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# GENDER-BASED VIOLENCE ANALYSIS FOR USAID/HONDURAS



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This publication was produced for the United States Agency for International Development (USAID). It was prepared by Lainie Reisman and Mario Martinez of EnCompass LLC, and Rosibel Gomez and Adela Medina of Counterpart International through the Advancing the Agenda of Gender Equality (ADVANTAGE) IDIQ.

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# GENDER-BASED VIOLENCE ANALYSIS FOR USAID/HONDURAS

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## **Advancing the Agenda of Gender Equality (ADVANTAGE)**

Advancing the Agenda of Gender Equality (ADVANTAGE) seeks to strengthen USAID's capacity to integrate gender equality and women's empowerment across USAID's new and ongoing initiatives, programs, performance monitoring and evaluation efforts, and procurements. The Task Order issued by USAID/Honduras through the ADVANTAGE mechanism is order number AID-522-TO-15-00001, funded July 21, 2015 through December 31, 2015. This task order is implemented by EnCompass LLC in collaboration with Counterpart International.

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# ACRONYMS

ADS	Automated Directives System
ADVANTAGE	Advancing the Agenda of Gender Equality
ATIC	<i>Agencia Technica de Investigacion Criminal</i> (Technical Agency for Criminal Investigation)
CAPRODEM	Center for Support and Protection of Women's Rights
CARSI	Central American Regional Security Initiative
CDCS	Country Development Cooperation Strategy
CSO	civil society organization
DINAF	Bureau of the Child, Adolescent and Family
DO	Development Objective
DV	domestic violence
FGD	Focus Group Discussion
GBV	Gender-based violence
GOH	Government of Honduras
INAM	<i>Instituto Nacional de la Mujer</i> (National Institute for Women)
IR	Intermediate Result
KII	Key Informant Interview
LGBT	lesbian, gay, bisexual, and transgender
MAI	<i>Modelo de Atencion Integrada</i> (Comprehensive Care Model)
MSS	mini-student survey
MP	Ministerio Publico (Public Ministry)
M&E	monitoring and evaluation
NGO	nongovernmental organization
OJ	Organismo Judicial (Judiciary)
OMM	Oficinas Municipales de la Mujer (Municipal Womens Offices)

PEPFAR	U.S. President's Emergency Plan for AIDS Relief
PICSC	Policy of Coexistence and Citizen Security
PMOP	<i>Policia Militar del Orden Publico</i> (Military Public Order Police)
SOW	Statement of Work
SEPOL	Police Statistics System
SRGBV	School-related gender-based violence
UN	United Nations
UNDP	United Nations Development Programme
USAID	United States Agency for International Development
VAW(G)	violence against women (and girls)
WHO	World Health Organization
WS	Women's Household Survey

# EXECUTIVE SUMMARY

The Gender-based Violence (GBV) Analysis for USAID/Honduras (hereinafter: GBV Analysis) was conducted between August and December 2015 by a four-person technical team, fielded by EnCompass LLC and its partner Counterpart International, supplemented by a robust quantitative data collection team organized by ANED Consultores (hereinafter: GBV Team). Specific objectives of the GBV Analysis included: 1) complete time-sensitive primary research in the field, relying on research methodologies, such as survey research, focus groups, individual interviews, and other methods as appropriate, in order to identify and analyze the most common forms, incidence, and causes of GBV in target communities; and 2) make recommendations for strategic investments by USAID/Honduras that would potentially decrease levels of GBV.

The GBV Team developed, tested, and applied a mixed method data collection plan with five key components: 1) extensive literature review; 2) women household survey (WS); 3) mini student survey (MSS); 4) focus group discussions (FGDs) with target groups; and 5) key informant interviews (KII). Data collection was conducted in the municipalities of Choloma, La Ceiba, San Pedro Sula, Tegucigalpa, and Tela and, more specifically, in communities targeted by USAID under its Central American Regional Security Initiative (CARSI). Significant effort was taken to ensure the fidelity of the data collection process, and to validate both quantitative and qualitative data. Regarding the women household survey, the sample (800 women) was designed so that findings are statistically valid for the entire population comprised of the neighborhoods targeted in the selected municipalities.

The basic hypothesis of the GBV Team is summarized as follows: **While there is a clear recognition of a high incidence of street-level (or gang) violence in the targeted communities in Honduras, the prevalence and impact of GBV also permeate these communities, although not adequately acknowledged or addressed by diverse actors.** The findings of the GBV Analysis clearly and consistently supported the team's hypothesis.

## FINDINGS REGARDING GBV AT THE HOUSEHOLD/COMMUNITY LEVEL:

The diversity of findings related to GBV at the household/community level is difficult to summarize given the extensive data collected. However, the GBV team considers the below some of the most relevant findings:

1. **Individual GBV victimization is largely normalized and disregarded, notwithstanding a collective recognition of the pervasiveness of GBV in all its forms – GBV is a common occurrence in the surveyed community, with 40 percent of women surveyed admitting to having suffered some form of GBV. This number is likely to be under-stated, as it is common for individual respondents to deny victimization.** While 40 percent of the individual respondents of the women survey admitted to suffering from

GBV, members of the focus groups and key informant interview respondents consistently reported on the universality of GBV victimization. The GBV Analysis Team posits that women in the selected Honduran communities, following the global trend, tend to minimize or deny the violence that they suffer personally, which is likely related to a pervasive patriarchal culture, widespread machismo, fear of gang retaliation, and limited awareness regarding GBV. These factors tend to minimize the impact, reporting, and sanctioning of GBV, and are reinforced by lack of prioritization by the Honduran government.

2. **Prevalence of types of GBV varies by data source and location** – Data from the women surveys indicate that psychological violence was the most common (37 percent responded yes to having suffered from GBV), followed by economic violence (17 percent), physical violence (10 percent), and finally sexual violence (8 percent). These data contrast with the findings from the focus group discussions, in which physical violence was cited in 100 percent of the FGDs, followed by psychological violence (86 percent), sexual violence (79 percent), and economic violence (43 percent). Finally, key informant interviews most frequently cited physical violence (83 percent), followed by psychological violence (76 percent), and economic and sexual violence (61 percent). These data lend further credibility to the belief that women on an individual basis deny physical and sexual violence, although they tend to be much more comfortable talking about it in a group setting. In addition to data sources, types of violence vary by location. For example, reports of sexual violence, particularly against children, were much more common in the communities of La Ceiba and Tela.
3. **Children suffer greatly from GBV, both as direct victims and in terms of witnessing GBV in the home** – After women and girls; boys are noted as being the most likely to suffer from GBV. They are also typically the witnesses to GBV against their mothers, with close to 25 percent of GBV cases in the home witnessed by the child. The longstanding negative impact on children is widely recognized, as put by one respondent “The most terrible thing is that, not only no importance is given to the issue of violence against women, which is for the present generation, but neither to the future generation who are the children. No one focuses on what is important to assess: the multi-generational impact.” Unfortunately, the government institutions to care for children (e.g. DINAF) are under-resourced to fulfill the regulatory and service mandate.
4. **Institutional responses to GBV are woefully inadequate** – With regards to institutional responses to GBV, respondents were overwhelmingly critical. Vast majority (93 percent) of FGD participants commented that authorities “do nothing,” 71 percent stated that “complaints result in nothing,” 50 percent expressed having “no confidence in the police,” and 36 percent reflected “you see, you listen, and you keep quiet.” The main criticisms of the institutional responses include insufficient institutional capacity, lack of resources, inexistence of services, work overload, corruption and lack of political will, lack of specific training on GBV, lack of logistics, slow processes, lack of credibility, and lack of sustainability. Specific feedback regarding

the key sectors (judiciary, public prosecution, police, health services, municipal services, and community responses) is detailed in the body of the report.

The below chart summarizes some of the main quantitative data findings of the Women’s Survey (WS).

### Exhibit I: GBV at the Household/Community Level – Quantitative Data

<b>Perpetrators of GBV</b>	Domestic partners (57%), family members (17%), neighbors (14%), others (12%)
<b>Location of GBV</b>	Home (84%), street, workplace, and other (16%)
<b>Witnesses of GBV</b>	None (43%), male children (26%), female children (24%)
<b>Victims confiding in others</b>	51% shared experience (mostly to a female family member or a friend) 49% kept silent (lack of trust, shame, fear of blame, nothing could be done)
<b>Causes GBV</b>	Patriarchal culture, machismo, drug/alcohol abuse, lack of family role models, unemployment, poverty, misinformation on GBV, lack of security, family disintegration, lack of opportunities
<b>Consequences GBV</b>	Family disintegration, intergenerational violence, emotional problems for victims, household poverty, migration, teen pregnancy, youth looking for refuge outside of homes and recruited into gangs
<b>Vulnerable groups</b>	Women, girls, boys, youth

## FINDINGS REGARDING SCHOOL-RELATED GENDER-BASED VIOLENCE (SRGBV):

The main findings related to GBV in the schools came largely from the mini student survey, which was administered to a total of 598 students (male and female representing Grades 7 to 12) from 14 schools in the targeted communities, supplemented by focus groups held with teachers and key informant interviews. Main findings include the following:

1. **High prevalence of harassment by teachers, including sexual harassment** – Harassment by teachers was considered commonplace and normalized by teachers and students alike. As put by one young woman in Choloma, *“Harassment is common and constant – apparently there is no remedy. Teachers have no shame and blame girls, they also threaten us with our grades.”* Another student noted *“Teachers are also abusing and harassing young girls, it is normal. Teachers always touch.”*
2. **Infiltration of organized criminal groups and youth gangs into all schools, often using technology** – All schools in the survey noted the presence of gang operations within the school grounds. Cyber-bullying and sexting were mentioned by different informants, as was the sending of photos of schoolgirls to be recruited (or forced) into prostitution, known as “prepagó.” Teachers repeatedly admitted their fear of gang-involved students with documented cases of teachers and school managers being threatened and in some cases even killed.

According to a respondent in Tela, “The criminals have their tentacles everywhere in schools, they threaten teachers, students, and parents. There are sales of drugs, prepagos, and prostitution all over.”

3. **Recognition that violence in the household is a major factor in SRGBV** – Multiple respondents directly link violence in the home, street, and school. For example, an FGD participant in Tegucigalpa noted that, “Violence is something we get from the house and then is reinforced in the school.” Initiatives promoted by the Ministry of Education to work with parents, for example the *Escuelas para Padres* (Parents Schools) are roundly criticized for not achieving measurable results.

The below chart summarizes some of the main quantitative data findings of mini student survey.

### Exhibit 2: School-related Gender-based Violence - Quantitative Data

<b>Types of SRGBV (boys against girls)</b>	Mockery (64%), insults (48%), touching of private parts (25%), throwing items (24%)
<b>Types of SRGBV (girls against boys)</b>	Insults (54%), mockery (46%), throwing items (27%), kicking/hitting (20%)
<b>Most common victims</b>	Girls (48%), boys (33%), girls with special needs (29%), poorest girls (27%), poorest boys (24%)
<b>GBV reported to whom</b>	School counselor (63%), teacher/principal (39%), coach (27%)
<b>Disciplinary action taken (if any)</b>	Call to parents (71%), punished in school (41%), suspension (32%), expulsion (24%)
<b>School policy on GBV</b>	Yes (65%), No (19%), Don't know (16%)
<b>Safe bathrooms</b>	No (60%), Yes (39%), Don't know (1%)
<b>School as a safe place</b>	Overall Yes (64%), No (36%) – the worst rankings in San Pedro Sula: Yes (45%) No (55%)
<b>Whom do students fear?</b>	Gangs and delinquent groups (68%), school staff (24%)

## RECOMMENDATIONS

The recommendations for USAID are presented below in **Exhibit 3** in the context of the USAID/Honduras Country Development Cooperation Strategy (CDCS), which envisions **a more prosperous and safer Honduras that advances inclusive social and economic development among vulnerable populations.**

They are aligned with the intended results USAID/Honduras as outlined in Development Objective I, and the sector focus of Citizen Security, Democracy and Governance and Education.

### Exhibit 3: Overview of Recommendations for USAID

Recommendation	Background
<p><b>1. Encourage GOH and work with relevant agencies to fully implement existing policies and laws and provide adequate funding to institutions tasked with GBV mitigation</b></p>	<p>The most pressing priority is for the GOH to implement the existing policies and laws, and provide adequate funding in order to strengthen the institutions tasked with preventing and responding to GBV. Justice sector operators and service providers must be available, trained and equipped to prevent and respond to GBV cases, with particular attention paid to outreach work at the local or community level.</p>
<p><b>2. Increase support to government institutions that address GBV</b></p>	<p>The institutions that work on GBV are woefully under-resourced and have little to no decentralized presence at the community level. USAID directed resources and programs can build the capacity of the health sector, municipal government, and institutions serving vulnerable populations.</p>
<p><b>3. Provide support, recognition and capacity building to women’s groups (at all levels) that work on GBV issues</b></p>	<p>Aside from the police, the only groups operating at the community level tend to be women’s groups, which have been plagued by a reduction in donor funding. There is an urgent need to support these grassroots organizations, particularly in communities that display high levels of violence and GBV.</p>
<p><b>4. Encourage GOH and the Ministry of Education to implement existing laws and policies, and design new ones, to protect children and youth in schools</b></p>	<p>USAID can support efforts to implement a comprehensive policy to prevent and address SRGBV by engaging teachers, students, parents, community leaders, law enforcement, health sector, and local government. It should include training for teachers and school management, design and implementation of communication, planning after-school activities, supportive counseling and coaching services, among others.</p>
<p><b>5. Support the GOH in developing programs to help schools address SRGBV</b></p>	<p>Most school counselors do not have significant training, nor external support. Punishments often reinforce the cycle of violence. USAID can support the school system in supporting a program of counseling services or referral services for both victims and offenders.</p>
<p><b>6. Support in-depth research and monitor GBV (and SRGBV)</b></p>	<p>Little solid research has been done on GBV or SRGBV in Honduras that could help determine the factors that drive violence. More extensive and in-depth research would support change and decision making on all levels.</p>

Recommendation	Background
<b>7. Design innovative strategies to raise awareness on SRGBV, particularly with parents</b>	Innovative strategies must be designed and promoted, taking into account the reality of caregivers to engage in their children’s school, and looking for ways to incentivize and simplify parental involvement.
<b>8. Develop and support programs for awareness raising and behavior change</b>	GBV is highly stigmatized and underreported due to fear, acceptance, and a lack of confidence in institutions and availability of services. Awareness campaigns that focus on positive behavior change can help shift the attitude towards GBV. A key strategy is working with men and boys to change their views of masculinity.

