the Council includes representation from the ZRP, Council of Chiefs, and Ministry of Justice, and makes provision for further representation from churches, CSOs engaged on the issue and any other body or organisation...
the Minister considers relevant. If the Civil Protection Department, ZRCS and NGOs engaged in SGBV protection were to be invited to join this Council, it could be a useful vehicle for them to support a focus on SGBV in disasters and emergencies;

2. In the medium to long term, the Government includes in an eventual revision of the Civil Protection Law, both an institutional mandate and provision for resources to address gender equality in disaster risk management, including for participation of women and SGBV prevention and protection.

3. In the short to medium term, the Government proceeds, through administrative and policy-making mechanisms, to improve coordination on gender equality and SGBV protection within the disaster management system by:

a. Ensuring significant representation of women on all committees and councils within the disaster management system at national and local levels, moving progressively to at least 30% women (consistent with the gender equality provisions in the 2013 Constitution, the National Gender Policy and SADC regional targets of women in governance);

b. Including in key advisory bodies within the disaster management system, representation of the Gender Commission, the Women’s Ministry, ZRCS, relevant NGOs, and women’s legal organisations and experts, to increase the focus and understanding on gender equality and SGBV protection in disaster preparedness and response;

c. Formalising the role of the Protection Cluster, and especially the Gender Based Violence (GBV) National Coordination Group (Sub-cluster of the Humanitarian Response Planning (HRP) Protection Sector Cluster), as a key forum for Government agencies – especially the ZRP Victim Friendly Unit - ZRCS and NGOs to participate actively with UN Agencies in (i) preparedness for SGBV prevention and protection during disasters, and (ii) coordination on SGBV during disaster response and recovery operations.

4. Government agencies, including the Women’s Ministry, health and welfare services, and the ZRP Victim Friendly Unit, along with ZRCS, NGOs and UN Agencies, make a higher priority of community awareness-raising and support services on SGBV during normal times, to create a more solid community base for SGBV prevention and protection during disasters and disaster recovery. This should also extend to building capacity amongst traditional leaders and local police. Given the reported wide tolerance of domestic violence and child marriage, and the increase in both during disasters, this strategy would help to address the cultural barriers to accessing support and justice on SGBV, focusing on prevention through working with communities, especially in rural areas.
Part 1
Introduction and Background

1.1 Introduction

This report outlines the results of research carried out during December 2016 in Zimbabwe. The research was conducted in Harare and Muzarabani district in northern Zimbabwe. This Country Case Study was conducted as part of a global initiative on ‘Effective law and policy for addressing gender in disaster risk management and sexual and gender-based violence in disasters’. It was the pilot case study in a group of three country case studies on the national legal and policy frameworks addressing gender equality in disaster risk management and protection from sexual and gender-based violence (SGBV) in disasters, including their implementation. Lessons learned from this methodology were then used to adapt the terms of reference for the companion case studies in Ecuador and Nepal.

The country case study was conducted in order to contribute to:

- Implementation of Resolution 3 of the International Conference of the Red Cross and Red Crescent on ‘Sexual and gender-based violence: Joint action on prevention and response’ (32IC/15/3), and to address the specific issue of how sexual and gender-based violence is considered within legal frameworks. Resolution 3 “encourages the International Federation, in collaboration with National Societies and other relevant partners, to continue its research and consultations with a view to formulating relevant recommendations to prevent and respond to sexual and gender-based violence in disasters and other emergencies” (OP 30); and

- Filling a knowledge gap on gender equality in disaster risk management laws, policies and their implementation that was identified in the IFRC and UNDP 2014 study, Effective Law and Regulation to Support Disaster Risk Reduction: A Multi-Country Report.

The country case study was intended to contribute to an increased understanding of the landscape on the inclusion of gender, the participation of women, and the prevention and response to SGBV within law and policy related to disaster risk management, and its implementation. This will support the Zimbabwe Red Cross Society (ZRCS) in its dialogue with relevant authorities, and the IFRC in its global engagement and advocacy. It has also contributed to the findings of the global review. The ultimate goal of the research is to inform law, regulation, programming and operational planning on disaster risk management, to produce better outcomes for SGBV survivors, women, children and affected communities as a whole.
Terminology

The term ‘sexual and gender-based violence’ as used in this report, reflects the terminology in the above 2015 resolution of the International Conference of the Red Cross and Red Crescent. While different actors employ various definitions of the overlapping terms “sexual violence” and “gender-based violence,” the term SGBV is based on two working definitions of the Movement which, although not formally adopted, are reproduced here to explain how the term SGBV is used in the report. SGBV combines:

‘Sexual violence’: Acts of a sexual nature committed against any person by force, threat of force or coercion. Coercion can be caused by circumstances such as fear of violence, duress, detention, psychological oppression or abuse of power. The force, threat of force or coercion can also be directed against another person. Sexual violence also comprises acts of a sexual nature committed by taking advantage of a coercive environment or a person’s incapacity to give genuine consent. It furthermore includes acts of a sexual nature a person is caused to engage in by force, threat of force or coercion, against that person or another person, or by taking advantage of a coercive environment or the person’s incapacity to give genuine consent. Sexual violence encompasses acts such as rape, sexual slavery, enforced pregnancy or enforced sterilization; and

‘Gender-Based Violence’: An umbrella term for any harmful act that results in, or is likely to result in, physical, sexual or psychological harm or suffering to a woman, man, girl or boy on the basis of their gender. Gender-based violence is a result of gender inequality and abuse of power. Gender-based violence includes but is not limited to sexual violence, domestic violence, trafficking, forced or early marriage, forced prostitution and sexual exploitation and abuse.¹

Methodology

The research addresses four main questions:

- What is the extent of law and policy frameworks for gender and SGBV protection in normal times, and how disaster-resilient are these?
- To what degree are gender and SGBV issues incorporated in the national disaster risk management laws and policies in Zimbabwe?
- How effective is implementation of these legal / policy provisions in practice?
- How could the existing legal and policy frameworks in Zimbabwe and/or their implementation, be strengthened to better address gender (including participation of women) and prevention of and response to sexual and gender-based violence, in disasters?

To answer these questions a qualitative research methodology was adopted. Thus, the research was based on a review of literature, analysis of existing laws, policies and plans, a review of practitioner reports, and focus group
discussions with women in disaster affected communities in Muzarabani district, northern Zimbabwe.

The desk review focused on the legislation that governs issues of sexual and gender-based violence within Zimbabwe as well as those that govern disaster management (the term used in national law and policy is ‘civil protection’).

