







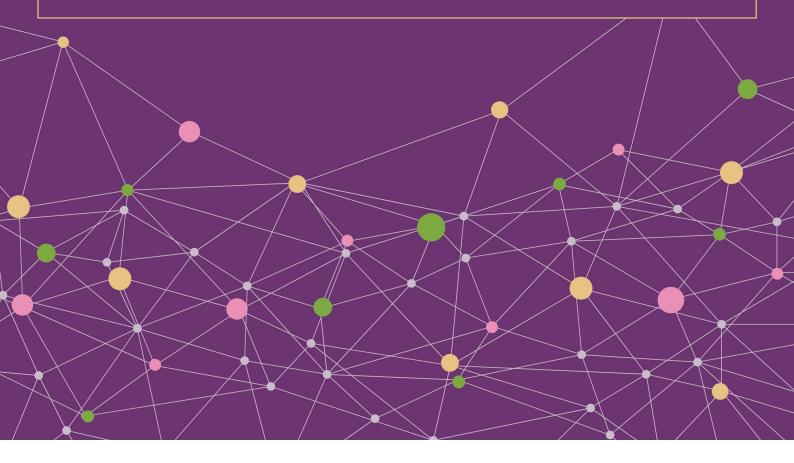
REPORT

SOUTHERN AFRICA REGIONAL CONFERENCE

Advancing Data and Evidence for GBV Prevention and SRHR in Southern Africa

6 - 7 March 2024

Johannesburg, South Africa



In collaboration with:



Ford Foundation









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DWYPD Department of Women, Youth, and Persons with Disabilities

DHS Demographic and Health Surveys

EU European Union

GBV Gender-Based Violence

GIZ Deutsche Gesellschaft für Internationale Zusammenarbeit GmbH

HMIS Health Management Information System

ICPD International Conference on Population and Development Programme of Action

M&E Monitoring and Evaluation

NGO Non-Governmental Organization

PfP II Partnerships for Prevention of Gender-Based Violence in Southern Africa

RSA Republic of South Africa

SADC Southern African Development Community

SDGs Sustainable Development Goals

SRHR Sexual and Reproductive Health and Rights

SVRI Sexual Violence Research Initiative

UN United Nations

UNFPA United Nations Population Fund

UN Women United Nations Entity for Gender Equality and the Empowerment of Women

VAWG Violence Against Women and Girls



EXECUTIVE SUMMARY

The Regional Gender-Based Violence (GBV) Prevention Conference themed "Advancing Data and Evidence for GBV Prevention and SRHR in Southern Africa" was convened on 6 and 7 March 2024 in Johannesburg, South Africa. Co-hosted by the Southern African Development Community (SADC) Secretariat and the Deutsche Gesellschaft für Internationale Zusammenarbeit GmbH (GIZ) through its regional programme "Partnerships for Prevention of Gender-Based Violence in Southern Africa" (PfP II), in collaboration with the European Union, Ford Foundation, Sweden, and the Sexual Violence Research Initiative (SVRI). The conference brought together 177 participants from all 16 SADC Member States representing various sectors, including government, civil society, development partners, and researchers.

The conference aimed to foster collaboration among stakeholders, explore innovative data-driven and evidence-based approaches for GBV prevention, address challenges in data collection and usage, and provide recommendations to enhance GBV prevention in the region with high-quality data and evidence. Central to discussions was the scarcity of reliable data on GBV and sexual and reproductive health and rights (SRHR), underscoring the necessity for increased investment in research to inform policy and GBV prevention interventions.

Distinguished delegates including, the Minister of Social Development and the Minister in the Presidency for Women, Youth, and Persons with Disabilities from South Africa, the Executive Secretary of the SADC Secretariat, the Ambassador of Sweden to South Africa, and representatives from the EU delegation in SADC/Botswana and the German Embassy in South Africa, delivered key statements. Their contributions resonated with urgency as they shed light on the pervasive issue of GBV in the region, emphasizing the critical role of data and evidence in informing effective interventions. They articulated the pressing need for collaborative action and highlighted the indispensable role of such regional conferences in tackling this crucial topic. Importantly, they underscored the indispensable role of regional cooperation in spearheading comprehensive efforts for GBV prevention and the promotion of SRHR.