In addition to these recommendations, the team also offers additional programmatic considerations for USAID, other donors and other stakeholders working on GBV and violence in Honduras. These include:

- Ensure balance between emphasis on gang violence and violence at the household level (GBV)
- Explicitly build GBV components into all violence prevention programming
- Recognize and address multiple victimization factors (e.g., disability, ethnic or racial discrimination, poverty, LGBTI)
- Make the GOH aware of the risks of overloading teachers with responsibilities given their vulnerability to threats in the community

# INITIAL OVERVIEW

## USAID/HONDURAS BACKGROUND

The Gender-based Violence (GBV) Analysis for USAID/Honduras (hereinafter: GBV Analysis) was conducted between August and December 2015 by a four-person technical team, supplemented by a robust quantitative data collection team (hereinafter: GBV Team).

USAID/Honduras is in a project design phase of its new Country Development Cooperation Strategy (CDCS) for 2014 to 2019. The proposed goal for this new strategy is: “A more prosperous and safer Honduras that advances inclusive social and economic development among vulnerable populations.” To achieve this goal, USAID/Honduras proposed two overarching Development Objectives (DOs). DO1 is: “Citizen Security increased for vulnerable populations in urban, high-crime areas” and DO2 is “Extreme poverty sustainably reduced for vulnerable populations in Western Honduras.” In keeping with the Agency policy, USAID/Honduras had conducted a gender analysis at the CDCS level.

As Honduras is considered to be a priority country to prevent gender-based violence, USAID issued a Statement of Work (SOW) with the general objective to produce a report that is an in-depth analysis of GBV issues for DO1 target areas. Specific objectives included: 1) complete time-sensitive primary research in the field, relying on research methodologies, such as survey research, focus groups, individual interviews, and other methods as appropriate, in order to identify and analyze the most common forms, incidence, and causes of GBV in target communities; and 2) make recommendations for strategic investments by USAID/Honduras that would potentially decrease levels of GBV.

EnCompass LLC, along with partners Counterpart International and ANED Consultores, was selected to carry out the analysis.

The following sub-sections of this chapter are derived from the detailed literature review conducted by the GBV Analysis Team and presented in **Annex A**, including all source references.

## INTRODUCTION TO GBV

In 2012, the US Government issued the following definition of gender-based violence.

*Violence that is directed at an individual based on biological sex, gender identity, or perceived adherence to socially defined norms of masculinity and femininity. It includes physical, sexual, and psychological abuse; threats; coercion; arbitrary deprivation of liberty; and economic deprivation, whether occurring in public or private life.*

*Gender-based violence takes on many forms and can occur throughout the life cycle. Types of gender-based violence can include female infanticide; child sexual abuse; sex trafficking and forced labor; sexual*

*coercion and abuse; neglect; domestic violence; elder abuse; and harmful traditional practices such as early and forced marriage, “honor” killings, and female genital mutilation/cutting.*

*Women and girls are the most at risk and most affected by gender-based violence. Consequently, the terms “violence against women” and “gender-based violence” are often used interchangeably. However, boys and men can also experience gender-based violence, as can sexual and gender minorities. Regardless of the target, gender-based violence is rooted in structural inequalities between men and women and is characterized by the use and abuse of physical, emotional, or financial power and control.*

The United Nations (UN) Declaration on the Elimination of Violence against Women adds that gender-based violence is “a term that connects all acts of violence rooted in some form of ‘patriarchal ideology,’ and can thus be committed against both women and men by women and men with the purpose of maintaining social power for (heterosexual) men.” Within this construct, vulnerable and marginalized groups – such as lesbian, gay, bisexual, and transgender (LGBT) communities, people with disabilities, or indigenous populations – are particularly at risk. Further, as the US Government and the UN, acknowledge the vulnerability of youth in an education setting, school-related gender-based violence (SRGBV) serves as a specialized category and area for study and advocacy.

Though there are differences across cultures and countries, all societies tend to confer a higher social value on men than women and a range of norms and powers derive from this. As such, GBV can be understood as the use of power to enforce gender norms that set forth expectations for the roles men and women play in society. Power inequalities can increase women’s and girls’ risks of abuse, violent relationships and exploitation, for example, due to economic dependency and limited survival and income-earning options, or discrimination under the law as it relates to marriage, divorce, and child custody rights. Poverty can exacerbate risks for gender-based violence for women, especially for intimate partner violence. Furthermore, it is a contributing factor in girls’ vulnerability to sexual exploitation and early pregnancy, which, in turn, can lead to child marriage. Conflict and volatility in countries or regions are other contributing factors. In the Central American context instability fuels, and is fueled by, the overwhelmingly masculine gang culture where conforming to dominant notions of masculinity, including violence and rape against women and girls, is critical to be accepted in the gang. In addition, women and girls are being raped and sexually assaulted by gang members to pressure them into drug trafficking or threatened with rape in an effort to extort money.

## **GBV AND CHRONIC VIOLENCE IN HONDURAS**

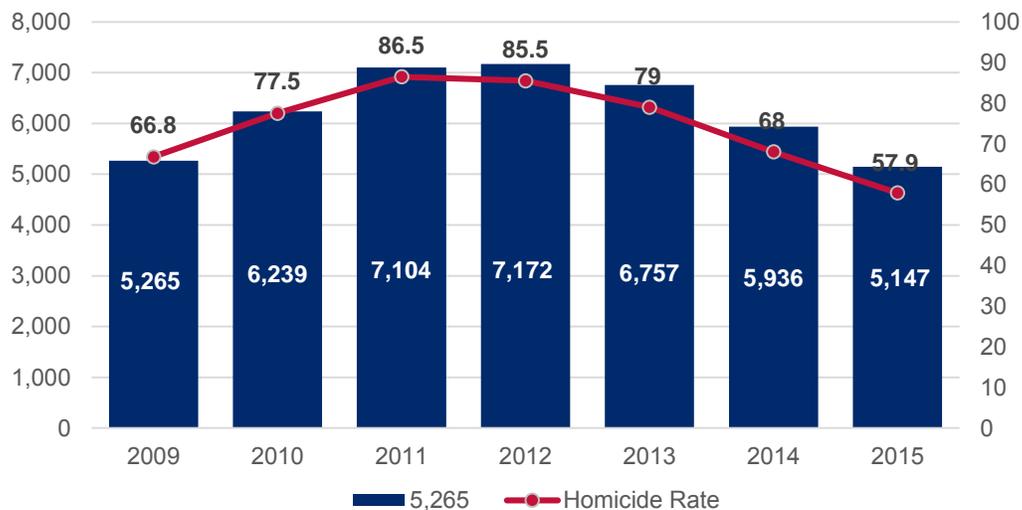
*Gender-based violence has an impact on all women regardless of race, class, or age. It has more serious consequences on women living in situations that increase their discrimination, such as poverty, belonging to a socially excluded community, living with HIV, having a disability, or being within certain age ranges (children, adolescents, youth, or older adults). Gender-based violence is supported by cultural, social, political, economic, religious, and other patterns and practices that reproduce inequality and gender discrimination.*

*National Plan for Gender Equality and Equity of Honduras 2010-2022*

Honduras, plagued by widespread violence, recently had the dubious distinction of topping the list of the most violent countries in the world (based on homicide data) having reached epidemic levels according to the World Health Organization (WHO). The degree of the challenge, and its impact on the country's economy and global standing, has led to the review and reformulation of the national policy framework, including adoption of new approaches to better respond to the problem. Since taking office in January 2014, the government of Juan Orlando Hernandez has focused its efforts on a renewed militarization of the security forces, centralization of intelligence and security authorities, and public support for prevention activities.

It is important to note that, according to recent data from the Police Statistics System (SEPOL) and the Security Ministry, the national average murder rate has dropped in the past 2 years. In 2014 it stood at 68 homicides per 100,000, as compared to 2011 when it reached 86.5 homicides per 100,000 (see **Exhibit 4**), although many civil society organizations question the validity of these data. Note that since detailed data on other violent acts that highly affect Honduran society, such as extortion and GBV, are not available, it is difficult to measure the true state of affairs.

**Exhibit 4: Honduras Homicide Rate 2009-2015\***

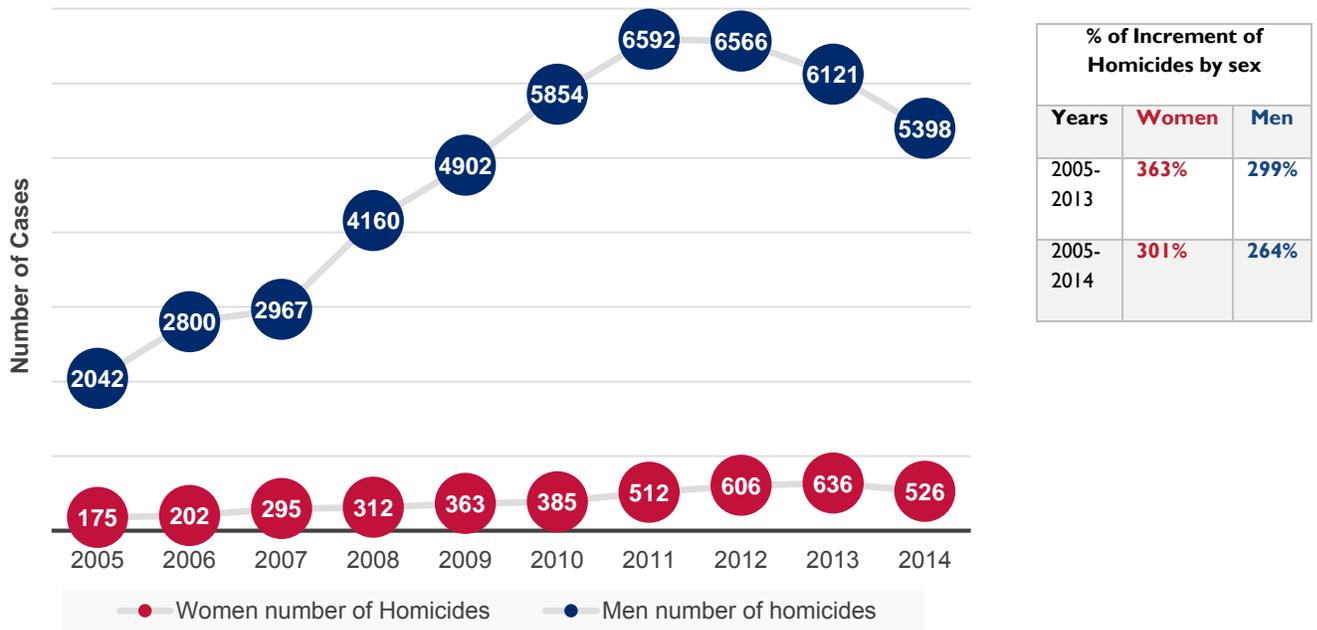


Source: UNAH-IUDPAS (2015): Boletín Enero-diciembre 2014, Edición N°36, Febrero 2015, Tegucigalpa, Honduras (<http://iudpas.org/pdf/Boletines/Nacional/NEd36EneDic2014.pdf>) Source: UNAH-IUDPAS (2015): January to December 2014 Bulletin, Edition N°36, February 2015, Tegucigalpa, Honduras (<http://iudpas.org/pdf/Boletines/Nacional/NEd36EneDic2014.pdf>)  
 \* 2015 data is from Police Statistical Department (SEPOL), as for Nov 2015 (<https://www.sepol.hn/artisistem/images/sepol-images/files/Reporte%20Mensual%20Homicidios%20Noviembre%202015.pdf>).

The killing of women and girls (sometimes referred to as women's homicides, femicides, or feminicides) has increased exponentially in Honduras in recent years. **Exhibit 5** below shows that between 2002 and 2013, the number of registered cases of women's homicides increased by 363 percent, while for men the increase was 299 percent. Although these numbers decreased slightly for both women and men in the period 2005-2014, the percentage of increment of women's homicides is higher in each year.

Furthermore, Exhibit 6 provides a comparison between the violent deaths of women in relation to men, showing that between 2005 and 2013, killings of women have been rising steadily from 2.7 to 14.6 per 100,000 inhabitants (decreasing to 11.9 in 2014), while the number of cases among men increased significantly since 2005 to its peak in 2011.