The following are the principal national legislative and policy frameworks consulted:

- Constitution – 2013 Constitution of Zimbabwe
- Gender equality and protection from sexual and gender-based violence.
  The analysis focuses on the Domestic Violence Act (2007) and the Sexual Offences Act 2002, now part of the Criminal Law (Codification and Reform) Act of 2006. The review also looks at relevant national reports and policies, including the National Gender Policy, and the Zimbabwe Demographics Health Survey.
- Civil protection – Civil Protection Act (Chapter 10.06), National Civil Protection Plan, and Disaster Risk Management Bill.

In addition, the desk review considered relevant international and African regional treaty and policy frameworks in which Zimbabwe participates.

The researcher consulted key informants through structured interviews. These included: Zimbabwe Red Cross; government departments (Department of Social Welfare and Department of Civil Protection); three UN agencies (IOM, UNFPA and UN Women); and two local civil society organizations, the Zimbabwe Women Lawyers Association, and Girls and Women Empowerment Network (GWEN) Trust. These were identified by the consultant as the main stakeholders to contact as a matter of priority, although it was not possible to obtain interviews with all key stakeholders within the timeframe of the study. A list of those interviewed is annexed to the report.

Two focus group discussions were held with a total number of 30 women, in Muzarabani district. Group 1 were women community leaders identified and invited by ZRCS from a number of villages in Dambakurima Ward (wards being the most local government area). Group 2 were local women volunteers in the ZRCS ‘Community Based Health and First Aid Programme’ working throughout the Muzarabani District.

The Muzarabani District, in northern Zimbabwe on the flood plain of the Zambezi River, was chosen because it is an area frequently affected by natural hazards, experiencing either seasonal floods or droughts most years. At the time the case study was undertaken the communities had been experiencing a severe drought for more than two years, resulting in food insecurity and loss of agriculture-based livelihoods.
Zimbabwe Red Cross Society Initiatives

This project was a partnership between IFRC and Zimbabwe Red Cross Society (ZRCS). ZRCS is a key disaster responder in Zimbabwe, working as an auxiliary to Government in providing humanitarian relief during emergencies, such as floods. ZRCS runs various programmes with partner national societies from within the Red Cross and Red Crescent Movement, including drought-related food distribution, and more recently cash transfers, to relieve food insecurity in selected communities. From its strong base of local members and volunteers, ZRCS works extensively with communities to build their resilience, and to develop their capacities through initiatives such as the ‘Community Based Health and First Aid Programme.’ It also has a long-term programme of guardianship of AIDS orphans, enabling them to continue living in their communities, under the guardianship of responsible adults appointed to safeguard their welfare until adulthood.

In recent years, ZRCS has increased its focus on gender and diversity. Much of this effort is based around implementing the 2015 International Conference resolution on SGBV, and the IFRC ‘Minimum standard commitments to gender and diversity in emergency programming’. It has a designated focal point on these issues and participated in IFRC regional conferences on SGBV, in Kenya, in both 2015 and 2016.

1.2 Country Background

Disaster Risk in Zimbabwe

According to the National Contingency Plan, in recent years Zimbabwe has experienced an increase in hazardous events, including disease outbreaks, floods, droughts and storms. These hazards, which are of both natural and human-induced origins, often trigger food, nutrition and health insecurity, and environmental degradation. Infrastructure including roads, public buildings and homes are also damaged. On the micro level, this has resulted in more fragile and less resilient family units, while on the macro level there is the opportunity cost of diverting resources to respond to these emergencies. Evidence continues to show that disasters are likely to increase in Zimbabwe, particularly those that are weather-related, due to climate change, with a projected overall temperature increase, and more extreme dry and wet periods, resulting in more droughts as well as more floods.  

Incidence of Sexual and Gender-Based Violence in Zimbabwe

In Zimbabwe, the working definition of GBV (the term used in Government policy) is drawn from the General Recommendation Number 19 of the Committee on the Elimination of All Forms of Discrimination Against Women (CEDAW), which defines gender-based violence as “violence that is directed against a woman because she is a woman or that affects women disproportionately.” This includes any act or threat to inflict physical, sexual or psychological harm. This working definition, also reflected in the laws,
substantially equates ‘gender’ with sex, so the main focus is on violence against women. This is narrower than the scope of SGBV as described by the Red Cross and Red Crescent Movement, which recognises more overtly that, while SGBV mainly affects women and girls, it can also include violence against men and boys based on gender roles. By contrast, in Zimbabwe, “gender-based violence” is often used interchangeably with “sexual violence” and “violence against women”.

In Zimbabwe, SGBV arises from social, cultural and religious practices that subordinate women, and may also make it unacceptable for men or women, girls or boys, to step outside socially assigned gender roles (including people who identify as lesbian, gay, bisexual, transsexual or intersex). It thrives in communities where violence is acceptable as a form of conflict resolution. It is facilitated by patriarchal (male controlled) social hierarchies, by acceptance of violence as a mode of social interaction and political interface, and by socioeconomic inequality and a breakdown in norms and social structures.

In Zimbabwe, SGBV is seen particularly in acts of domestic violence related to gender roles. Spousal abuse is the most common form of SGBV. As a result of the patriarchal nature of Zimbabwean society, women are affected more by SGBV than men. Women face sexual violence, physical violence, emotional and psychological violence and also socio-economic violence in their homes, as well as violence outside the home.

Some of the contributing factors to SGBV in Zimbabwe include: societal norms on sexual rights and manhood; commercialization of ‘lobola’ or bride price; socialization processes that condone abuse; economic factors such as poverty, exploitation, access to and control over resources (e.g. land); variance between the modern and traditional/religious concepts of love by men and women; harmful traditional practices (e.g. girl child pledging for purposes of appeasing avenging spirits, forced marriage, child marriage, forced virginity testing and forced wife-inheritance); infidelity and polygamy; and limited participation of women in decision-making.

Despite the enactment of laws to protect women, SGBV remains high. The Zimbabwe Demographic Health Survey of 2015 indicates that more than 1 in 3 women have experienced physical violence since the age of 15. The percentage of women who experienced violence was at 14.5% in 2015; at the same time, there is an increase in the percentage of women who report having experienced violence in their lifetime (from 29.9% in 2010 to 34.8% in 2015). The most commonly reported perpetrator is the current or former husband or partner. Also, it is notable that one in two women without an education has experienced spousal violence, which may also be related to child marriage of girls before they finish school, a phenomenon that also reportedly increases during the economic stress caused by disasters. It

---


6 Ibid.


8 Zimbabwe Demographic and Health Survey 2015: Key Indicators. Rockville, Maryland, USA: Zimbabwe National Statistics Agency (ZIMSTAT) and ICF International.
is also more common for women to have lower education levels in rural communities, and as these are the areas most affected by floods and droughts, these existing vulnerabilities to SGBV are likely compounded by disasters.