The conference agenda featured diverse exchange formats, including presentations on the importance of data and evidence in GBV prevention, panel discussions on understanding GBV in the region, and workshops on improving data collection and analysis methods. Additionally, evidence-based interventions and best practices for preventing GBV and promoting SRHR were showcased.

Key recommendations focused on harmonizing data collection mechanisms, leveraging digital technologies for improved data collection, and enhancing multi-sectoral monitoring and evaluation systems. These recommendations provide a roadmap for collective action and ongoing dialogue among stakeholders on the prevention of GBV, advancing gender equality, and promoting SRHR in the region.

1.INTRODUCTION

1.1 Background and Purpose

Gender-based violence stands as one of the most severe and widespread human rights violations, robbing women and girls of their fundamental freedoms and hindering their ability to reach their full potential. Rooted in deeply entrenched patriarchal gender roles and stereotypes within Southern African societies, GBV serves both as a consequence and a tool to perpetuate unequal power relations, a grim reality that has been widely accepted and normalized. The intersection of GBV with patriarchal norms and power dynamics also intertwines with issues of SRHR. In many cases, survivors of GBV face barriers to access comprehensive SRHR services, exacerbating the impacts of violence and limiting their ability to make autonomous decisions about their bodies and health.

At regional level, SADC has taken steps to address GBV through policy frameworks such as the Protocol on Gender and Development, initially adopted in 2008 and revised in 2016 to align with the Sustainable Development Goals (SDGs). The development of the SADC Regional Strategy and Framework of Action for Addressing Gender Based Violence (2018-2030) emphasizes the need for effective and coordinated approaches to GBV prevention and mitigation programs. Additionally, the Strategy for Sexual and Reproductive Health and Rights in the SADC Region (2019 – 2030) provides policy and programming framework for member states to accelerate the attainment of SRHR for all people living in SADC. However, these efforts have been hampered by challenges such as insufficiently disaggregated data and weak data collection systems, which hinder the monitoring and evaluation of GBV interventions in the region. SADC Member States and partners have remained committed to eradicating GBV through coordinated action which is crucial to strengthening prevention efforts and maximizing the impact of policies and programs aimed at addressing this issue.

To support these efforts, the SADC Secretariat and GIZ, through its regional programme "Partnerships for Prevention of Gender-Based Violence in Southern Africa", organized two regional conferences on GBV prevention, one in 2019 and the latest one in 2024. The first conference, held in 2019, brought together over 200 participants from 14 SADC member states and various key sectors to exchange experiences and explore ways to *implement effective and promising best practices to address GBV*. It also highlighted the need for a better understanding of GBV in all its dimensions and implications, currently hampered by fragmented data collection mechanisms, insufficient resources, and discrepancies in monitoring systems. The second and most recent conference, held in Johannesburg on March 6th and 7th 2024, built on the momentum of the 2019 experience and it was held under the theme: "Advancing Data and Evidence for GBV Prevention and SRHR in Southern Africa".

This conference also served to address the intersectionality of GBV and SRHR and promoting a more equitable and just society where all individuals can thrive free from violence and discrimination.

1.2 Conference Objectives

The 2024 regional conference aimed to deepen understanding and application of data and evidence in preventing GBV and promoting SRHR across the region through providing a platform for sharing knowledge, experiences, and innovative solutions.

The conference was held with the following objectives:

- · To provide a platform to foster collaboration and knowledge exchange among stakeholders involved in GBV prevention and related matters within the SADC region on best practices and lessons learnt in using data and evidence for GBV prevention and promotion of SRHR.
- To share the latest updates on innovative approaches, best practices, and research findings on data-driven strategies, evidence, and practice-based learning for GBV prevention and the promotion of SRHR.
- · To identify gaps, challenges, and opportunities in data collection, analysis, and utilization for GBV prevention and the promotion of SRHR.
- To map out the roles and responsibilities of various actors in producing and using data
- To develop recommendations/ key actions at regional level for leveraging data and evidence to enhance GBV prevention efforts and the promotion of SRHR in the region.