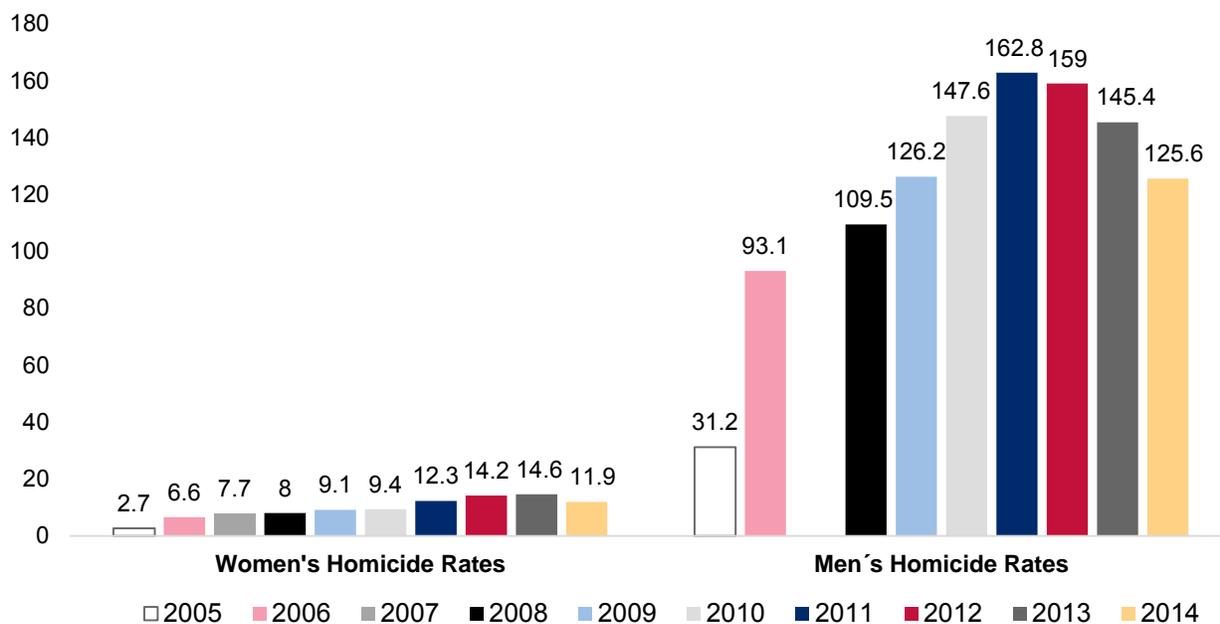
**Exhibit 5: Honduras – Women’s Homicides 2005-2014**



Source: UNAH-IUDPAS, Boletines de Enero-diciembre de los años 2005 al 2014, Tegucigalpa, Honduras (<http://iudpas.org/pdf/Boletines>)

\* Data 2014 is from UNAH-IUDPAS, January to December 2014 Bulletin, Edition N°36, February 2015, Tegucigalpa, Honduras (<http://iudpas.org/pdf/Boletines/Nacional/NEd36EneDic2014.pdf>)

## Exhibit 6: Women and Men Homicide Rates 2005-2014\*



Source: Memory of the Femicides Forum: An Analysis from the Feminist Movement of Honduras, Tegucigalpa, Honduras. pp. 8 (based on data from IUDPAS and CDM) Tegucigalpa, Honduras, March 2014.

\* 2014 data is from UNAH-IUDPAS, Boletín Enero-diciembre 2014, Edición N°36, febrero 2015, Tegucigalpa, Honduras (<http://iudpas.org/pdf/Boletines/Nacional/NEd36EneDic2014.pdf>)

While homicides are the most extreme expression of the problems that the country is experiencing, it is important to mention that other forms of violence are present and have a striking number of cases and victims. With a conviction rate of less than 3 percent for homicides nationwide, the Honduran justice sector is struggling to deal with the most visible forms of violence and has few resources to devote to the much less visible, but more pervasive, forms of violence affecting Hondurans in their day-to-day lives, particularly gender-based violence.

## LEGAL, POLICY, AND INSTITUTIONAL FRAMEWORK TO ADDRESS GENDER-BASED VIOLENCE

The policy framework for addressing violence in Honduras has historically focused on reactive and containment actions rather than prevention, although recent years have shown a greater emphasis on human security for achieving public safety. In 2011, the Government of Honduras (GOH) made great strides by announcing its Integral Policy of Coexistence and Citizen Security (PICSC) 2011-2022. Among its innovations, this policy proposed a holistic approach to identifying solutions from a human rights perspective and it committed to creating a Security Pact, whereby the government works with public and private sectors, civil society and the population as a whole, to reduce violence at all levels of society.

The PICSC is an important step forward because it recognizes that the problem of violence is multi-causal. For the first time security policies explicitly acknowledged the impact of gender-based violence, as the PICSC states that the "*manifestations of gender and/or domestic violence (since this) becomes elements of production and reproduction of violence and, therefore, represents one of the key variables in the solution of lessening the overall problem.*"

In terms of specific legislation that addresses GBV, Honduras has two primary instruments, namely the Domestic Violence Law and the Criminal Code, that address domestic violence and interfamily violence, respectively. However, the Honduran legislation does not recognize intimate partner violence and this limited legal framework excludes many common forms of GBV.

While it is true that some progress has been made in the legal and institutional frameworks regarding GBV, there is still an enormous gap in terms of the operationalization and implementation of the above noted laws and policies. While policies have improved, implementation and services have lagged far behind. A report prepared by women's organizations in June 2014 states that ultimately "*the problem of access to justice for women lies not in legislation, but in the inadequate implementation by operators of justice.*"<sup>1</sup> Although some steps have been taken towards the construction of public institutions that can respond to the needs of violence survivors, numerous problems still persist, linked primarily to factors such as:

- The centralization of the services that are mostly found in the capital city or in few large/intermediate cities
- Insufficient human resources and/or lack of training and awareness in the subject of gender-based violence, legislation, and application of procedures
- Sexist cultural patterns (based on the macho and patriarchal culture) of service providers and justice officials that tend to blame and re-victimize women
- Low budget allocations for the implementation of plans and actions
- Lack of adequate logistics and a low response capacity.

The above elements contribute to a high degree of impunity for the perpetrators and a greater vulnerability of women's rights, livelihoods, and indeed their lives. There is an urgent need for adequate training, logistics, resources (both human and financial), and inter-institutional coordination at national and local levels to support implementation. Furthermore, gender must be mainstreamed in all relevant policy analysis, with a greater recognition of the impacts of gender-based violence.

It is also important to mention that recent realignment of government structures has resulted in some major institutional setbacks, such as the loss of line ministry status for the National Institute for Women

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<sup>1</sup> Feminist Organizations Report (2014): Status of Violence Against Women in Honduras. Tegucigalpa, Honduras, June 2014 in [http://www.derechosdelamujer.org/tl\\_files/documentos/derechos\\_humanos/Violence-Women-Honduras-RapporteurONU-June2014.pdf](http://www.derechosdelamujer.org/tl_files/documentos/derechos_humanos/Violence-Women-Honduras-RapporteurONU-June2014.pdf)

(INAM).<sup>2</sup> In the past, INAM served as a governing body with relevant advocacy role for the rights of women, but now has a much lower profile because it has been folded into the Sectorial Cabinet of Inclusion and Social Development. Another hindrance is the transfer of the Femicide Unit (formerly located in the Women’s Prosecutor’s Office) to the Prosecutor for Crimes Against Life, again representing a loss of profile.<sup>3</sup> Finally, at the municipal level, with the reform of the Municipalities Act of 2010, the existence of Municipal Women’s Offices is now under the discretionary criteria of mayors, many of whom do not prioritize services to women.

Public institutions providing services to prevent and respond to gender-based violence are few and far between. The Judiciary (including courts of the peace, family and violence against women courts, trial courts), the Public Ministry (prosecutors, special prosecutors, and forensic medicine), the National Police, and the Ministry of Health (through hospitals, health centers, and family counseling units) all provide limited support. In March 2014, the Inter-Agency Commission on the Implementation of the Domestic Violence Act (with representatives of the National Institute for Women, the Public Ministry, the Department of Health, the Central District Municipality, the National Human Rights Commission, and civil society organizations) launched the Centre for Support and Protection of Women’s Rights (CAPRODEM) in the city of Comayagüela. This Centre offers orientation, medical, legal, and psychological assistance to victims of domestic and interfamily violence. However, CAPRODEM faces many obstacles in its ability to provide services. The Coordinator of CAPRODEM has pointed out that “Lacking its own budget and human resources, it depends on the voluntary contributions of the institutions of which it is a part” (i.e., Supreme Court, Health Sector, National Institute of Women). Additional shelters for women who are victims of gender-based violence are extremely limited and only operate in Choluteca, La Ceiba, and Santa Rosa de Copan.

Civil society organizations and universities are offering some alternative services to alleviate needs of gender-based violence victims. This group includes women and feminist nongovernmental organizations (NGOs), as well as human rights organizations and universities that may offer legal services and psychological care and support. It is important to mention that these programs are limited in number and work with minimal budgets. More recently, women’s networks at the municipal level and community-based women’s organizations have emerged, organized to monitor and assert their rights, and to find solutions in the absence of the public sector’s response to increased violence. These

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<sup>2</sup>“The Special Rapporteur expressed concern that the Institute falls under the Social Development Department, perpetuating the view that violence against women needs to be addressed through a social welfare lens as opposed to through a human rights-based approach.” *Report of the Special Rapporteur on violence against women, its causes and consequences*, Rashida Manjoo, Addendum, Mission to Honduras, March 2015, Page 14.

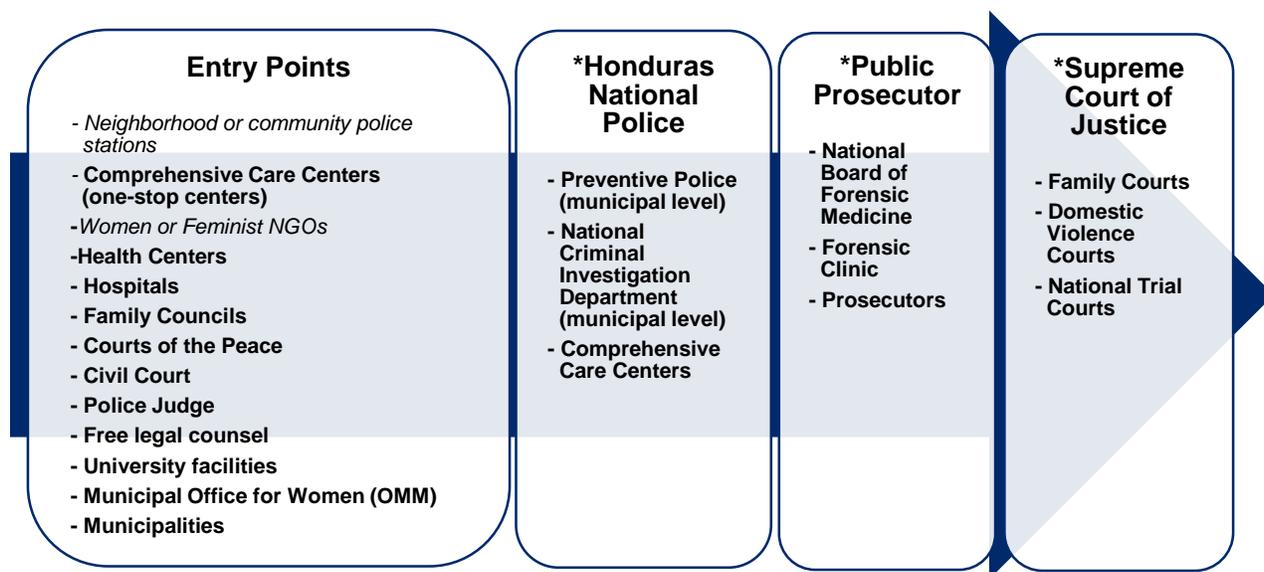
<sup>3</sup>“The closure or merging of investigation units has also led to concerns about the lack of specificity in prosecuting crimes against women, the lack of appropriate equipment and tools and lack of human resources, thereby further eroding the need for accountability for such crimes.” *Report of the Special Rapporteur on violence against women, its causes and consequences*, Rashida Manjoo, Addendum, Mission to Honduras, March 2015, Page 17.

networks and community groups are also providing support for domestic and interfamily violence victims.

In addition to the limiting factors discussed above, the critical path followed by women affected by violence in Honduras is further complicated by geographic and economic challenges. The lack of coverage and centralization of services by justice operators and service providers forces many women to move to other cities in search of justice (if they have the financial capacity and autonomy to do so), which, considering the high level of poverty of the population, is a tremendous hurdle to overcome.

The following diagram summarizes the existing public and private institutions to which women can turn in search of support. While the diagram indicates a variety of entry points, it should be understood that most of these simply do not operate at the municipal, let alone community level. The few that do operate at the municipal level are highlighted with italics in the chart. In addition to these, many neighborhoods have organized women’s groups that can play a role in supporting victims of GBV, but they generally do not have the resources to effectively provide service.

**Exhibit 7: Critical Path of Institutional Services for Victims of GBV**



## SCHOOL-RELATED GENDER-BASED VIOLENCE

School, a space dedicated to learning, is also a place for the socialization of values and cultural norms that vary depending on the historical, cultural, and political context. Therefore, school, in addition to inculcating learning, has an important role in generating positive behaviors and equitable cultural practices or, on the contrary, can reinforce inequality and perpetuate patterns of violence. Family, church, media, school, and other institutions tend to reproduce gender stereotypes and roles thus creating a "naturalization" and standardization of unequal relations between women and men, where

women and girls systematically face discrimination. In the school, gender-based violence becomes more complex and takes more specific characteristics.