Some current strategies for addressing SGBV in Zimbabwe include improving awareness of the laws, and discussing with communities the social norms that may condone SGBV. Awareness campaigns face particular challenges in resource-poor rural areas where, for most women, there is little or no access to safe shelters, counselling services, or the judicial system, and in this context, engagement with community organisations and local leaders is used. Some successful awareness-raising campaigns have used film, and extended focus group work in communities to address beliefs and change attitudes on issues such as economic abuse, physical violence, rape in marriage and psychological abuse.

Other successful strategies have brought issues of gender equality and SGBV into the education system, including for professionals such as police. For example, the University of Zimbabwe hosts the Southern & Eastern African Regional Centre for Women’s Law (SEARCWL), and some 20% of its postgraduate students are men. It offers courses that examine the ways gender roles are socially constructed in legal contexts. Some Zambian police who had studied at SEARCWL reported that, as a result, they had changed and improved their police station’s procedures and practice for handling reports of SGBV.

Key informants and community focus group participants in the study reported that SGBV incidence and complaints increase during disasters, including the slow-onset disaster of food insecurity arising from drought. According to a UNICEF report on the humanitarian situation, a Child Protection Rapid Assessment (CPRA) conducted in July 2016 found that the 2016 drought contributed to increased teenage pregnancies, child marriages and psychological distress of children. However, the CPRA itself was not published and the summary report does not cite cases or statistics, so this remains a commonly reported phenomenon that has apparently not been further researched or measured.

Aside from understanding the social environment, and community perceptions of an increase during disasters, the lack of data-gathering on this issue means it is not possible to draw more definitive conclusions on the impact of disasters on SGBV. Such information-gathering is also particularly challenging in situations such as slow-onset food insecurity triggered by drought, where there is no clear start date, and where many different social and policy factors have an impact. However, given the high incidence of domestic violence, the success of some awareness-raising efforts suggest that an effective approach may be to focus on SGBV as part of community safety and resilience-building, both during slow-onset disasters and outside the context of disasters.

10 ibid.
12 FRC informant.
Part 2
Law and Policy Frameworks on Gender and SGBV

2.1 International and regional frameworks

Zimbabwe is party to a number of international and regional conventions and instruments that provide for gender equality.

The key international agreements to which Zimbabwe has acceded are: the Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW); the Beijing Declaration on the Platform for Action 1995; the Convention on Civil and Political Rights; the Equal Remuneration Convention; the Convention on Prohibition of Discrimination in Occupations; the Convention on the Elimination of the Worst Forms of Child Labour; and the Convention on Economic, and Social and Cultural Rights.

At a regional level, in 2008, Zimbabwe ratified the protocol to the 2003 African Charter on Human and People’s Rights on the Rights of Women. Zimbabwe is also party to the 2004 Solemn Declaration on Gender and Equality in Africa. In 1997, Zimbabwe ratified the Southern African Development Community’s (SADC) Gender and Development Protocol and subsequently ratified its successor, the SADC Protocol on Gender and Development 2008. The protocol advocates gender parity in all sectors and sets out 28 substantive targets for achieving gender equality by 2015. Zimbabwe also subscribes to the Common Market for Eastern & Southern Africa (COMESA) Gender Policy, which fosters gender equality and equity at all levels of regional integration and cooperation.

2.2 Zimbabwe’s constitutional provisions

The 2013 Constitution of Zimbabwe expanded human rights in Zimbabwe and especially put a focus on the rights of women. The new constitution states that among Zimbabwe’s founding values and principles are gender equality and good governance, which includes respect for women’s rights.\(^{14}\)

Chapter 4 of the new Constitution, Part 2, provides for the right to dignity, personal security and freedom from inhuman and degrading treatment and all forms of violence.\(^{15}\) Part 3 further elaborates the rights of children to be protected from any form of abuse. The Constitution has provisions for gender balance in the country, looking specifically at issues around promotion and participation of women in all spheres of Zimbabwian life, on the basis of equality with men. It also provides that the State must put
in place legislation that supports equal representation of both genders in government institutions, and which ensures that women constitute at least half of the membership of all commissions, elected and appointed government bodies. The Constitution requires that the government and agencies make practical efforts to ensure that women have access to resources, and that the state should take positive measures to rectify gender imbalances and discrimination resulting from past practices and policies (Article 80).

The new Constitution also includes a new Chapter Two on National Objectives. The objectives include that the State must take measures for the prevention of domestic violence (article 25 (b)) and ensure that no marriage is entered into without the consent of both parties, equality of rights and duties of spouses during the marriage, and that spouses are given all necessary protection on dissolution of the marriage by death or divorce (article 26). Other objectives related to gender equality include the following:

- The State must facilitate developmental measures which protect and enhance the rights of women, in particular to access equal opportunities in development- article 13 (3).
- An obligation on the State to create employment opportunities for all Zimbabweans, especially women - article 14(2).
- A duty on the State to promote full gender balance in Zimbabwean society - article 17.
- A requirement that female children have to be given the same access as male children to educational opportunities – article 27.

Chapter 12 of the Constitution requires the establishment of a number of independent commissions supporting democracy, including a Gender Commission (Article 245). The functions of the Gender Commission include monitoring, investigating, researching, and advising on gender issues, as well as receiving complaints on such issues (Article 246). Appointments to the Commission were announced in June 2015, and the law establishing it was promulgated in February 2016. Although Commission appointments were announced in mid-2015, at the time of writing it was not yet effectively operational, due to staffing budget restrictions.

As the foundation law of the legal system in Zimbabwe, these constitutional provisions apply to all national legislation and policy, including those relating to SGBV protection and the criminal law, as well as the civil protection system.

16 Ibid. Ss. 245-247.
19 See: ‘Inadequate funding cripples operations of commissions.’ The Independent. January 13, 2017. (States that the Zimbabwe Gender Commission was allocated US$1.1 million); and ‘Staff shortages cripple Gender Commission.’ News Day. February 6, 2017. (Reporting a disclosure by the Parliamentary Portfolio Committee on Gender and Women Development, made while submitting its 2017 National Budget report, that only 4 of the intended 52 staff had been appointed).
2.3 National law and policy on SGBV and gender equality

Zimbabwe has made significant strides in amending and enacting legislation on gender equality and has passed seventeen pieces of legislation to advance this objective in addition to the Constitutional and Gender Commission provisions discussed above. Among others, these include the: Matrimonial Causes Act (1987); Maintenance Act (1999); Administration of Estate Act (1997); Sexual Offences Act (2001), Education Act (2004), Labour Act, [Chapter 28:01]; Criminal Law Act (2006); Domestic Violence Act (2007). The 2004 Public Sector Gender Policy put in place Gender Focal Points in each Ministry and parastatal (statutory) institution, and under the National Gender Policy of 2013, the Ministry of Women Affairs, Gender and Community Development has overall responsibility for promoting gender equality, in governance, education and training, employment, and health, as well as focusing on SGBV protection.  