2.CONFERENCE OVERVIEW

The two-day conference attracted 177 participants from all 16 SADC Member States representing various sectors, including government, civil society, development partners, and researchers. The conference featured plenary, breakaway, and working group sessions of in-depth discussions and knowledge-sharing, moderated by experts and leading players in the sector. Interpretation services were used to accommodate the 3 SADC official languages (English, French, and Portuguese).

The conference's interactive, multi-sectoral approach enabled discussions on challenges and best practices around the collection and availability of data and evidence on GBV and SRHR, while also identifying strategies for enhancing integration and data collection.

2.1 Official Opening and Laying the Foundation

The following speakers featured in the official opening session of the Conference:



Ms. Lindiwe ZuluMinister of Social Development,
South Africa



H.E. Elias M. Magosi Executive Secretary, SADC Secretariat



Ambassador Mr. Håkan Juholt Sweden Embassy, South Africa, Namibia and Lesotho



Mr. Clément Boutillier Head of Cooperation, EU Delegation, Botswana



Mr. Fabian KyrieleisHead of Cooperation, German
Embassy, South Africa



Discussion Summary

The opening speeches by the high-level delegation and the official opening remarks by the Minister for Social Development of the Republic of South Africa (RSA) served as a foundation to navigate the intricacies of GBV prevention in the region, while additionally dissecting the regional and international instruments, challenges and opportunities. The statements highlighted the need to address the scourge of GBV in the region and globally as well as the importance of reliable data for program development, policy-making, and political accountability in the sector, while also exposing the limitations in data collection and reporting mechanisms. The need for robust data collection, harmonization, and integrated systems was mentioned across the different statements.

The speeches also emphasized the critical role of strong partnerships to tackle structural disparities and power imbalances, advocating for equitable societies across various sectors and levels of governance. Additionally, they underscored the importance of investing in research to inform future policies, planning, and initiatives aimed at addressing GBV and SRHR as well as of closely monitoring implementation to ensure the effectiveness and impact of preventive measures.

The speech of the Minister of Social Development (RSA), Ms. Lindiwe Zulu, focused especially on the need for investment in GBV prevention, the promotion of SRHR, and research. She further called for accountability, coordination, and leadership across all sectors in addressing GBV in the region.

In laying the foundation for the conference, Ms. Begoña Castro Vázquez, programme manager of PfP emphasized the importance of investing in GBV and SRHR initiatives and stressed the need for a comprehensive approach to data collection and evidence gathering. She further highlighted the importance of enhanced coordination and information exchange at the regional level, reaffirming the commitment of the German Development Cooperation to this cause. This commitment reflects a shared dedication to making tangible progress in preventing GBV and promoting SRHR in the SADC region.



Key Actions

- To provide a platform to foster collaboration and knowledge exchange among stakeholders involved in GBV prevention and related matters within the SADC region on best practices and lessons learnt in using data and evidence for GBV prevention and promotion of SRHR.
- To share the latest updates on innovative approaches, best practices, and research findings on datadriven strategies, evidence, and practice-based learning for GBV prevention and the promotion of SRHR.
- To identify gaps, challenges, and opportunities in data collection, analysis, and utilization for GBV prevention and the promotion of SRHR.
- To map out the roles and responsibilities of various actors in producing and using data
- To develop recommendations/ key actions at regional level for leveraging data and evidence to enhance GBV prevention efforts and the promotion of SRHR in the region.

2.2 The Importance of Data and Evidence for GBV **Prevention and Promoting SRHR?**



PRESENTER:

Ms. Liz Dartnall – Executive Director, Sexual Violence Research Initiative (SVRI)

In setting the scene for the conference, Liz Dartnall explored the significance of data and evidence in preventing GBV and promoting SRHR, the current challenges, ethical data standards, evidence gaps, and the need for understanding the interlinkages between GBV and SRHR. It highlighted the global prevalence of GBV as a dramatic reality, with one in three women experiencing physical or sexual violence in their lifetime. Additionally, the presentation emphasized the devastating impact of GBV on individuals, families, communities, and economies, stressing that the costs associated with GBV are alarmingly high.