USAID defines school-related gender-based violence as “physical, sexual, or psychological violence or abuse that is based on gendered stereotypes or that targets students on the basis of their sex, sexuality, or gender identities. The underlying intent of this violence is to reinforce gender roles and perpetuate gender inequalities. It includes rape, unwanted sexual touching, unwanted sexual comments, corporal punishment, bullying, and verbal harassment. Unequal power relations between adults and children and males and females contribute to this violence, which can take place in the school, on school grounds, going to and from school, or in school dormitories and may be perpetrated by teachers, students, school personnel or community members. Both girls and boys can be victims, as well as perpetrators. SRGBV results in sexual, physical, or psychological harm to girls and boys.” (USAID 2014)

Honduras has a strong regulatory and legal framework to prevent, respond, punish, and eradicate violence against girls and boys. The framework is based on the Convention on the Rights of the Child (1989), which highlights the importance of protecting the rights of children as follows:

*States shall take all legislative, administrative, social and educational measures appropriate to protect children from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while the child is in the custody of the parents, a legal representative or of any other person who is in charge. (Article 19, Paragraph 1, Convention on Rights of the Child)*

Norms of this international legal framework are already incorporated into the Honduras national legislation and are reflected in provisions such as Article 119 of the National Constitution of the Republic of Honduras, noting that “The State has the obligation to protect infants. Children shall enjoy the protection provided for international agreements to ensure their rights. The laws for the protection of children are of public order and the official establishments for the same purpose have the character of Social Assistance Centers.” Furthermore, the Children and Adolescents Code (1996), which includes articles related to the protection against ill-treatment and abuse of children declares: “Shall be treated as victims of abuse, children who have suffered harm or injury in their physical health, mental, emotional or personal well-being by the acts or omissions of their father, mother, legal representative, teachers or other people with whom they have relationships.” (Article 162)

In regards to violence against boys and girls specifically in a school setting (SRGBV), paragraph 2 of article 28 of the Convention on the Rights of the Child establishes the right of girls and boys to be protected from physical punishment in the school. In October 2014, due to the increased levels of abuse in public and private institutions in the principal cities of the country, Honduras adopted the Act Against Bullying in Schools, which contains 14 articles aimed promoting good relations between students at schools, and preventing, punishing, and eradicating all forms of violence, either physical or psychological, assault, harassment, intimidation, and any act considered as harassment, among the students of educational institutions (Diario La Prensa 2014). While there have been cases of bullying brought under

this Act, there have been no clear protocols or policies developed and consistently applied by the Ministry of Education.

This international and national legal framework to protect children has been supported by an institutional framework, namely the Bureau of the Child, Adolescent and Family (DINAF), attached to the Secretariat for Development and Social Inclusion.<sup>4</sup> Established in 2014, DINAF is tasked with operating as a decentralized body with technical, functional, administrative, and financial independence (Diario La Prensa, 2014). There is also a coordinated effort between DINAF and other related government entities, as is the case of the Ministry Education, which plays a fundamental role in the prevention and eradication of violence in formal educational spaces.

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<sup>4</sup> Previous to the creation of DINAF the Honduran Child and Family Institute (INHFA) had the mandate to provide comprehensive protection for children, but it was dismantled and with its closure, all its dependencies to protect children at social risk had been transferred to municipalities. The role of the DINAF will exclusively be to regulate and foresee those municipal and private NGOs that works in the protection of vulnerable children (<http://www.laprensa.hn/honduras/864024-417/m%C3%A1s-de-10000-ni%C3%BLos-viven-en-las-calles-de-honduras>).

# DESCRIPTIONS OF METHODOLOGIES USED

## OVERVIEW OF METHODOLOGY

This section presents the research methods designed and implemented for the Gender-based Violence Analysis for USAID/Honduras in five municipalities in Honduras. The GBV analysis team designed and implemented a mixed methods approach to answer the analysis questions posed by USAID/Honduras. The 20 original questions posed by USAID/Honduras, broken down into GBV, School-related GBV, and Services, are attached as **Annex B**.

Quantitative methods were used to gather information to answer the “what” GBV analysis questions, while qualitative methods provided data to answer the “how” and “why” questions of the analysis. The primary quantitative and qualitative data collection instruments included a women household survey (WS) applied to 18- to 50-year old women, a mini student survey (MSS) carried out among students of 7th to 12th grades, focus group discussion (FGDs), and key informant interviews (KIs). Because many studies have found that GBV primarily affects women rather than men, the methodology focused on women, but also assessed the extent to which other vulnerable groups – e.g., children, youth, ethnic groups, and people with disabilities – are affected. Prior to the data collection, the analysis team carried out a literature review that informed the design of data collection instruments and provided secondary information to complement the quantitative and qualitative data collected.

The key data collection methods and target groups included:

1. Women household survey (women 18 to 50 years old)
2. Student mini survey (students grades 7 to 12)
3. Focus group discussions with target groups:
  - a. Girls out school (12 to 18 years)
  - b. Boys out of school (12 to 18 years)
  - c. Men, 18 or older
  - d. Women teachers
  - e. Women community leaders
  - f. LGBT representatives
  - g. People with disabilities
  - h. Minority ethnic groups (e.g., Garifuna community)
4. Key informant interviews:
  - a. Central government, municipal government, and local government

- b. Justice sector actors
- c. Service providers
- d. NGOs/civil society organizations (CSOs)
- e. Community groups (women and youth)
- f. Private sector representatives.

## ANALYSIS TEAM AND ROLES

The GBV Team consisted of four key team members (with international specialists identified and contracted by EnCompass LLC and national specialists identified and contracted by Counterpart International), as well as a robust data collection team fielded by ANED Consultores (hereinafter: ANED). Key members and roles included:

### Exhibit 8: GBV Analysis Team

Person	Title and Role
Lainie Reisman	<ul style="list-style-type: none"> <li>• <b>Team Leader</b> (American – EnCompass LLC) – Led, managed and coordinated the GBV Team and sub-contractors. Conducted and managed analysis and served as point of contact for USAID.</li> </ul>
Rosibel Gomez Zuniga	<ul style="list-style-type: none"> <li>• <b>GBV Expert</b> (Honduran – Counterpart International) – Advised on GBV research approaches and ensured collection of data without gender bias. Coordinated collection and analysis of data, and used findings to propose interventions.</li> </ul>
Mario Martinez	<ul style="list-style-type: none"> <li>• <b>M&amp;E Specialist</b> (El Salvadoran – EnCompass LLC) – Advised team on data collection and supervised data quality methodologies and approaches. Conducted training of enumerators and facilitated data processing and analysis.</li> </ul>
Adela Maria Medina	<ul style="list-style-type: none"> <li>• <b>Local Gender Expert</b> (Honduran – Counterpart International) – Provided support to team on gender analysis and approach, and designed data capture and analysis systems for qualitative data.</li> </ul>
Siomara Bertrand and Jorge Medina	<ul style="list-style-type: none"> <li>• <b>Quantitative Survey Team</b> (Honduran – ANED) – Supervised quantitative data collection, capture, digitization, cleaning, and output tables. Designed sample and organized data collection teams in five municipalities.</li> </ul>
Victor Morales and Maria Virginia Diaz Mendez	<ul style="list-style-type: none"> <li>• <b>Focus Group Moderators</b> (Honduran – subcontracted by ANED) – Organized and conducted focus groups and prepared data analysis.</li> </ul>

Tools and instructions for use were drafted, revised, tested, and adapted for the four data collection methods. Prior to arrival in Honduras, the team prepared and shared a Data Collection Plan, attached as **Annex C**, that established the proposed timelines, methodology, research protocols, plans to validate

instruments and methodologies, process to analyze data, sample size and selection, plan to train and supervise data collection, and protocols to handle sensitive information. In order to ensure that the 20 questions posed by USAID were addressed, a matrix that mapped the questions with the data source was developed and analyzed by the team.

The quantitative data collection (survey and mini-survey) was administered by ANED, under the supervision of the GBV Team's Monitoring and Evaluation (M&E) Specialist. The FGDs were moderated by a group of Honduran gender experts, sub-contracted by ANED and supervised by the core GBV Analysis Team (Team Leader and Gender Specialists). The KIs were conducted by the core GBV Analysis Team.

The GBV Analysis Team designed questionnaires and guidelines for focus groups and key informant interviews based on the literature review, particularly using the recommended instruments included in the "Gender-based Violence Tools Manual for Assessment & Program Design, Monitoring & Evaluation in conflict-affected settings."<sup>5</sup> This Manual contains a variety of tested questionnaires and guidelines to conduct surveys, focus groups, interviews, and assessments to research GBV topics, including types of GBV, their causes, and perceptions. The GBV Analysis Team also reviewed and used previous FGDs and KIs questionnaires applied to study gender violence studies in Honduras. The survey and mini survey questionnaires were tested and refined prior to data collection in the field.

## I. WOMEN HOUSEHOLD SURVEY (WS)

The women household survey for women aged 18 to 50, attached as **Annex D**, consisted of 54 (mostly close-ended questions broken down into personal information, sexual and reproductive rights, GBV in childhood, GBV in adulthood, perceptions regarding GBV, frequency of GBV in the family and community, consequences of GBV, and open commentaries. In addition, the survey tool included an introductory session, informed consent, quality control, and demographic questions on the household. Finally, the GBV Analysis Team prepared and handed out a list of service institutions for participants seeking additional victim support, if/when required.

### SAMPLE SIZE AND SELECTION

The selection of respondents to the women household survey used a probabilistic and statistically valid sample. The sample size was 800 women of 18 to 50 years old and the sample design consisted of a two-stage sample selection with probability proportional to size in the first stage, and systematic random selection of household/women during the second stage.<sup>6</sup> ***As a result, the findings based on the sample are valid for the entire population comprised of the neighborhoods (barrios y colonias)***

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<sup>5</sup> The RHRC Consortium. Gender-based Violence Tools Manual For Assessment & Program Design, Monitoring & Evaluation in conflict-affected settings, New York, February 2004.

<sup>6</sup> When more than one woman was present in the household, the enumerators randomly selected the woman for interview using the Kish Table method.

**targeted in the selected municipalities, as requested by USAID/Honduras.** The list of targeted neighborhoods, identified as areas in which USAID DOI projects have been operational, is included as **Annex E**. The formulae and the parameters used for sample size calculation are as follows:

**Exhibit 9: Sample Size Calculation**

Where:	$n = \frac{z^2 NPQ}{z^2 PQ + E^2 N} * deff * (1 + \lambda)$
n	= Sample size required
N	= Households in the sample frame
Z	= Z value of 95 percent two-tail sided
P	= Proportion of population with the attribute (e.g., GBV victim)
Q	= 1 - p, proportion of population without the attribute to be estimated
E	= Sampling error
Deff	= Design effect
$\lambda$	= Adjustment for non-responses, etc.

Considering 95 percent of confidence level, a sampling error of 5 percent, P = 50 percent or 0.5, deff=1.9, and adjustment of 10 percent, the sample size is calculated as follows:

n calculated = 794 households

n adjusted = 800 households

The statistical power of the sample to identify a 10 percent effect of a program is 100 percent – in this case the analysis is not looking for effect identification.<sup>7</sup>

To randomly select households/women, ANED used the 2001 Population Census as the sample framework. ANED endowed enumerators with maps and list of households sampled to collect data in the field.

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<sup>7</sup>The calculated statistical power of 100 percent was obtained using the web site: <http://www-rohan.sdsu.edu/~statctr/calculators/pss2.html>. The information provided was as follows:  $\alpha=0.1$  (error type I);  $p_0=0.5$  (the accepted population proportion);  $p_1=0.6$  (the sample proportion at which you intend to reject the null hypothesis);  $n=800$ .

## ETHICAL AND CONFIDENTIALITY MATTERS

The questionnaires included an item upfront to ensure enumerators asked for respondent's informed consent to participate in the survey. Enumerators informed respondents that they could stop answering the questionnaire at any time during the interview. The GBV Team trained interviewers on the importance of looking for a private setting to carry out the interviews, thus preventing third parties from listening to the questions and answers during the interview, and avoiding bias. The training also ensured that enumerators recognized the need to change to non-sensitive questions in case someone interrupted the interview and to introduce the survey as a study of women's needs of services, rather than a study focusing on violence. The questionnaire form included a one-page list of services provided to support GBV victims; enumerators delivered that information at the conclusion of each interview. Finally, the GBV Team prioritized the hiring of female enumerators to implement the survey as a means to increase the rate of responses, as well as the objectivity and frankness of responses. Data gathered were properly handled by ANED, as described below (**Description of Data Analysis and Steps to Validate the Data**), to avoid disclosure of information to third parties.

## 2. MINI STUDENT SURVEY (MSS)

The mini student survey, administered to students in grades 7 to 12, is attached as **Annex F** and consists of 28 close-ended questions that asked about relationships between male and female students, between students and teachers, and regarding the school policies and physical conditions.

## SAMPLE SIZE AND SELECTION

In order to analyze GBV at schools in the targeted communities, the GBV Team carried out a mini survey among students in grades 7 to 12 with ages ranging from 13 to 18. It should be noted that the basic characteristics of a "mini" survey are as follows:<sup>8</sup>

- Less than 30 minutes to fill a questionnaire and the number of questions is small compared to regular survey questionnaires (less than 50 questions)
- Sample size of 25 to 70 respondents
- Appropriate when there are time and budget constraints.