The two key laws which seek to prevent violence and protect survivors of SGBV are:

- The Domestic Violence Act 2007 (DVA), which provides for protection and relief to victims of domestic violence and long term measures for prevention of domestic violence. In the DVA, domestic violence is defined as: “Any unlawful act, omission or behaviour which results in death or the direct infliction of physical, sexual or mental injury to any complainant by a respondent.” This definition of domestic violence is broad and includes any harmful cultural or customary practices, such as forced virginity testing, female genital mutilation, pledging of women and girls for purposes of appeasing spirits, abduction, child marriages, forced marriages, forced wife-inheritance and other similar practices that discriminate against or degrade women. It is also drafted in gender-neutral terms, recognising that perpetrators or complainants can be either men or women. While the DVA acknowledges multiple forms of domestic violence, there are certain acts of violence that it does not criminalise. For example, Section 4 stipulates that acts of emotional, verbal, psychological and economic abuse do not constitute offences. The DVA recognises and prohibits these as forms of domestic violence, but it does not define them as offences that can be prosecuted under the Act. They are matters that can be heard by customary and local courts for the purpose of issuing protection orders only (Section 18).

- The Sexual Offences Act 2002, now part of the Criminal Law (Codification and Reform) Act of 2006 criminalises marital rape and wilful transmission of HIV. The definition of rape according to the Zimbabwe Criminal Code is limited to rape by men of women and girls. The criminal code also criminalises marital rape and wilful transmission of HIV. Notably, these definitions do not include rape of men, meaning that rape of adult males is not criminalised as a separate offence in Zimbabwean...
law. However, for boys under 16 (as well as girls), there is a separate offence of ‘extra-marital sexual intercourse or immoral or indecent act committed with a young person’, which includes ‘rape, incest, sodomy or indecent assault’.  

Some of the existing legislation is contradictory and still needs to be aligned to the current new Constitution for it to be effective. For example, the Children’s Act states that the age of consent is 16 years yet the new Constitution states that a child below the age of 18 cannot consent to sex and marriage.

The laws addressing broader issues of gender equality include:

- The Administration of Estates Amendment Act of 1997 seeks to protect the property of the deceased for the welfare of the surviving spouse and children.
- The Maintenance Act of 1989 ensures provision of monetary or material support for the upkeep of the spouse, children and other dependents where there is a duty to do so.
- The Matrimonial Causes Act of 1987 ensures equitable distribution of property upon divorce.
- The Legal Age of Majority Act of 1982, now part of the General Laws Amendment Act, gave women all the rights and benefits of full citizens upon reaching the age of 18, and changed the practice of inequality based on race and sex.

SGBV in Zimbabwe is not only addressed through the laws discussed above, but also through policies and strategies that have been adopted in recent years. Of particular note are the National Gender Policy and the National GBV Strategy:

- The National GBV strategy 2012-2015 seeks to improve the efforts of government, civil society and development partners to prevent and respond to GBV through a multi-sectoral, effective and coordinated response. The Strategy is anchored on four Key Result Areas, namely; (a) Prevention (b) Service Provision (c) Research, Documentation, Monitoring & Evaluation and (d) Coordination. Although it uses the term ‘GBV,’ and notes that GBV can also occur against men and boys, the focus of the strategy is on SGBV against women.
- The National Gender Policy 2013-2017 aims to eradicate gender discrimination and inequalities in all spheres of life and development. The policy has eight key priority areas: Gender, Constitutional and Legal Rights; Gender and Economic Empowerment; Gender, Politics and Decision Making; Gender and Health; Gender, Education and Training Gender Based Violence; Gender, Environment and Climate Change Gender, Media and ICT. These are all key priority areas that address equal access of women to services, decision making positions, legal rights, access to economic resources, education and protection services.

---

23 S. 3(1) and 3(3). There is a similar offence relating to ‘intellectually handicapped persons’ s. 3(2).
24 Zimbabwe National Gender Based Violence Strategy 2012-2015
25 Ibid.
26 National Gender Policy- 2013-2017
These laws and policies are useful in guiding the prevention and response to SGBV and also provision of support services for the survivors of SGBV. They are of special importance in times of disasters when cases of SGBV reportedly increase. However, they do not include specific provisions for disaster resilience, and the review did not identify any current processes for disaster contingency planning.

These frameworks also do not currently make any formal connections with the Department of Civil Protection so there is no established mechanism for coordination to ensure these services and complaints mechanisms continue during disasters. However, one institution established by the DVA has the potential to be used as a vehicle for focusing on SGBV in disasters at a national level, the Anti-Domestic Violence Council (established by DVA s.16). The DVA specifies that the Council includes representation from the ZRP, Council of Chiefs, and Ministry of Justice, and makes provision for further representation from churches, CSOs engaged on the issue and any other body or organisation the Minister considers relevant. If the Civil Protection Department, ZRCS and NGOs engaged in SGBV protection were to be invited to join this Council, it could be a useful vehicle for them to support a focus on SGBV in disasters and emergencies. The Council has a very broad national mandate concerning review of the effectiveness of the DVA, public awareness, research, service provisions, safe houses and support services. Based on key informant interviews, it is understood the term of the first Council has expired and the new Council is yet to be appointed. This could provide an opportunity to make important links with the civil protection system, if a new Council is appointed soon.