Despite the significant social and economic costs of GBV, there is a glaring disparity in funding for prevention and research efforts. It was highlighted that only a small fraction of overseas development aid is directed towards GBV response and prevention, indicating a critical need for increased investment in evidence-based interventions. The presentation underscored the importance of addressing knowledge gaps through research to better understand the drivers of GBV and to identify effective prevention strategies.

Liz Dartnall also highlighted successful programs, like the Bandebereho Initiative in Rwanda which focuses on combating violence against women and children, enhancing maternal health-seeking behavior, and nurturing positive couple relations. The program has shown promising outcomes for GBV prevention, by reducing intimate partner violence and fostering healthier relationships. Examples shared highlighted the potential impact of evidence-based interventions when properly implemented and evaluated. Examples shared highlighted the potential impact of evidence-based interventions when properly implemented and evaluated. Examples shared highlighted the potential impact of evidence-based interventions when properly implemented and evaluated.

Below are some of the key insights from the presentation:

- Globally, GBV remains a significant issue, with one in three women experiencing physical or sexual violence in their lifetime, and the profound impacts extend across generations.
- The cost of GBV to countries is immense, underscoring the urgent need for effective prevention and response strategies.
- Despite the magnitude of the problem, investments in GBV prevention programs remain disproportionately low, with a small fraction of development aid directed towards GBV response and prevention, highlighting a critical gap in resource allocation.
- Existing research has provided valuable insights into the drivers of violence and identified promising interventions to prevent GBV, but significant gaps remain in understanding long-term effectiveness, scalability, and integration into larger development programs.
- · Collaborative efforts are essential for expanding the body of evidence and addressing these gaps, emphasizing the importance of co-creation, collaboration, and shared research agendas.
- · Integration of GBV prevention into SRHR is key but requires further research to ensure effectiveness and ethical implementation.
- · Advocacy for increased and ethical funding, building on shared research agendas, and fostering collaborative partnerships are crucial for advancing evidence-building efforts and effectively addressing GBV at scale.

2.3 Understanding GBV in the Southern Africa Region with a focus on Data and Evidence



FACILITATOR:

Ms. Lina Digolo – Prevention Collaborative

Panelists:

- Professor Olive Shisana Special Advisor to the President on Social Policy, and President of Evidence-Based Solutions, South Africa
- Dr. Chi-Chi Undie Technical Director and Senior Research Associate, Population Council, Kenya
- Ms. Lusungu Kalanga Gender-Based Violence Regional Advocacy Lead (Southern and East Africa), Global WhatWorks to Prevent VAWG Program, Malawi
- Ms. Kelly Dambuza –Gender Unit, SADC Secretariat
- Dr. Kumboneki Lamboly Social and Human Development Directorate, SADC Secretariat



Discussion Summary

The panel delved into the indispensable role of data and evidence in addressing GBV and promoting SRHR in the region. They emphasized the crucial role of data in guiding policy decisions, resource allocation, and evidencebased strategies for GBV prevention and response. Integrating evidence from diverse sources is essential for a comprehensive approach that tackles interconnected issues of GBV and SRHR. By incorporating GBV into SRHR frameworks, policymakers and practitioners can optimize resource utilization and address the root causes of GBV within a broader reproductive health context. Challenges in data collection, including discrepancies in definitions and lack of disaggregation, were highlighted, underscoring the need for capacity-building initiatives and regional coordination efforts to enhance data quality and analysis. This emphasis on disaggregation of data and intersectionality ensures inclusivity in addressing GBV.

Key Insights and Messages:

- Data plays a crucial role in understanding GBV trends and informing policy decisions for both GBV prevention
- Data assists in setting priorities, allocating resources effectively, and guiding policy decisions at both regional and national levels.
- Disaggregated data reveals the disproportionate impact of GBV on marginalized groups, necessitating tailored interventions and addressing intersectional issues.
- · Robust data systems drive evidence-based policymaking, accountability mechanisms, and regional advocacy efforts, facilitating progress tracking and resource allocation.
- Integrating GBV into SRHR frameworks allows for a holistic approach to addressing both issues comprehensively.
- Long-term investments in data-sharing systems and knowledge management are essential for sustainable impact.