The sample size of students for the mini-survey was set at 120 students in each of the five municipalities targeted in the study, which resulted in a total sample of 600 students. The mini survey was implemented in a total of 14 schools, all within the neighborhoods targeted in each municipality. Five boys and five girls were randomly selected in each grade using random numbers or lottery method. The questionnaire was self-responded to by a total of 598 students. The data collected, while not statistically

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<sup>8</sup> For a detailed description of mini surveys see: Krishna Kumar, *Conducting Mini Surveys in Developing Countries*, Center for Development Information and Evaluation, USAID, revised version 2006.

valid, are nonetheless representative of schools in the selected neighborhoods given the homogeneity of the environment in which the schools are located.

## ETHICAL AND CONFIDENTIALITY MATTERS

In Honduras there is no legal permit needed for students to answer questionnaires, except the explicit authorization provided by the schools' senior management. ANED's enumerators obtained consent to conduct the mini survey in all schools. Data gathered were properly handled by ANED, as described below, to avoid disclosure of information to third parties.

### 3. FOCUS GROUPS

The selection of focus groups was meant to gather supplemental information and speak with key stakeholder groups apart from women and students. The GBV Analysis Team identified specific sectors (out of school youth, men, LGBT, indigenous groups, and people with disabilities) that could provide information not gathered during the quantitative surveys. In consultation with USAID/Honduras, the GBV Team selected focus groups' participants based on their background, knowledge, and experience of the GBV phenomena. In general, FGD participants are more likely to share their experience in an open and natural manner when they have the same or similar background and experiences. For example, teachers interacting with at-risk youth and parents in the same municipality may have had similar experiences making them more comfortable in sharing their insights, opinions, and perceptions on the community GBV issues. In some cases, USAID implementing partners helped organize FGDs. A list of FGDs held is provided as part of the Focus Group Report (**Annex G**) with focus group guidelines presented in **Annex H**. Detailed notes for each focus group are attached as **Annex I**.

The selection of seasoned and trusted focus group facilitators was considered critical to ensure open and honest discussions. As such, ANED sub-contracted a team of Honduran experts both recognized as leaders in the field of gender and with significant experience conducting focus groups around the country.

### 4. KEY INFORMANT INTERVIEWS

From in-depth interviews with key informants, the GBV team gained insights into the types of violence and the most common GBV events at the community level. Key informants were able to provide more detailed data, perceptions, and specialized knowledge on GBV issues, providing relevant information on the causes of GBV, consequences, and the quality and use of services provided to victims and perpetrators of GBV. Key informants were also used to clearly articulate recommendations on how to prevent and reduce GBV, as well as provide services to victims. The KII questionnaire and guidelines are attached in **Annex J**. A list of all persons interviewed for the study is attached as **Annex K**.

# DESCRIPTION OF DATA ANALYSIS AND STEPS TO VALIDATE THE DATA

## DATA COLLECTION VALIDATION OVERVIEW

The data collection took place from September 14 to October 2, 2015. The WS and MSS were administered by ANED in Choloma, La Ceiba, San Pedro Sula, Tegucigalpa, and Tela during the weeks of September 14<sup>th</sup> and 21<sup>st</sup>. A total of 36 communities were visited by the enumerators, all of which had some presence of USAID Central America Regional Security Initiative (CARSI) activities. The GBV Team conducted the focus groups and key informant interviews in the same geographic areas where the surveys were administered during the same time period.

## QUANTITATIVE DATA

The M&E Specialist of the GBV Team trained 11 enumerators and three field supervisors based on the Enumerator Manual, attached as **Annex L**, prepared in advance. The 4-day training emphasized the ethical standards and confidentiality of the interview, as well as the privacy required to conduct the interview. After reviewing the instruments and training the enumerators, the entire team conducted a “pilot survey” to test the questionnaires in Colonia Campo Cielo and Colonia Centeno. Afterwards, the questionnaires were refined taking into account the pilot experiences. The GBV Analysis Team conducted spot-testing of field work in both San Pedro Sula and Tegucigalpa. Furthermore, the team was in daily communication with the ANED general supervisor who visited all of the field sites to ensure proper implementation of procedures. Overall, the enumerators were an experienced group with a high level of knowledge of survey techniques.

Regional field supervisors collected all completed questionnaires in a bag and kept the bags under their custody at all times to prevent third parties getting access to the sensitive information collected. Every other day, field supervisors shipped all questionnaires to the general supervisor based in ANED’s headquarters in Tegucigalpa for custody, revision, data entry, and proper storage. ANED’s policy is to keep physical questionnaires at least for 2 years for future reference. Questionnaires are destroyed after that period. In ANED’s offices, staff entered data using a previously designed CSPro software.

The following table indicates the number of questionnaires per municipality as planned, completed, and analyzed by the GBV Team. The sample of 800 women was allocated to each of the five selected

municipalities based on the size of the population in each municipality. The populations of Tegucigalpa and San Pedro Sula are far larger than the populations in La Ceiba, Tela and Choloma. The sample distribution considered the size of each population to ensure better representativeness of the sample selected per municipality through the highest number of sample units in each municipality. For example, in Tegucigalpa, instead of 160 sample units ( $800/5=160$ ) we allocated 328 women to be interviewed, and in Tela, we allocated 50 interviews. With this approach, the results are more representative and produces more precise statistical estimates and conclusions.

#### Exhibit 10: Household Survey: Questionnaires per Municipality

Municipality (Barrios y colonias)	Number of Women Interviewed	Number of Questionnaires Planned
1. Ceiba	158	161
2. Choloma	110	110
3. San Pedro Sula	157	157
4. Tegucigalpa	332	330
5. Tela	50	50
<b>Total</b>	<b>807</b>	<b>808</b>

#### Exhibit 11: Student Mini Survey: Questionnaires per Municipality

Municipality (Barrios y colonias)	Students Surveyed	Number of Questionnaires Planned
1. Ceiba	118	120
2. Choloma	120	120
3. San Pedro Sula	120	120
4. Tegucigalpa	120	120
5. Tela	120	120
<b>Total</b>	<b>598</b>	<b>600</b>

## DATA CLEANING AND AUDITS

ANED conducted a cleaning of databases of the two surveys (VWS and MSS) using the SPSS statistical program to ensure data quality and to prepare databases for analysis. The cleaning process focused on identifying outliers, typing errors, missing data, and logic and consistency of information. Firstly, ANED

used a CSPro data entry program to minimize data entry errors by programming ranges of valid responses and logical skips of questions. Secondly, to check data quality, the GBV M&E Specialist conducted an audit of the data entered using a 10 percent random sample of all questionnaires. The 10 percent of questionnaires were entered a second time by different data clerk staff. The dataset of the 10 percent sample was compared to the original entered data using the CSpro compare command. The error rate calculated for the women and student surveys were 2 percent and 1.7 percent respectively, which is considered to be an acceptable error level. Finally, to correct the errors remaining in the databases of women and students, these two datasets were exported to SPSS application to identify and fix the missing values, outliers, and inconsistencies. ANED's database administrators corrected the errors identified during this process.

## **DATA STRENGTHS AND LIMITATIONS**

The WS data are a statistically valid sample, which means all findings can be applied to the entire population from which the sample was drawn – namely, the USAID identified communities within the five municipalities of the study. The data collection benefited from support of the existing USAID program implementers in the field. This was key for the team to be able to collect data as planned given the high-risk areas targeted and limitations of field time.

The 2001 Population Census served as the sampling frame to select the original sample size of 800 households and women within the households. Given the fact that the cartography is close to 15 years old, some households were not encountered or were empty due to modernization of infrastructure, abandonment of houses, and migration to less risky areas. To mitigate this situation, the analysis team decided to increase the sample size from 800 to 908 households/women. As a result, the total number of questionnaires completed was 807 households/women. Given the nature of the communities, and the sensitivity of the topics, many women were unwilling to participate in the survey. It is estimated that approximately 10 percent of the houses initially selected had to be replaced.

## **QUALITATIVE DATA**

The questionnaires of FGDs and KIIs were not tested since the questions are open-ended and do not look for precise answers. In addition, these methodologies allow the moderators and interviewers to ask probing or clarifying questions to focus responses from participants. The GBV Analysis Team conducted a total of 41 key informant interviews and 14 focus groups in the five municipalities.

## **FOCUS GROUPS**

As noted, the GBV Analysis Team engaged a set of expert facilitators to conduct the 14 focus groups. Some focus groups were audio recorded for reference during the analysis stage of the study. On average, the number of participants per group was nine and each session was 90 minutes long. A full list of FGD details is included in the FGD report (**Annex G**).

All focus groups were led by an experienced moderator and supported by a note-taker. Focus group notes were then coded and analyzed in order to produce a database of information responding to the eight focus group questions. All data were analyzed in Microsoft Excel.

## KEY INFORMANT INTERVIEWS

The purpose of KIIs was to obtain opinions from a broad range of individuals who have different perspectives and experiences with GBV issues at the community level. Some interviews included more than one participant. All KIIs were conducted face-to-face and the interviewers took hand-written or electronic notes for subsequent analysis. The team audio-recorded some interviews for reference during the analysis phase of the study.

The following tables present a summary of the number of KIIs conducted and the position/sector of participants. It is important to note that there was a high number of KII conducted in Tegucigalpa given that many interviews were with national-level organizations, including USAID implementing partners. Group interviews were held in both Choloma and San Pedro, which accounts for the lower number of interviews held.

### Exhibit 12: KII Breakdown by Sector

KII Sectors	Number of KII
Academia	2
Civil Society Organizations	4
Government	6
Justice Operators	10
Local Government	8
NGOs (international/USAID Partners)	9
NGOs (national)	3
Private Sector	1
Women's Groups	1
Youth Leaders	3
<b>Total</b>	<b>47</b>

### Exhibit 13: KII Breakdown by Municipality

Municipality	Number of KII
Choloma	4
Ceiba	8
San Pedro Sula	4
Tegucigalpa	23
Tela	7

# FINDINGS AND DIAGNOSIS – GBV HOUSEHOLD / COMMUNITY LEVEL

This section summarizes the findings of multiple data collection methodologies used to collect data on gender-based violence at the household and community level; namely the women household surveys, key informant interviews, and focus group discussions. The following section summarizes data collected on school-related gender based violence.

## **BACKGROUND: SOCIAL, DEMOGRAPHIC, AND ECONOMIC CHARACTERISTICS OF WOMEN SURVEYED**

Given the importance placed on data collected by the WS and its statistical validity, it is critical to understand the social, demographic, and economic characteristics of the 807 women surveyed, summarized as follows:

- Average age of 32 years, with 29 percent aged less than 25 years.
- Majority of the surveyed women (62 percent) were married or had a domestic partner at the time of the interview. Most of the women (78 percent) were partnered at under 20 years of age and 95 percent of the respondents were partnered by the age of 25.
- More than half of households had four or more members (70 percent) with an average of 4.6 household members.
- Majority of respondents identified as Evangelical (53.9 percent) or Catholic (31.6 percent), with 11.4 percent not having a religious affiliation.
- Less than 5 percent of women identified themselves as belonging to an ethnic group (Garifuna-2.5 percent, black English speaker -0.1 percent, Lenca -0.2 percent, and Tawaka -0.1 percent).
- Only 17.2 percent of the women interviewed had obtained a high school certificate (up to 12<sup>th</sup> grade), 47.5 percent finished basic level (up to 9<sup>th</sup> grade), and 6 percent had studied at the university. Two (2) percent of respondents had no formal education.
- One in three women said they are employed (33 percent) – 15 percent in the private sector, 12 percent self-employed, and 4 percent in the public sector. Forty-four (44) percent of women had reported unremunerated work as housewives and 5.2 percent as students. Only 6.8 percent of surveyed women were looking for a job.

- The percentage of women who reported household income below 8,000 Lempiras (this level is slightly above the 2015 minimum wage) is 78.6 percent and 13.5 percent reported no family income.
- A notable 40 percent of women responded that they were married or in a domestic partnership more than once. Main reasons for terminating the previous relationship were abandonment for another partner (33.4 percent), mutual agreement (19.7 percent), partner death (10 percent), partner abuse (6.3 percent), and lack of economic support to family (6.3 percent).
- Women who were married or in a domestic partnership were asked about their husbands/partners. Most partners had completed basic education (57 percent) or secondary school (14 percent). Six (6) percent responded that their partner had not attended school.

Over 90 percent of the women with husbands/partners reported some level of involvement in household decision making, such as number of children and methods of family planning. In addition, a large majority of surveyed women reported having relatives living with them or nearby their houses (within the neighborhood or municipality), with 88.3 percent having good relationship with their relatives. Women’s active participation in community groups and organizations was low at 10 percent, with 1 percent involved in groups working to prevent violence in the community.

Forty (40) percent of the surveyed women admitted to suffering at least one gender-based violence experience (physical, psychological, emotional, sexual). As described below in the Introductory Note on Under-Reporting of GBV (below), the individual victimization of GBV is often underreported, particularly by women who are being surveyed in their homes by strangers (e.g., the GBV Team enumerators). Various studies show that “reported cases of domestic violence against women represent only a very small part of the problem when compared with prevalence data. This part of the problem is also known as the “iceberg” of domestic violence. An image where reported cases of domestic violence against women (usually the most severe end of violence) and homicide of women by their intimate partners represents only the tip of the iceberg. According to this metaphor, most of the cases are submerged, allegedly invisible to society.”<sup>9</sup>

Thus one could assume that in the case of GBV in Honduras, the number is significantly higher than 40 percent. Over half of women who were victimized told someone after the event (52 percent), mainly a family member or close friend. Only 13 percent of victims looked for outside help or support, which is most commonly explained by feelings of shame (46 percent) or a lack of trust (42 percent).