Regardless of whether its membership is expanded, a newly-appointed Council may wish to access the research and country case studies undertaken by the IFRC and partner national societies, concerning SGBV in disaster situations. These include the 2015 Unseen, Unheard: Gender-based violence in disasters – Global study, as well as the global report from the current project.
Part 3
Implementation of the SGBV protection laws

3.1 Awareness and promulgation

Laws are only effective if they are well known and understood, and if the policies and procedures they establish are available to all in practice. There is a certain level of public understanding of the existing laws on SGBV, especially the Domestic Violence Act (DVA). However, according to a 2013 baseline study on SGBV in Zimbabwe concerning knowledge of the DVA, 50% of women and 43% of men were unaware of the DVA. A lesser proportion of women (44%), but more men (52%), were aware of the protection orders possible under the DVA. Both the focus groups and key informants interviewed for this research noted that there is some understanding at the community level about the existing laws on domestic violence, and that this is a result of awareness campaigns and workshops that have been conducted, mainly by NGOs and police, although these have not been well-resourced, and have not yet extended to many rural areas. Many expressed the view that not enough is being done to raise awareness in the communities. One key informant felt that the use of fliers and written laws was not really effective for people who do not read much. This is a common method for disseminating knowledge about the DVA when resources are so limited, especially in rural areas, but these are also the areas where people might not be able to read well. Another key informant expressed the view that it is the role of the government to ensure that the laws are known, and that if the government takes the lead role in disseminating the laws, the communities will be informed much more effectively. However, other key informants also indicated that, since the introduction of the DVA, there has been an increase in the number of SGBV cases reported, which they attributed to the increase in the knowledge of the law by the women as a result of education about the DVA.

These mixed reports suggest that, even outside the disaster context, many survivors of SGBV will be unaware of the DVA, or how to access support services or make a complaint. Hence, specific awareness campaigns directed to disaster-affected communities are likely to be necessary, factoring in existing lack of awareness and probable additional need during disasters, especially in rural communities.

Consultations for this report also indicated that knowledge of the existence of laws such as the DVA does not directly translate to women accessing the justice system, despite some special mechanisms established to support complainants, as discussed below.
3.2 Access to justice

Role of police

In Zimbabwe, an additional structure of policing has been added with the aim of ensuring that survivors of SGBV have access to justice, by trying to overcome some of the immediate barriers to making complaints. The police Victim Friendly Unit (VFU) was established in 1995. This police department is concerned about cases of violence against women and children, sexual and domestic violence offences. Having started as a pilot project, the Zimbabwe Republic Police (ZRP) reports that every police station in the country now has a VFU.

According to the Judicial Service Commission (2012), the Protocol on the Multi-Sectoral Response to Sexual Abuse and Violence in Zimbabwe outlines several standard guidelines on how VFU service delivery should be conducted. Some of the guidelines include, maintaining privacy, confidentiality and safety of the victim at all times, and treating each case of domestic violence or sexual abuse as priority. The protocol also stipulates that any victim of sexual or domestic abuse has a right to report to any police station in the country.

Among other duties, it is the responsibility of the VFU officer to escort the victim for medical examination, but the VFU officer has no responsibility to disclose the results of the examination to the victim or the family. In accordance with the protocol, the police VFU investigators are responsible for investigation, arrest of offenders, and docket compilation. This framework has proven to be very important in dealing with cases of abuse and ensuring justice for the victims. However, from the key informant interviews, the framework was noted to be weak in that, at times, both victims and perpetrators are interviewed at the same time and this then causes the victim more fear. In some cases, the key informants highlighted that even though the processes of the VFU might start well, sometimes when cases get to court the dockets are lost or cases are withdrawn, and corruption was cited as the major cause of such occurrences.

Additionally, during the focus group discussions, informants suggested there has been a lack of will by police to fully implement laws relating to violence against women. Examples given included: police choosing instead to administer mediatory efforts which at times lead to worse outcomes; or turning away female domestic violence victims, saying their cases should be settled within family circles. In some cases, respondents reported that the police also had an attitude that did not encourage them to follow through their cases, for example, being told that they provoked the perpetrator. They said that such police attitudes discourage women from following through with the cases.

Given its central role and expertise in in normal times, there is also potential for the VFU to be more engaged in the issue of SGBV prevention in disaster contexts, as well as in disaster response mechanisms.
Legal aid

Despite the criminalisation of most forms of SGBV, the stakeholders interviewed for this study noted that women in Zimbabwe still face challenges in applying for protection orders under the DVA, saying that the process is cumbersome and the processing costs may be prohibitive to women without access to financial resources. Also, for illiterate women, the legal language involved may scare them and result in communication problems unless they get legal assistance in completing the forms. Thus, women frequently drop the cases and fail to follow through with the legal procedures.

There is also the challenge of limited access to legal aid for SGFBV survivors. In Zimbabwe, there are organizations like Zimbabwe Women Lawyers’ Association (ZWLA) which offer legal aid to women. However, many women do not know where to get such help, or they live in remote locations where it is not available. The overall resources for legal aid are very limited.

Family and community normalisation of SGBV

Informants and focus group discussants indicated that cultural beliefs within their communities often act as a barrier to reporting SGBV. Focus group participants explained that women often know about the various laws, but when SGBV occurs, it is often normalised, or explained as acts of love by the elderly and “aunts” (older women relatives). For example, the participants described a common belief that “if a man beats you then it means he loves you.” They also said the aunts would often tell women, “That is the way marriages are,” so that, in the end, the women did not report the cases of abuse. Thus, abuse is normalised in many communities, where domestic violence is seen as part of normal gender relations. These beliefs were also reported by key informants at national level, and are not specific to the communities or region where the focus groups were undertaken.  

Family members also play a critical role, in that they try to solve issues of abuse as a family matter and thus the cases often never reach the police. Women in the focus groups said that even some rape cases go unreported, as families agree on a settlement (such as payment through goats and cattle), or even arrange for a child survivor to be married. Others reported there is resistance from some traditional leaders, as in many communities it is culturally acceptable for a man to beat his wife. Thus, in many cases perpetrators are made to pay a fine to the leaders for any case of abuse, and it is settled within the community rather than through the formal justice system.

Women’s socio-economic dependence on men also acts as a challenge to the enforcement of the laws. In many cases women are not empowered enough to earn their own incomes. If the husband abuses them they feel they cannot report him because they depend on him for their well-being. During the focus group discussion in Muzarabani, women noted that the fear of not being able to provide for their children will always act as a barrier for them to seek justice for any abuse they suffer. This is in addition to the

30 For a more extensive explanation, see Tendai Garwe. 2016. ‘Chains that Bind Women to Domestic Violence’. Her Zimbabwe (NGO), 7 December 2016.
Effective law and policy on gender equality and protection from sexual and gender-based violence in disasters

Cultural status that impedes women’s ability to use the protective measures of the law out of fear of family castigation. Women noted that if they report their husbands, they might be chased away from their marital homes, so instead they endure the abuse and never go to report the cases. For the same reasons, many that do report end up withdrawing the cases.

Child marriage

The law states that a child aged 16 cannot consent to marriage and sex, yet female child marriage is reportedly on the increase, especially in the rural areas and during the drought. During the focus group discussions, women noted that even though they know that the girl child is too young, they cannot stop them from getting married because there are other factors like poverty, and the increased food insecurity due to drought, that is forcing parents to allow their children into such marriages. When a girl child is married in this way, parents benefit from the lobola (bride price) that is paid, and this is a source of income to support the parents and siblings.