- Challenges such as discrepancies in data collection methods and limited data analysis hinder comprehensive understanding and effective interventions.
- Capacity-building initiatives are crucial for enhancing data collection methods, standardizing practices, and improving collaboration among stakeholders.
- · Data influences policy formulation and revision, leading to the development of strategies, legislation, and monitoring frameworks to address GBV and promote SRHR effectively.
- · Enhanced coordination between regional and national frameworks and policies is necessary for comprehensive GBV prevention and SRHR promotion.

2.4 Parallel Workshops: Improving GBV and SRHR Data Collection

This section featured four parallel workshops in the form of breakaway sessions focusing on insights and measures to improve GBV and SRHR data collection. The workshops' participatory approach enabled discussions on linkages and referral systems, multi-stakeholder coordination, data integration, and understanding of existing data for GBV and SRHR prevention strategies.

Topic 1: Linkages and referral systems: Multi-stakeholder coordination and data integration

Facilitator: Ms. Grace Bulenzi-Gulere – Program Specialist, Gender Statistics UN Women, Uganda

The session highlighted the importance of multi-stakeholder coordination and data integration in strengthening linkages and referral systems for GBV prevention and SRHR within the region.



Key insights:

- Collaboration among stakeholders is essential for effective GBV prevention and SRHR initiatives.
- Establishing clear referral pathways between sectors involved in GBV prevention and SRHR, such as health, justice, social services, and education, is necessary.
- Mapping data flows helps identify intersections and gaps for more integrated approaches.
- · Capacity-building initiatives are vital for enhancing data management skills among stakeholders.

Topic 2: *M&E*, data collection and analysis

Facilitator: Mr. Lehlohonolo Takalimane – Senior statistician, Head of Gender and Health Section Bureau of Statistics, Lesotho

The session explored the significance of monitoring and evaluation (M&E) data collection and analysis in GBV and SRHR programs, focusing on understanding the types of data collected, methods of analysis, and strategies for utilizing M&E findings to enhance program effectiveness. The session explored the critical role of M&E data in informing evidence-based decision-making and programmatic improvements in GBV and SRHR programs.

This session featured a presentation by the Namibia National Statistics Agency showcasing a national tool for collecting relevant data.

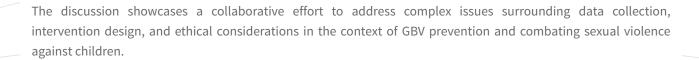
Key insights:

- · Gaps in national statistics and collection frequency are widely acknowledged. These significantly impact and constrain programming efforts.
- Programming relies on data collected at the national level, often via surveys like the demographic health survey, but these are conducted infrequently, typically every five years or more.
- The national tool introduced by the Namibia statistical agency is seen as a valuable resource for SADC member states, albeit with a learning curve.
- · Engaging with existing data is crucial to prevent working with outdated information, which could impede effective programming initiatives.

Topic 3: Examining existing research data for GBV and SRHR

Facilitator: Ms. Caroline Gatwiri Mutwiri – Senior Officer, National Bureau of Statistics, Kenya

The session examined existing research data related to GBV and SRHR, providing participants with insights into available datasets, methodologies, and key findings to inform programmatic and policy efforts in the field of GBV and SRHR. The session addressed the importance of research data in informing GBV and SRHR interventions as well as the need to explore the breadth and depth of data already available.



Key insights:

- Utilizing available data and fostering innovation are crucial for effective GBV prevention strategies.
- Partnerships and collaboration, particularly with institutions like health facilities and community organizations, are essential for addressing issues such as sexual violence against children effectively. By working together, access to resources, expertise, and referral networks can be ensured, leading to more comprehensive and impactful interventions.
- · Ethical considerations, especially regarding the potential harm caused by research interventions, are crucial. It is essential to carefully weigh the impact of research activities to ensure they do not inadvertently cause harm to participants or communities involved.
- · Addressing challenges in data collection, especially when targeting vulnerable populations like children, necessitates innovative approaches and strong partnerships to ensure comprehensive data collection.