## **TYPES OF GENDER-BASED VIOLENCE**

As noted previously, the types of gender-based violence investigated in the study are linked to the classification within the Honduran legislation. Consequently, the women household survey, focus groups, and key informant interview questions were structured to probe about domestic violence and interfamily

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<sup>9</sup> Garcia, Enrique, *Unreported cases of domestic violence against women: towards an epidemiology of social silence, tolerance, and inhibition*, J Epidemiol Community Health 2004;58:536-537 doi:10.1136/jech.2003.019604

violence using the globally accepted classifications of psychological violence, physical violence, sexual violence, and economic violence. Nonetheless, it is important to note that, due to the frequency and relevance given to other types of violence (often sub-classifications of the categories noted above) by respondents during the process of data collection, other forms of violence are also explicitly noted, such as the case of incest or human trafficking. The general “culture” of violence within Honduras was consistently mentioned and is considered an important factor that reinforces or promulgates GBV, especially when related to violence perpetrated by violent criminal organizations (gangs, drug traffickers, etc.)

## INTRODUCTORY NOTE ON UNDERREPORTING OF GBV

Before introducing quantitative and qualitative results, the team would like to present some understandings to explain the contrast between the 40 percent victimization rate in the Women’s Survey and the near universal reporting of GBV in the focus group and key informant interviews. Global studies on GBV indicate the following: 1) Women tend to minimize or deny the violence that they suffer personally and 2) women tend to grossly under-report GBV, with a recent study of 24 developing countries indicating only 7 percent of victims (of physical and sexual violence), formally reporting the incident<sup>10</sup>. In the case of Honduras, the GBV team believes that the underreporting of GBV is linked to the following:

- **Patriarchal culture** - The patriarchal culture of Honduras might lead women to minimize GBV, considering it as natural and normal, resulting in the tendency of the population (including women) not to recognize some forms of GBV as acts of violence. In Honduras, this is likely further magnified by the contrast between the often hidden forms of GBV and the extremely visible forms of distorted “real violence,” namely violent homicides and assaults. As one police officer who was interviewed in Tegucigalpa mentioned: “If you want to know about violence, you should go to the “*posta del distrito*” (District Police Station)... if you go there, you will see real cases of violence.” (*real cases is meant to contrast with domestic violence cases that are not considered “real”*)
- **Machismo** - Machismo, which is a manifestation of the patriarchal culture where men assume that they are superior and can exert power over women, is omnipresent in Honduran society. In this context, women are ashamed to admit that they are suffering violence because society will tend to blame them as being responsible for inducing violence. Therefore, in addition to being a victim of GBV, women tend to suffer an additional social stigma if they complain. Consequently, women do not have the confidence to talk about their experiences. This is particularly the case when questioned by a stranger (such as a survey administrator). For example, although numerous measures were taken to ensure a secure environment when administering the WS, a woman from a University in Tela when interviewed for the study confirmed that: “*Domestic violence is underreported because women are afraid to speak for issues of*

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<sup>10</sup> Palermo, Tia. *American Journal of Epidemiology*, Dec 2013.  
<http://aje.oxfordjournals.org/content/early/2013/12/12/aje.kwt295.abstract>

*fear and social stigma.*" In addition, women may have the feeling that no one would help them because GBV is still socially viewed as an issue of private domain. A woman survivor of GBV who was interviewed reported that one day she had a serious accident inside her house and was screaming for help, but no one came to assist her. The following day a neighbor told her: *"I heard that you were screaming, but didn't go to help you because I assumed that your husband was beating you."*

- **Fear of gangs** - A relatively new element to consider in Honduras, according to information provided by participants of both FGDs and KIIs, is that the leaders of the gangs (*maras*) have recently banned community members in gang-controlled neighborhoods from reporting GBV. A community leader of one such settlement in Tegucigalpa, stated in one of the KIIs that this a very serious issue, *"If you dare to call the police to denounce domestic violence, you better sign your death sentence."*
- **Limited awareness regarding GBV** - Within the surveyed communities, there is a serious lack of knowledge regarding both the legal rights and obligations of women and men. There is scant awareness of the domestic and interfamily violence laws and government policies. As a result, many women, especially in poor neighborhoods and rural areas, do not have any information on the laws and their rights, are unaware that GBV is a crime, and have no idea of how the justice system functions or which institutions can provide them with support. On the other hand, men are also vastly unaware of the legal and judicial sanctions against perpetrators of GBV. Aside from a lack of awareness regarding the existing legal framework, as has been noted, the implementation of the laws and policies, and victims support services for GBV, are woefully inadequate.

The above factors, which tend to minimize the impact, reporting, and sanctioning of GBV, are reinforced by the Honduran government, which continues to struggle to provide basic security to its citizens. The rule of law in Honduras, and indeed the justice system, are plagued by corruption and impunity and lack credibility. Simply put, the combination of lack of reporting due to cultural context, with a limited response by the GOH, has led to the widespread acceptance and tolerance of GBV in the country.<sup>11</sup>

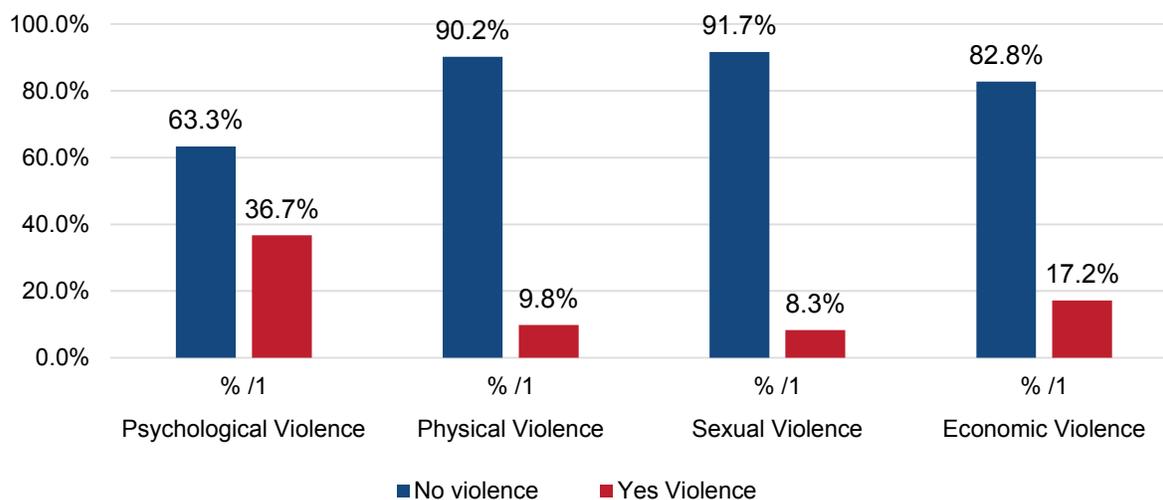
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<sup>11</sup> The Special Rapporteur for Violence Against Women of United Nations, Rashida Manjoo, mentions in the report on her mission to Honduras that: *"Violence against women is widespread and systematic and affects women and girls in numerous ways. A climate of fear, in both the public and private spheres, and a lack of accountability for violations of human rights of women are the norm, despite legislative and institutional developments."* United Nations, General Assembly, Document A/HRC/29/27/Add.1, March 2015.

## GBV STUDY DATA – TYPES OF GBV

The previous introductory section helps explain the response to the core question of the WS, regarding the **types and frequency of gender-based violence**, summarized in the following chart<sup>12</sup>:

**Exhibit 14: Types of GBV and Victimization Frequency**



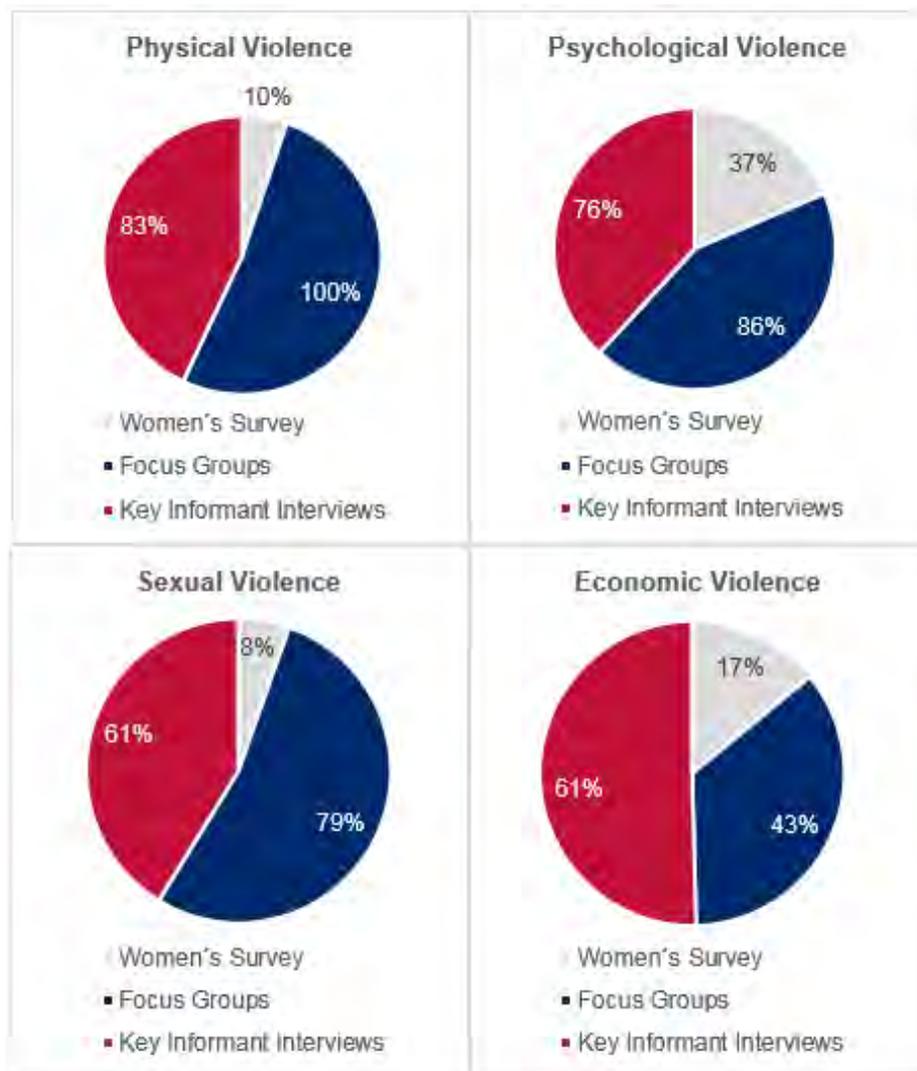
Source: GBV Women's Survey, Question 22, September 2015

The most reported types of violence in the five surveyed municipalities were psychological violence (37 percent) and economic violence (17 percent). Sexual and physical violence were reported by less than 10 percent of respondents, likely because they are more stigmatized and women are more reluctant to report physical abuse. Despite the abovementioned results, when the same question on types and frequency of violence was asked within KIIs (largely government and NGO leaders and officials at the municipal level and FGDs (representing diverse community members including teachers, youth, adult males, women's groups, and particularly vulnerable groups), the results different. For example, 100 percent of FGDs and 83 percent of KIIs ranked physical violence as the most common form of GBV, followed by psychological violence (FGD 86 percent and KII 76 percent), while sexual and economic violence ranked in third and fourth place, respectively<sup>13</sup> (see **Exhibit 15**).

<sup>12</sup> In this chart, frequency values of those answers marked as yes have been grouped (in the questionnaire, positive answers of violence were fragmented) in a Likert-type scale where: a=Always b= Almost Always and c= Sometimes. It is important to mention that, with few municipal exceptions, the most prevalent frequency responded was c (Sometimes).

<sup>13</sup> Based on the results of reports from FGDs and KIIs carried out in September and October 2015.

**Exhibit 15: Types of Violence and Prevalence According to Data Collection Methodology**



Source: WS, FGDs and KII GBS Study reports, October 2015

FGDs and KIIs noted other types of violence including incest, human trafficking (mainly of adolescents and girls), symbolic violence<sup>14</sup> (this type of violence was usually linked to media violence against women),

<sup>14</sup> SAGE Knowledge explains that “In the work of Pierre Bourdieu, symbolic violence denotes more than a form of violence operating symbolically. It is “the violence which is exercised upon a social agent with his or her complicity” (Bourdieu and Wacquant. 2002. 167, italics in original). Examples of the exercise of symbolic violence include gender relations in which both men and women agree that women are weaker, less intelligent, more unreliable, and so forth (and for Bourdieu gender relations are the paradigm case of the operation of symbolic violence).” <http://knowledge.sagepub.com/view/consumerculture/n534.xml>

homophobic violence and femicide. Political violence and violence against women at the workplace were also cited, but less frequently.