3.3 Contribution of the laws to prevention and response to SGBV

Despite the existence of the legal framework discussed above, the reported cases of SGBV are still on the rise in Zimbabwe. This increase could be partly explained by greater awareness and use of the legal remedies, but in any event the numbers demonstrate a clear pattern of violence against women. According to the Zimbabwe Demographic Health Survey of 2015, almost half of ever-married women (45 percent) report that they have experienced physical, emotional, or sexual violence from their husband or partner at some point in time. Thirty-two percent of women report that they have experienced emotional violence, 31 percent experienced physical violence, and 13 percent experienced sexual violence. This indicates that having the laws is not enough to prevent SGBV. Rather, it suggests it takes time to change community attitudes and behaviour, and that laws are only one tool in this process.

Behaviour change does not just happen, and having the laws in place does not directly translate into a reduction in the number of cases of SGBV. For such legislation to have the desired impact, it needs to be part of a broader community-based strategy; there is also a need to make greater efforts to educate communities on the laws, especially focusing on local agents of change like the traditional leaders. Government needs to put more resources into ensuring that all citizens are aware of the laws, and to increase understanding and capacity within the police, so that when cases are brought to law, those receiving the complaints will understand the implications of abuse and act according to the laws’ intentions. ZRCS, NGOs and UN Agencies working with communities in Zimbabwe are in a strong position to support community awareness and SGBV prevention in normal times, in preparation for more effective interventions during disasters.
Operational response to SGBV during disasters is guided by the DVA as well as the Child Protection Act. From the key informant’s interviews, it can be noted that there is a general increase in SGBV during disasters and this calls for more active support and implementation of the various Acts. However, as the Civil Protection Act is silent about the response to SGBV, this does not provide an obvious mechanism for coordination on the issue. The SGBV laws address protection issues but, as has been noted, the challenge with these laws lies mainly in their implementation. In as much as the laws exist, they are not linked to disaster response and this leaves a gap in how they are implemented during the times of disasters.

Overall, the case study research indicated that there is a significant legal and policy framework in place to combat SGBV, especially in the form of the DVA, but there remain significant challenges in its implementation in normal times, based on lack of resources and perhaps even more importantly, social attitudes and cultural beliefs about gender roles. This already-strained framework comes under even greater pressure during disasters and emergencies, when complaints of SGBV reportedly rise.

For the laws to be effective, there is need to raise awareness especially amongst the marginalised groups in the rural areas. There is need for Government, ZRCS, NGOs and UN Agencies to help in educating the women, men, traditional leaders and police, so that when people know the laws they are able to report them and have the law take its course. There is a need to shift from having workshops to educate communities on new laws but instead go to the grass roots and use community meetings to educate the communities.

In this case, the role of the ZRCS and NGOs cannot be over-emphasised. There is a need for these local organizations to work together to provide education to the communities, advocate for better methods of disseminating the laws, empower women through education, and advocate for reform of the laws on disaster management and SGBV. Community leaders remain key agents of change, and the ZRCS and local NGOs can continue to play a critical role in ensuring that they are engaged, to ensure that issues of culture are addressed by community leaders.
Part 4
Legal framework for disaster management (civil protection)

The Civil Protection Act (Acts 5/1989, 3/1992, 22/2001) is the main legal framework for disaster management in Zimbabwe. The Act principally establishes a civil protection organization and provides for the operation of civil protection services in times of disaster. It also provides for the establishment of a fund to finance civil protection; and to provide for matters connected with or incidental to the foregoing as well as the declaration of a state of disaster. It does not include any provisions relating to gender equality or SGBV.

Implementation of disaster risk management in Zimbabwe is the mandate of the Department of Civil Protection, which is a national organ housed in the Ministry of Local Government, Public Works and National Housing. The Department was established to carry out the overall coordination of all relevant disaster management stakeholders. The Department is headed by a Director, with a Deputy Director and supporting staff. The current system engages with the existing Government, private, and NGO organisations whose regular activities contain elements of disaster risk prevention and community development, including ZRCS.

Planning for emergencies in Zimbabwe is done at various levels - sectoral level, local authority, district, provincial and National levels. As provided for by the Civil Protection Act, all these levels are required to produce operational emergency preparedness and response plans which they activate during emergencies/disasters. The National Civil Protection Plan forms the overall framework for the promotion, co-ordination and execution of emergency and disaster management in Zimbabwe. The localised plans should feed into the National plan. The plans highlight, among other things, the alert mechanisms/procedures, evacuation procedures, resources available and contact details of focal points. The plans are being used as and when emergencies occur, and different sectors also carry out regular simulation exercises to review the plans in practice. The intention is to review the plans regularly, at least once a year, but in practice this occurs irregularly, due to lack of resources. Simulations are generally undertaken when donor resources are made available, and these exercises often focus on the relevant donor priorities.

The country has engaged in a process to review its civil protection legislation since 1995 in an effort to strengthen disaster risk reduction. This culminated in a Bill for consideration by parliament in 2004, a version of which was also considered at an administrative level in 2011. The major priorities for the Bill for a new Emergency Preparedness and Disaster Management Act included:
• Establishment of an Emergency Preparedness and Disaster Management Authority whose major functions would include developing a risk reduction strategy in order to minimize vulnerability to both natural and manmade/technological hazards

• Establishment of an integrated early warning system for emergencies and disasters,

• Promotion of training and research in matters relating to disasters,

• Integration of disaster risk reduction into all developmental initiatives

• Standardised training for emergency services

• Establishment of a funding mechanism for disaster risk reduction at both the local and national levels.

• Capacitating of local authorities to manage emergencies and disasters at the local level.

The Bill does not propose provisions relating to gender equality or SGBV, but since then the 2013 Constitution has been introduced, with its requirements for gender equality measures. Any new revision would need to take these into account, and could now be done with advice from the Gender Commission. Based on this analysis, under the current law and policy framework for disaster management, there are no specific mandates to support gender equality or for the prevention or response to SGBV. The new Constitutional provisions on gender equality and protection provide an overall mandate for Government, but have not yet been implemented in the civil protection system.
Part 5
Implementation of the Civil Protection law

As noted in the previous sections of this report, the main challenge with the Civil Protection Law in Zimbabwe is that it requires updating because it deals only with disaster preparedness and response. It does not currently include any provisions on gender or SGBV, or have a national policy framework to support any such objectives. The Department of Civil Protection is also a very small department, which would need to be expanded and given more resources if its responsibilities are extended under a new law or policy.