Topic 4: Integrating SRHR Data for Effective GBV Prevention

Facilitator: Dr. Kumboneki Lamboly – Head of HIV Unit, Social and Human Development Directorate, SADC Secretariat

The session explored the integration of SRHR data into GBV prevention efforts, focusing on effective data collection methods, utilization strategies, and their implications for programming. The SADC SRHR Scorecard was showcased as a high-level accountability tool to measure the progress against implementation of the SADC SRHR Strategy by the member states.

Key insights:

- Lack of standardized GBV data collection tools creates complexity in monitoring GBV cases.
- It is important to utilize existing multiple sources of data like health records, HMIS, DHS, and police records, but harmonization should be emphasized.
- Urgent need to align national and regional policies to streamline healthcare responses to GBV cases.
- NGOs play a significant role in complementing national data systems, especially in areas with limited infrastructure.
- · Indicators should become more inclusive, capturing also emotional, mental, and psychological aspects of GBV for a holistic understanding.
- Integration of GBV screening into routine reproductive health services would contribute to combating stigma and improving early detection.
- · Targeted training and support for healthcare workers is necessary to effectively address the complex nature of GBV cases and how to report on them for M&E purposes.



Evidence for GBV Prevention in the Region and Integrated Approaches to GBV and SRHR

This section explored the existing evidence and interventions that have been proven to work for effective GBV prevention and for promoting an integrated approach to SRHR and GBV.

Presentation 1: Evidence for GBV Prevention in the region

Presenter: Dr. Lina Digolo – Prevention Collaborative

The presentation focused on evidence-based interventions for preventing GBV in the SADC region, particularly emphasizing primary prevention. It outlined the definitions of primary, secondary, and tertiary prevention and highlighted the importance of addressing root causes to prevent violence before it starts. The Handbook to Promote Effective GBV Prevention Initiatives in the SADC Region was referred to for guidance on effective interventions, discussing the challenges of underreporting, the limitations of relying solely on administrative data while advocating for population-level surveys to capture a more accurate picture of GBV prevalence.

Key insights from the presentation:

- · Addressing intimate partner violence and sexual violence is crucial, supported by available research, while recognizing the importance of addressing all forms of violence.
- GBV prevention cannot rely solely on administrative data. Population-level surveys are key to capturing a more accurate picture of GBV prevalence to inform prevention interventions.
- GBV is preventable as proved by numerous studies and frameworks.
- Successful programs demonstrate the reduction of GBV risk factors, providing hope for effective intervention in shorter timeframes.

- Interventions are adaptable across different contexts and can be scaled for broader impact.
- · Some of the strategies/interventions that have proven to work include economic empowerment initiatives, couple-based interventions, and community mobilization programs.
- · Certain elements, like awareness creation alone and short-term training programs, do not effectively contribute to primary prevention.

Presentation 2: Promoting an Integrated Approach to SRHR and GBV

Presenter: Mr. Richard Delate – Program Manager, 2gether4SRHR, UNFPA

The presentation highlighted the efforts of UNFPA program Together for SRHR (2gether4SRHR) in East and Southern Africa, emphasizing partnerships to promote SRHR. It outlined a theoretical framework focusing on creating enabling legal and policy environments, increasing access to SRHR services, addressing gender and social norms, and building health system resilience. Key frameworks and mechanisms such as the Lancet Guttmacher Commission on SRHR and the ICPD Program of Action were discussed alongside integration models and approaches. Data from research studies revealed gaps in policy inclusion, persistent gender norms, and climate change's impact on intimate partner violence. Recommendations included enhancing access to services in humanitarian settings and engaging men and boys comprehensively. The presentation stressed that a multifaceted approach is required to advance SRHR, encompassing policy advocacy, integrated service delivery, community engagement, and evidence-based action.