Of the 326 women who reported suffering from GBV, most suffered negative physical, psychological, and economic consequences. Of note and grave concern is that close to half of all women (45 percent) declared being psychologically or emotionally affected as a direct consequence of violence exposure, mostly expressed as nightmares, constant fear, nerves, depression, anxiety, or changes in sleep patterns. This is consistent with the findings of a multi-country Violence Against Women study, carried out by WHO in 2005, which declares that *“it is common for women around the world who are victims of intimate partner violence to have mental health problems, emotional distress and suicidal behaviors (...) In all environments studied, women who had ever had a partner and who had experienced physical or sexual violence, or both, by an intimate partner reported significantly higher levels of emotional distress compared to those who had not been victims of violence.”*<sup>15</sup> Of the group who did suffer GBV, 15 percent were threatened with death and 14 percent were pregnant when victimized.

When asked about the primary perpetrators of GBV, husbands or domestic partners were identified by 57 percent of respondents, followed by other members of the family (17.2 percent) and neighbors (14.1 percent). GBV was most commonly reported taking place in the home (84.4 percent of women who claim to be victims of violence), but also in the street (20%) and the workplace (10%). San Pedro Sula was the municipality where most women mentioned that those violent acts took place in the streets (28%) in comparison to lower levels in Tegucigalpa (14.4%) and Tela (12.5%).

Finally, the data collected indicated that there were no witnesses in the majority of violent acts (43.3 percent), but children were witnesses in an important number of cases (25.8 percent and 23.6 percent, boys and girls, respectively). The degree to which children of victims of GBV are exposed, are emotionally affected, and potentially induced to perpetuate the cycle of violence (intergenerational violence) is not fully understood in Honduras. Global studies indicate that children witnessing violence in the home exhibit more aggressive and antisocial (often called "externalized") behaviors as well as fearful and inhibited behaviors ("internalized"), and show lower social competence than other children. In addition they suffer from cognitive development problems and longer-term issues such as depression, and low self-esteem.<sup>16</sup>

Children who themselves suffer abuse or neglect as children are even more at risk, as “child maltreatment roughly doubles the probability that an individual engages in many types of crime.”<sup>17</sup> The issue of child sexual abuse, particularly rape and incest, was brought up by multiple respondents, particularly in the Tela region (and noted as a cultural issue considered a “rite of passage” according to

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<sup>15</sup> WHO. 2005. *Multi-country Study on Health and Violence against Women*. Resume of the Report. Geneva, Switzerland.

<sup>16</sup> Edleson, Jeffrey. Problems Associated with Children's Witnessing of Domestic Violence. <http://jiv.sagepub.com/content/14/8/839.short?rss=1&ssource=mfc>

<sup>17</sup> Currie, Janet. *Does Child Abuse Cause Crime*, National Bureau of Economic Research. <http://www.nber.org/digest/jan07/w12171.html>

the Garifuna community leaders interviewed). While there are no studies in Honduras looking at the relationship between childhood experience of violence and how it impacts behaviors as adults, the connection between children exposed to violence and future violence was repeatedly mentioned during the study as one of the main causes for current levels of violence.

*“Children growing up in families where there is violence may suffer various behavioral and emotional disorders. These disorders can also be associated with the commission or the suffering of violence in later stages of life” (government worker, Tegucigalpa).*

Another woman from the public prosecutor’s office in La Ceiba commented:

*“The most terrible thing is that not only no importance is given to the issue of violence against women, which is for the present generation, but neither to the future generation who are the children. No one focuses on what is important to assess: the multi-generational impact.”*

As noted in the introduction of this section, women are apprehensive about confiding their GBV suffering with other people, particularly those whom they do not personally know. This was clearly observable when GBV self-identified victims were asked if they told anyone what had happened to them, with approximately half saying they had not spoken to anyone. For those who did speak to someone, most commonly they confided in a female member of the family (52 percent), a friend (36 percent), or a male member of the family (19 percent). When confiding, the majority of women acknowledged receiving emotional support (75 percent) and in a few cases they were told to seek advice from a religious authority (8 percent), to appeal to a human rights organization (7 percent), or to look for medical assistance (5 percent).

For the 49 percent of self-identified GBV victims who did not share their experience with others, a further question was posed as to why they did not confide. The most powerful reason expressed was because “they do not trust anyone” (42 percent), followed by feelings of shame (36 percent), fear of being blamed or rejected by family and friends (13 percent), or just because they thought nothing can be done (11.5 percent).

A mere 13 percent of victims sought support from institutional actors (legal, police, medical, or psychological assistance). Even fewer victims have the sense that anyone has been helpful. Less than 10 percent of victims reported having received support from: (1) a religious authority (3.5 percent), (2) lawyer/judge or traditional justice actor (3 percent), or (3) a local authority or police officer (2 percent).

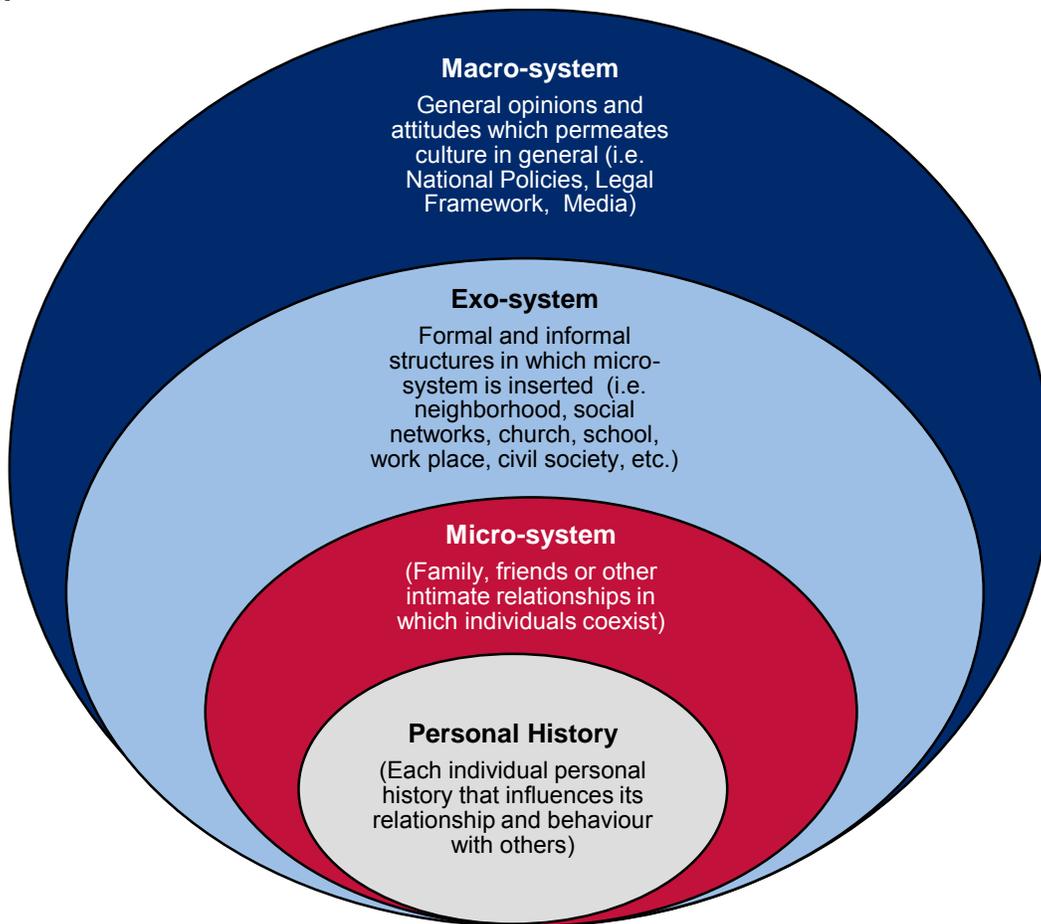
## **CAUSES OF GENDER-BASED VIOLENCE**

Gender based violence is usually linked to imbalances in power relations between men and women, where women are generally seen as victims and men as perpetrators. However, it is important to acknowledge that both men and women can experience GBV and that these relations are not limited to the private sphere. From the perspective of the different actors interviewed for this study, the responses regarding the causes of GBV go well beyond power dynamics and are the result of a web of

intertwined of social, economic, and cultural factors. As can be seen in **Exhibit 16** below, these factors are often summarized in a social ecology model, popularized in the late 1990s by Heise, in which “an ecological approach to abuse conceptualizes violence as a multifaceted phenomenon, based on an interaction between personal, situational and sociocultural factors”.

The first inner circle represents the factors of personal history that each individual brings in relationships and behavior. The next circle, the micro-system, represents the immediate context in which the abuse takes place, often in family or other known or intimate relationships. The third level, the exo-system, includes both formal and informal institutions and social structures in which the micro-system is integrated: the workplace, neighborhood, social networks, and identity groups. And finally, the macro-system represents the general opinions and attitudes that permeate culture in general.

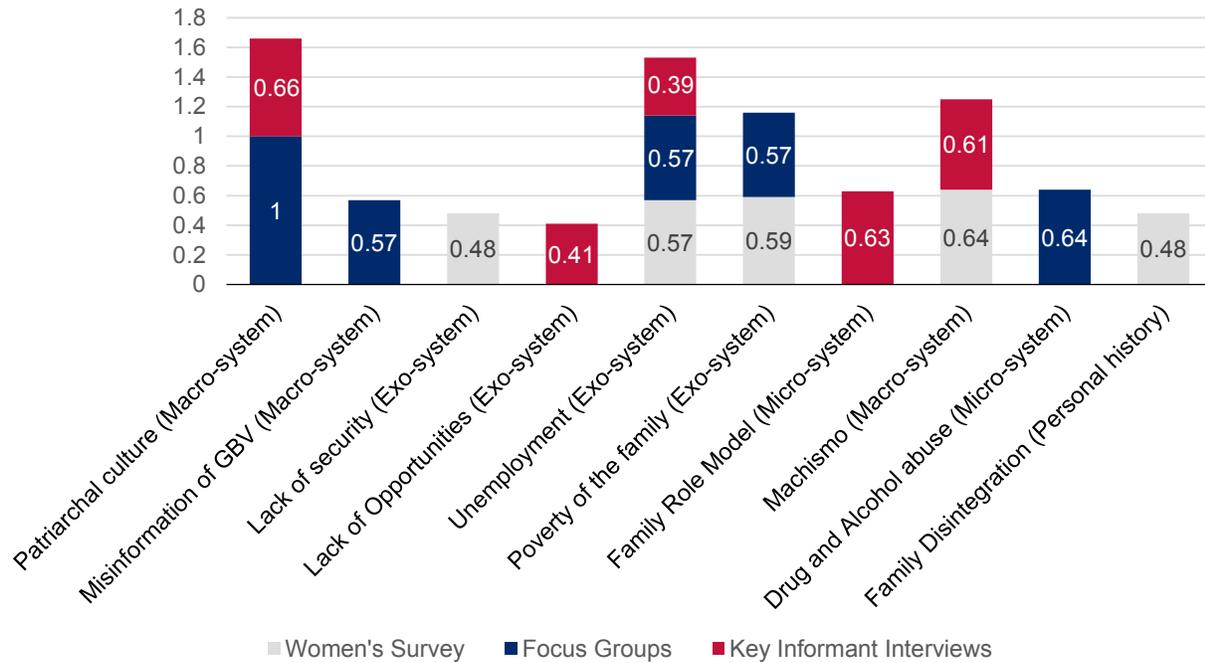
**Exhibit 16: Factors Related to Violence against Women at Different Levels of the Social Ecology Model**



Source: Heise, L. (1998): *Violencia contra las mujeres: un marco ecológico integrado* en Backhaus et al.(1999) *Violencia de Género y Estrategias de Cambio. Proyecto de Promoción de Políticas de Género*, GTZ, Managua, Nicaragua (p. 32).

Taking into account Heise’s ecological framework, **Exhibit 17** identifies the main causes of GBV according to the different data collection methodologies used in this study; namely women household survey, key information interviews, and focus group discussions.

**Exhibit 17: Five Main Causes of the GBV According to the Study Research Methods**



Source: Reports from WS, FG and KII of GBV Study, Honduras, October 2015.

It is interesting to note how the perceived causes of GBV vary according to the data source. For example, WS respondents related violence more to their immediate environment (personal history and micro-system), noting, in order of importance, machismo, poverty, unemployment, lack of security, and family disintegration. By contrast, key informant interviewees (mainly representatives of the government, NGOs, and private institutions, often with a mandate to address GBV), emphasized causes relating to the exo- and macro-systems, specifically patriarchal culture, poor family role models, machismo, lack of opportunities, and unemployment. Focus group participants represented a variety of sectors across Honduran society and appraised patriarchal culture as the primary cause of GBV, followed by drug and alcohol abuse, misinformation on GBV, unemployment, and poverty. Points of coincidence in data sources (defined as main causes by two or more sources) were the patriarchal culture (macro-system), followed by machismo (micro-system), family poverty (micro-system), and unemployment (exo-system). In conclusion, for participants of the study it is clear that origins of GBV are linked to important cultural issues that are permeating power gender imbalances in society from macro to micro levels, but also there are structural factors of economic exclusion and inequity that are inducing and reinforcing GBV.