It is important that Zimbabwe develops an integrated approach to disaster risk management. Currently disaster management in Zimbabwe is sector based, and as such each ministry or department focuses on their own particular mandate. For example, the Civil Protection Department is prepared to respond to disasters but is not required to look at the issues that the disaster itself might lead to, such as SGBV. This then makes response less effective. There is a need to bring all the ministries together, including consulting on a new law for disaster management, or new national policies and standard operating procedures. This would provide a good foundation for integrating issues such as gender equality and SGBV protection into disaster management.

A good practice structure has been developed at the operational level, to support coordination in response to SGBV during disasters in Zimbabwe. This is the GBV National Coordination Group - Sub-cluster of the HRP Protection Sector (GBVNCG). The GBV National Coordination Group was established in 2015 with the aim of enhancing coordination of a multi-sectoral response to GBV in Zimbabwe for a 5-year timeframe, from 2016-2020. Participation in the Group is open to all key Ministries, Government institutions, UN Agencies, International NGOs, community based organizations, faith-based organizations actively involved on the development of GBV prevention and response programmes in Zimbabwe, and of course this includes ZRCS. While the cluster mechanism is open to all relevant stakeholders, including the ZRP, it would seem particularly useful to engage the police Victim Friendly Unit in this mechanism.

Within the mandate of the GBVNCG, the GBV Sub-cluster aims to consolidate and coordinate the activities of all relevant stakeholders to improve and support the prevention of and response to GBV in Zimbabwe, especially during disasters. This is based on the expected increase of GBV as consequence of disasters. According to the terms of reference of the sub cluster that were developed in 2016, the GBV sub-cluster aims to consider all types of gender-based violence in its coordination, planning, and advocacy activities, and gives special emphasis to increasing access to holistic services and support to survivors of GBV in all geographical areas.
Part 6
Findings and recommendations

The research conducted for this report has brought to light that in Zimbabwe there are two parallel frameworks of law and policy with formal responsibilities that relate to gender equality in disaster risk management, and SGBV protection in disasters. However, they require strengthening in the following ways to make them more effective in preventing and responding to cases of SGBV, especially in times of disasters.

6.1 Gender and SGBV legislation challenges

Zimbabwe has a strong legal base for gender equality and SGBV protection, but more needs to be done for them to be strengthened in their implementation, in normal times and during disasters.

There are also some gaps. The DVA does not criminalize some forms of SGBV, such as emotional abuse, leaving open only the possibility of a temporary protection order issued by a local court to address certain types of SGBV. Also, there is a need to increase survivors’ access to services and this needs to be provided for by law or formal policy. The relevant laws can also be made more effective by ensuring that the procedures for implementation address the socio-cultural norms that have negated women’s ability to use the protective measures of the law.

This case study concludes that there is a legal framework for SGBV prevention and support in Zimbabwe, during normal times and during disasters, but that implementation is a challenge. This is due to (a) lack of institutional resources, (b) insufficient legal aid for SGBV survivors, and (c) community attitudes of tolerance towards SGBV within families that create social barriers to accessing support services and the justice system. The additional strain placed on this framework during disasters magnifies the existing challenges, and there is no specific mechanism in place to ensure the framework for SGBV prevention and support is disaster-resilient. In slow-onset disasters, such as the impoverishment triggered by a two-year drought in the communities visited, it was also difficult to make a distinction between SGBV issues related to the disaster (loss of family income and livelihoods, insufficient food) and those related to broader cultural attitudes (toleration towards some types of SGBV).

There is a need to intensify current efforts and increase coordination amongst governmental stakeholders, for increased effectiveness of the existing legislation in addressing SGBV in normal times, as well as to
address disaster-resilience of these frameworks. These mechanisms can be even more effective if they incorporate existing non-governmental actors, including ZRCS and NGOs, that provide health and psychosocial support to SGBV survivors, legal services, and humanitarian response in disasters.

6.2 Disaster management challenges

The current Civil Protection Act does not include any objectives relating to gender; it simply establishes an institutional structure for disaster management. It is widely accepted that this disaster management legislation is in great need of revision, and a Government bill has been in various stages of drafting for some years. If this review process is revived, this would be an opportunity to include in the law the issues of gender equality and SGBV in disasters and emergencies, in line with the 2013 Constitution, as well as specific mechanisms for coordination with the Ministry for Women, the Gender Commission and an expanded Anti-Domestic Violence Council (established under the Domestic Violence Act). Even if the law itself is not changed, these types of coordination mechanisms can be instituted by the executive Government and implemented under national policies.

The Civil Protection Act can be made more gender-inclusive by referring to and incorporating existing Constitutional provisions and legislation on gender and SGBV protection, providing a better basis for addressing women’s or gender-based needs when responding to disasters. This can also help to ensure that women are represented in the disaster management institutions at national and local level, especially in decision-making roles.

The 2013 Constitution lays down a strong foundation for the rights of women, as well as for broader gender equality including giving equal roles to women. As such, it requires that all laws, including the Civil Protection Act, be revised and aligned to the provisions of the Constitution. The Civil Protection Act’s current lack of enabling provisions on gender, and its limitation to disaster preparedness and response, does not give direction on how disaster managers should respond to issues of SGBV. The most important thing is not the mainstreaming of gender into disaster management in terms of numbers of staff, but rather making gender a part of disaster management that is covered holistically.

For improved disaster management, the Civil Protection Act also needs to be supported by strategies, policies and plans, which are not currently in place in Zimbabwe. By comparison, neighbouring Malawi has a disaster management plan which lays out how the various clusters such as protection, health, and education are to respond when there are disasters. This is key and can also give direction and ensure that SGBV is addressed when disasters occur. For example, such a plan could institutionalise the role of the Protection Cluster, and the Sub-Cluster GBV National Coordination Group, which engages government, UN, Red Cross, and civil society in planning and implementation of SGBV protection in disaster response.
The civil protection system is pending law reform and does not currently provide resources or institutional mandates to support gender equality and SGBV protection during disasters. Its eventual reform should now also take account of the provisions on gender equality under the new 2013 Constitution. However, there are already policy and administrative mechanisms at the Government’s disposal, which it can use to improve coordination and cooperation on gender and SGBV protection in disasters.