Key insights from the presentation:

- Theory of Change for SRHR emphasizes the importance of creating an enabling legal and policy environment to improve access to quality, people centered SRHR services.
- Integration of SRHR services is crucial for comprehensive care, addressing gender norms, and building health system resilience.
- · Key frameworks like the ICPD Program of Action and the Lancet Guttmacher Commission on SRHR provide foundations for advocacy and programming on SRHR.
- · Different integration models, like kiosk and primary healthcare approaches, offer insights into effective service delivery strategies.
- · Community engagement including engaging of healthcare workers, men and boys as partners are essential for delivering integrated SRHR services and addressing GBV.
- · Conducting impact studies is important as research findings highlight gaps in policy, service delivery, and data collection. They also provide recommendations for action including disaster planning and supply chain management improvements.
- · Translating research into action through national roadmaps and funding ensures tangible improvements in SRHR outcomes.



Evidence and Practice-Based Learning for Improving GBV and SRHR Information Systems

Facilitators:

- Ms. Tatenda Masuku Technical Advisor, GIZ
- Ms. Nkeletseng Tsetsane Founder, MB Teen Lifestyle

Discussion Summary

The session sought to highlight best practices, evidence-based strategies, and practical insights for preventing GBV and promoting SRHR. Presenters shared strategies and best practices for engaging various groups in GBV prevention initiatives and the promotion of SRHR, highlighting the following:

- · Evidence-based practices, partnerships, and community engagement strategies that have contributed to the success of the initiatives.
- Lessons learned and key challenges encountered.
- Strategies for scaling up and sustainability.

The session featured presentations on engaging religious and traditional leaders in GBV prevention, school-based GBV prevention interventions, the role of men and boys in violence prevention, and the involvement of the private sector in addressing GBV and SRHR issues.

Key insights:

- Effective GBV prevention requires collaboration and partnerships across sectors, including government, NGOs, private sector, and communities. The involvement of diverse stakeholders ensures comprehensive approaches that address the complex nature of violence.
- Investments in capacity building should be prioritized to effectively address the root causes of GBV.
- Recognizing the unique contexts in which violence occurs is crucial. Interventions need to be tailored to specific settings to effectively address the underlying causes of GBV, whether it is schools, workplaces, or traditional communities.
- Utilizing data, evidence, and participatory methodologies enhances the development and implementation of violence prevention programs. Human-centered design and co-creation processes ensure that interventions are relevant, responsive, and impactful.
- Engaging men and boys as allies in GBV prevention is essential to challenge traditional gender norms and encourage men to take an active role in parenting and caregiving, contributing to more equitable and violence-free societies.
- · Fostering partnerships with the private sector is key to leveraging their expertise and resources in GBV prevention initiatives, ensuring comprehensive and sustainable solutions.
- · Promoting collaboration across sectors to develop holistic approaches to GBV prevention, integrating efforts from education, health, and community development sectors is key.
- Empowering young people as leaders and advocates instils a sense of responsibility and ownership in preventing GBV, driving meaningful change within communities and schools.



3. RECOMMENDATIONS FOR ACTION

The conference culminated in reflections on the rich discussions and diverse perspectives exchanged throughout the two-day event, yielding key recommendations and takeaways. Deliberations during the conference delved into critical areas, including the reinforcement of partnerships for the integration of GBV and SRHR, harmonizing methodologies for data collection, contextualizing global frameworks, amplifying effective interventions, and fostering evidence and best practice learning. The overarching objective of these deliberations has been to chart a path towards more impactful, evidence-based strategies capable of addressing the multifaceted challenges of GBV and SRHR in a comprehensive manner.

Presented below is a summary of the key takeaways and recommendations derived from these discussions, intended to guide policy, programming, and practice in advancing the agenda of GBV prevention and SRHR promotion with a specific emphasis on data and evidence generation in the SADC region.