6.3 Good practices for operational integration

There are a range of institutional mechanisms in place that can be used to specifically address SGBV in disasters. These are, firstly, expanding the Anti-Domestic Violence Council established under the Domestic Violence Act. Another, already in operation, is the mechanism under the humanitarian cluster system, where the Humanitarian Response Planning (HRP) Protection Sector Cluster has established the GBV National Coordination Group, which engages government, UN, Red Cross, and civil society in planning and implementation of SGBV protection in disaster response. A third, once it is fully operational, will be the Gender Commission, which has a broad national mandate. Finally, in addition to these specific institutional mechanisms, the Ministry of Women, with current oversight of national gender policy, could play a significant overall coordination and reporting role on improving gender equality and SGBV protection in disasters.

Given the predominance of frequent small-scale and slow-onset disasters in rural Zimbabwe, it is likely that the most effective practical means to reduce SGBV during disasters is to focus on prevention during normal times. A more sustained focus by government, ZRCS, NGOs and UN Agencies on awareness-raising and support services, as part of resilience-building and disaster risk reduction in disaster-prone communities, would be a key SGBV prevention strategy for these types of disasters that place constant economic stresses on communities (and which reportedly lead to increased domestic violence and child marriage). Such programmes can both educate communities and facilitate better access to the existing support services and the justice system for survivors of SGBV. They may need also to focus on raising awareness through police training, and to target traditional leaders because of their key role in leading cultural norms at local level. An important link between general community awareness-raising on SGBV and disaster preparedness could also be provided through the community work of the ZRP’s Victim Friendly Unit. Such a community awareness base would facilitate add-on operational responses during sudden-onset disasters such as floods, for example, mobile support services for displaced communities and additional awareness-raising for the disaster-affected communities.
6.4 Recommendations

There is practical potential to improve the disaster resilience of the SGBV protection framework.

The report recommends that:

1. The Government uses its legislative discretion under the Domestic Violence Act, to expand the membership of the Anti-Domestic Violence Council, to increase awareness of the need for family support services for SGBV prevention and access to justice during disasters, including slow-onset disasters triggered by drought. The DVA already specifies that the Council includes representation from the ZRP, Council of Chiefs, and Ministry of Justice, and makes provision for further representation from churches, CSOs engaged on the issue and any other body or organisation the Minister considers relevant. If the Civil Protection Department, ZRCS and NGOs engaged in SGBV protection were to be invited to join this Council, it could be a useful vehicle for them to support a focus on SGBV in disasters and emergencies.

2. In the medium to long term, the Government includes in an eventual revision of the Civil Protection Law, both an institutional mandate and provision for resources to address gender equality in disaster risk management, including for participation of women and SGBV prevention and protection.

3. In the short to medium term, the Government proceeds, through administrative and policy-making mechanisms, to improve coordination on gender equality and SGBV protection within the disaster management system by:
   a. Ensuring significant representation of women on all committees and councils within the disaster management system at national and local levels, moving progressively to at least 30% women (consistent with the gender equality provisions in the 2013 Constitution, the National Gender Policy and SADC regional targets of women in governance);
   b. Including in key advisory bodies within the disaster management system, representation of the Gender Commission, the Women’s Ministry, ZRCS, relevant NGOs, and women’s legal organisations and experts, to increase the focus and understanding on gender equality and SGBV protection in disaster preparedness and response;
   c. Formalising the role of the Protection Cluster, and especially the Gender Based Violence (GBV) National Coordination Group (Sub-cluster of the Humanitarian Response Planning (HRP) Protection Sector Cluster), as a key forum for Government agencies – especially the ZRP Victim Friendly Unit - ZRCS and NGOs to participate actively with UN Agencies in (i) preparedness for SGBV prevention and protection during disasters, and (ii) coordination on SGBV during disaster response and recovery operations.
4. Government agencies, including the Women’s Ministry, health and welfare services, and the ZRP Victim Friendly Unit, along with ZRCS, NGOs and UN Agencies, make a higher priority of community awareness-raising and support services on SGBV during normal times, to create a more solid community base for SGBV prevention and protection during disasters and disaster recovery. This should also extend to building capacity amongst traditional leaders and local police. Given the reported wide tolerance of domestic violence and child marriage, and the increase in both during disasters, this strategy would help to address the cultural barriers to accessing support and justice on SGBV, focusing on prevention through working with communities, especially in rural areas.
References

**Legislation**


Children’s Act Chapter 5:06. 2001.


Constitution of Zimbabwe Amendment (No, 20) 2013.


Gender Based Violence Act 14, 2006.

**Policy**


**Secondary sources**


List of organizations and focus group communities interviewed

Organizations

Adult Rape Clinic Parirenyatwa Group of Hospitals
Girls and women empowerment network (GWEN)
International Organization for Migration (IOM)
United Nations Population Fund (UNFPA)
Zimbabwe Department of Civil Protection Unit
Zimbabwe Department of Social Welfare
Zimbabwe Red Cross Society
Zimbabwe Women’s lawyers Association

Focus groups

| Focus group discussions (2 groups) | Group 1 were women community leaders identified and invited by ZRCS from a number of villages in Dambakurima Ward. Group 2 were local women volunteers in the ZRCS Community Based Health and First Aid Programme working throughout the Muzarabani District. | Location: Muzarabani district Dambakurima Ward (the smallest local government area) is a rural area in Northern Zimbabwe, in the Zambezi River floodplain, which experiences floods and droughts. At the time of the study, communities were affected by a 2-year drought. |
The Fundamental Principles of the International Red Cross and Red Crescent Movement

Humanity / The International Red Cross and Red Crescent Movement, born of a desire to bring assistance without discrimination to the wounded on the battlefield, endeavours, in its international and national capacity, to prevent and alleviate human suffering wherever it may be found. Its purpose is to protect life and health and to ensure respect for the human being. It promotes mutual understanding, friendship, cooperation and lasting peace amongst all peoples.

Impartiality / It makes no discrimination as to nationality, race, religious beliefs, class or political opinions. It endeavours to relieve the suffering of individuals, being guided solely by their needs, and to give priority to the most urgent cases of distress.

Neutrality / In order to enjoy the confidence of all, the Movement may not take sides in hostilities or engage at any time in controversies of a political, racial, religious or ideological nature.

Independence / The Movement is independent. The National Societies, while auxiliaries in the humanitarian services of their governments and subject to the laws of their respective countries, must always maintain their autonomy so that they may be able at all times to act in accordance with the principles of the Movement.

Voluntary service / It is a voluntary relief movement not prompted in any manner by desire for gain.

Unity / There can be only one Red Cross or Red Crescent Society in any one country. It must be open to all. It must carry on its humanitarian work throughout its territory.

Universality / The International Red Cross and Red Crescent Movement, in which all societies have equal status and share equal responsibilities and duties in helping each other, is worldwide.