Key takeaways and recommendations

- Strengthening partnerships for GBV prevention and integration with SRHR:
- Emphasize collaboration among stakeholders to integrate efforts for GBV prevention and SRHR promotion.
- Invest in prevention efforts including a focus on education, community mobilization, and behavioral
- Establish platforms for sharing information and resources on effective GBV prevention initiatives at both national and regional levels.
- Foster a culture of cooperation over competition to maximize impact and minimize duplication of
- Engage development partners and funders in dialogue to align priorities and investments with local contexts and needs.
- II Harmonizing data collection methodologies:
 - Enhance existing data systems and explore integrated software or management systems for GBV data collection to improve data comparability across countries while addressing legal, regulatory, and technological issues.
 - Coordinate GBV data collection efforts to synthesize and share data effectively.
 - Develop standardized approaches for data collection while acknowledging the importance of contextual relevance.



- Invest in national surveys and research to address data gaps and inform evidence-based GBV interventions.
- Prioritize the collection of qualitative and quantitative data to provide comprehensive insights into GBV and SRHR dynamics.
- Engagement with national statistics institutions to develop gender and GBV statistics.

Translating global frameworks into local contexts:

- Adapt global frameworks and guidelines to suit local contexts and realities.
- Facilitate capacity building to empower community development workers with the knowledge and tools to implement evidence-based GBV interventions.
- Create platforms for dialogue between policymakers, practitioners, and communities to ensure the relevance and effectiveness of interventions.

Scaling up effective interventions:

- Prioritize scalable interventions to ensure effective and sustainable outcomes in addressing GBV, considering associated risks and context.
- Ensure quality and sustainability in scaling up interventions, prioritizing the well-being of those delivering and receiving services.
- Foster a culture of learning from both successes and failures to inform future interventions and avoid the replication of ineffective GBV prevention approaches.
- Advocate for increased investment in prevention efforts, recognizing the long-term impact and costeffectiveness of early interventions.



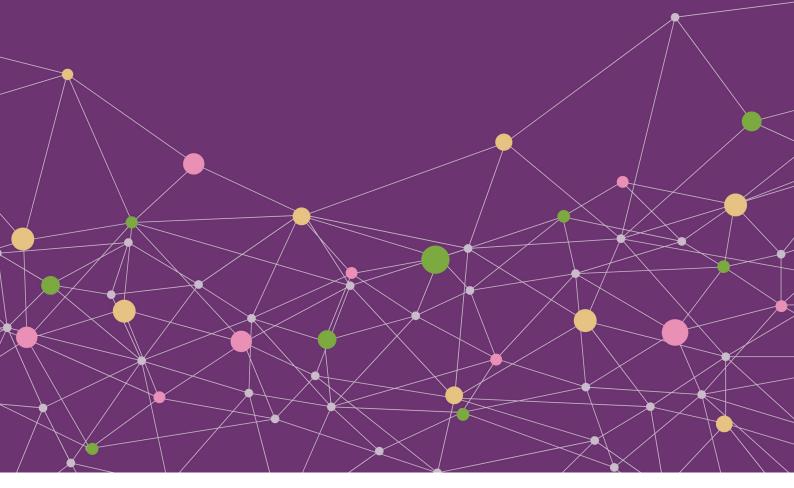
4. CLOSING OF CONFERENCE

As part of the conference closing, the SADC Secretariat represented by Ms. Kelly Dambuza highlighted SADC's commitment to take forward the recommendations developed at the conference, noting the need to strengthen information sharing platforms, to promote implementation of evidence-informed GBV prevention initiatives, and to advocate for increased investments in national surveys on GBV.

The conference concluded with closing remarks delivered by Dr. Nkosazana Dlamini-Zuma, the Minister in the Presidency for Women, Youth, and Persons with Disabilities. She emphasized the need for a comprehensive approach to tackle the underlying causes of GBV, highlighting the significance of education, women's empowerment, and social interventions. She stressed the crucial role of teachers and educational institutions in instilling gender equality values from an early age, and the importance of fostering respect, dignity, and protection for all genders.

Dr. Nkosazana Dlamini-Zuma delved into the complex relationship between GBV, substance abuse, economic empowerment, and cultural norms, emphasizing the importance of preventive measures and support for survivors. Moreover, she advocated for transparent engagement with donors and development partners, urging for funding priorities to align with local needs and initiatives, finally expressing gratitude to all stakeholders and delegates for their active participation and engagement in the conference.





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