A young girl from a community youth group in Choloma commented:

*"We all have seen violence at home: My dad said that if you're the man, you are the boss. There is violence everywhere – in television, music, the media, schools – and women are nothing but sex objects, just look at the narco soap operas."*

While a woman interviewed from the Judiciary System in San Pedro Sula stated:

*"The causes of violence are mostly social, but also poverty, abandonment, and marginalization in which both women as victims and men as aggressors are living since their childhood; it becomes accumulated over lifetime until it becomes a time bomb that explodes before any frustration."*

Participants also mentioned several other relevant causes of GBV, although noted with less frequency, including impunity and lack of law enforcement, irresponsible fatherhood, parental abandonment (linked to migration), women's economic dependence, lack of community infrastructure for recreation, and the pervasive (negative) influence of social media. Regarding this last point in relation to media and women's issues, a woman leader from a community group in Tela affirmed that the media tends to project women's image as sexual and provocative objects:

*"Journalists handle very badly and paint an ugly image of women, ridicule and blame them."*

## CONSEQUENCES OF GENDER-BASED VIOLENCE

Much like the findings regarding the causes of GBV, the perceptions regarding the consequences of GBV also vary between data sources and are summarized in **Exhibit 18** below. Women surveyed in their households identified consequences as linked to their day-to-day experiences and expectations, with the large majority (70 percent) citing family disintegration. Family disintegration also factored heavily in focus groups (57 percent) and, to a lesser extent, key informant interviews (37 percent). In poor and crime-ridden neighborhoods of Honduras, intact nuclear families (mother, father, and children) are the exception, not the norm. Most households have been reconstituted or "re-assembled" more than once and children cohabitate with a stepfather (or stepmother), or with absent parents (care provided by relatives). A woman from an international NGO in San Pedro Sula, describes family dynamics in the following way:

*"In Honduras women have not a leg to stand on because once a man divorces her, he also divorces from the children even if they are his own children, they say (as excuse) (sic) I'm not going to feed the new goat" (saying that they will not support their children as that support might benefit a probable future husband that a woman may have).*

This quote may illustrate why the second more important consequence of GBV noted by survey respondents is the poverty of the household (59 percent WS and 41 percent KII). Given the prevalent patterns of irresponsible fatherhood, in which fathers commonly abandon their pregnant partners, do not recognize their offspring, or abandon mothers and small children, the impact of GBV on women and

children and the overall well-being of the household can be devastating. This is heightened by the limited economic opportunities in the neighborhoods as a whole and economic discrimination against women. The issue of economic dependency, or the lack of economic autonomy, was mentioned repeatedly by respondents as one of the key reasons women stayed in violent relationships.

*"Many women reported violence to the police but maybe just 30 percent would continue with a legal complaint, many do not want to continue with the process for fear of losing their partners or lose economic support for their children because many of them are housewives. Let's say that from 1,000 cases of women who may be suffering violence, only 300 may report it and from these less than 150 may continue with the complaint." (municipal police officer, La Ceiba)*

The third consequence mentioned most frequently in the study is teen pregnancy (52 percent WS and 46 percent KII). Teen pregnancy was linked to two distinct issues, the first related to sexual abuse (incest or rape)<sup>18</sup> and the second linked to early marriage of adolescent girls as a way to escape a conflictive family environment.<sup>19</sup> As noted in the literature review, it is widely acknowledged that early pregnancy is a powerful disincentive to girl's educational opportunities, which increases the risk of future poverty and represents a threat to reproductive health.

**Migration** (40 percent WS and 57 percent FG) was also acknowledged as a serious consequence of GBV. Migration includes displacement to other neighborhoods or locations in the city, within the country, or internationally (mainly illegal migration to United States). Economic migration, whereby women search for better opportunities for themselves and their children, is also linked to a lack of income-generating opportunities. The high levels of violence suffered by migrants en route to the United States (particularly women) have been well documented and lead to further victimization. Also, parental migration often results in child abandonment or further child migration.

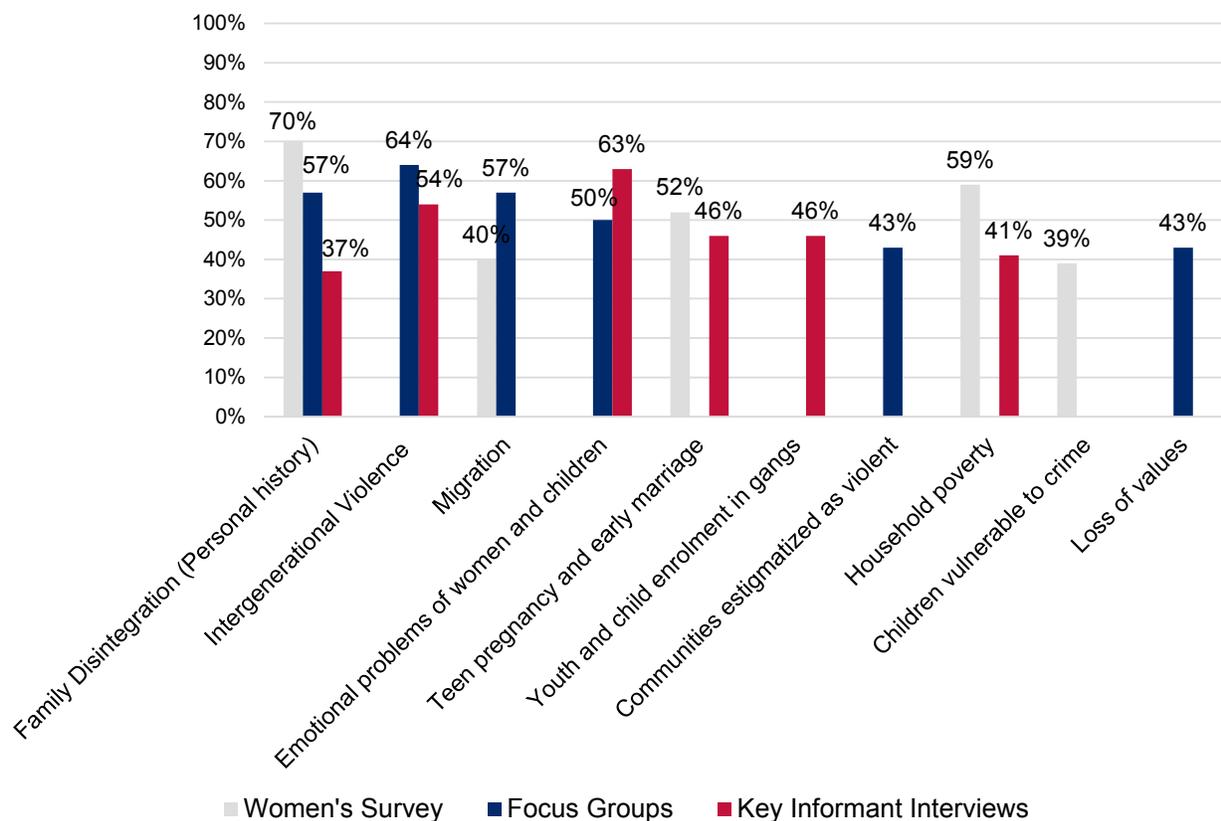
**Emotional problems of women and children** KIIs and FGDs frequently cited these (e.g., depression, anxiety, abnormal sleep patterns, and suicide) as a consequence of GBV (KII 63 percent and FG 50 percent). Both KII and FGDs also voiced concern about the impact of intergenerational violence (patterns of violence transferred from parents to children). Women surveyed as part of the study also noted their fear that their children would join criminal groups (WS 39 percent and KII 46 percent). Finally, FGD participants also brought up the issues of the loss of societal values and the stigmatization of communities, which leads to discrimination against residents, particularly in regards to finding gainful employment.

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<sup>18</sup> The Center for Women's Rights on a recent bulletin of sexual violence in Honduras has pointed out that from 12,905 cases referred by the Public Prosecutor for Forensic Medicine evaluation, 72% were for girls and adolescents between 10 and 19 years old (CDM, July 2015).

<sup>19</sup> The Honduran National Health Survey (ENDESA) from 2012 reported that 24 percent of girls and adolescents between 15 and 19 years have been pregnant and, according to UNFPA 2012 State of the World's Population, within Latin America Honduras has the second highest rates of pregnancies in women between 15 and 19 years (108 out of 1,000), surpassed only by Nicaragua.

**Exhibit 18: Five Main Consequences of GBV According to Research Methods of the Study**

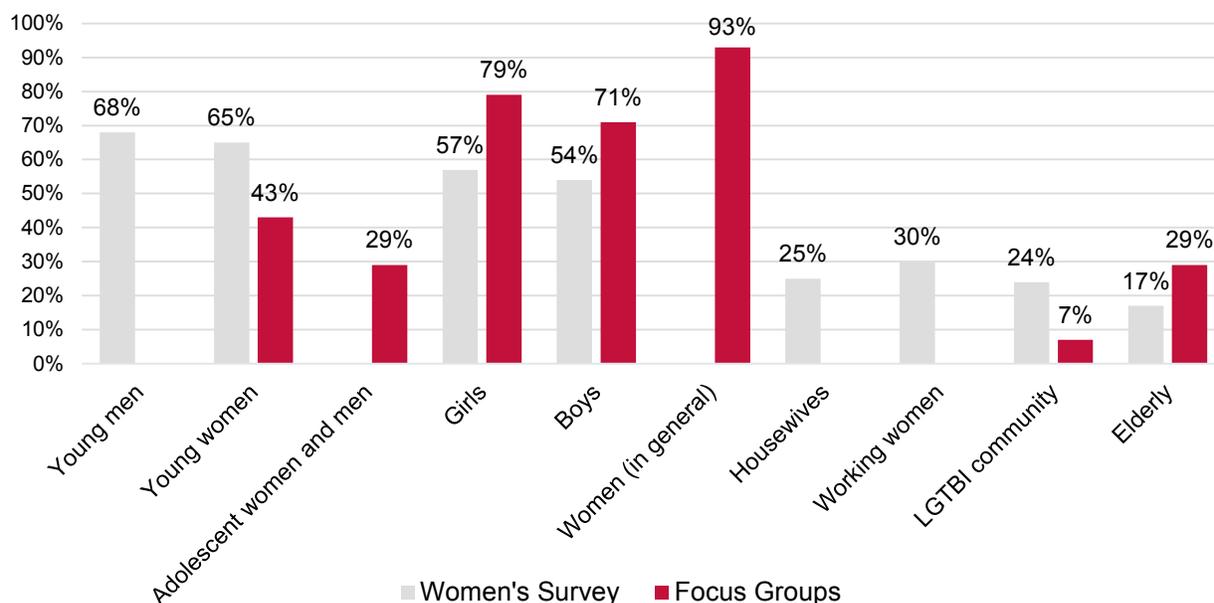


Source: Reports from WS, FG and KII of GBV Study, Honduras, October 2015

## GROUPS MOST VULNERABLE TO GBV

A specific question raised in the women household survey and the focus groups was related to the perception regarding which groups suffer the most from violence in the community. The results are summarized in **Exhibit 19** below. Focus groups almost unanimously identified women as suffering the most. This statistic is likely associated with women’s roles as mothers within the community. The survey data presented more specific disaggregated data, with young men and young women suffering the most (at 68 percent and 65 percent, respectively). Girls were also seen as particularly vulnerable, being mentioned by 79 percent of focus groups and 57 percent of women survey respondents, with boys suffering at only a slightly lower level. Women surveyed were also more sensitive in identifying GBV exercised against the LGBTB community – 24 percent of respondents identified this, as opposed to only 7 percent of focus group participants.

### Exhibit 19: Who Suffers the Most from GBV in your Community?



Source: Focus Groups Report on GBV Study, Question 1, October 2015

## APPROACHES, SERVICES, AND INSTITUTIONAL RESPONSES TO GENDER-BASED VIOLENCE

As stated previously, the GBV Team considers that the main challenges facing the Honduran government to provide an adequate response and reduce the levels of GBV include:

- 1) **Challenges in application of laws and implementation of policies** - Although the country is a signatory of different international and regional treaties to tackle GBV and benefits from a robust legal framework, law enforcement is distressingly lacking and impunity levels are extremely high.
- 2) **Limited support for GBV prevention and victim support at the local level** - Although there are some violence prevention plans at the municipal level, not all address GBV and few are adequately funded. There is a lack of a comprehensive framework to coordinate actions of various national and municipal actors. Services at the local or community level are essentially nonexistent.

Both of these challenges are associated with a lack of political will, minimization of the importance of GBV, corruption, and the undermining of institutions that have the mandate to work on GBV. An overwhelming majority of KII agreed that, even though there are, in theory, structures in place to address GBV, there is a lack of coordination and cohesion among service providers and justice

operators, and an alarming lack of funding. Furthermore, many respondents indicated that the demand greatly outstrips supply of services, typically centralized in urban areas, leaving a large majority of the population without any support. As a key informant representing a women’s network in La Ceiba has pointed out:

*“Poor women in non-urban areas do not reach care facilities or any other services because they have no money, even for transportation. Prevention work in these areas is not existent, the state has few stationary services, but these do not reach the more remote communities in town, less in rural areas”.*

Participants from FGDs also clearly articulated a weak public institutional structure related to GBV. According to FGD participants, this incipient and weak institutional structure may have also contributed *“to put more weight on symbolic violence upon subjectivities, practices, and manifestations on violence against women, with a negative impact on impunity levels, brutality of violence, increment of violent women deaths, masculine supremacy, misogyny, and dehumanization of life.”*<sup>20</sup>

Aside from the government, there is a significant number of organizations that are working to some extent to either prevent or respond to GBV. However, the funding for these organizations and community groups, many of which focus on women’s issues, has been drastically reduced in recent years because both international and national donors have channeled support to groups that work with young at-risk men. Few of these initiatives incorporate a strong gender component or work on issues surrounding masculinity.

## **OVERVIEW OF INSTITUTIONAL RESPONSES**

When participants from the different groups were asked to identify the existing initiatives that address GBV, there was again a divergence based on data collection sources. Respondents of the WS were concrete in identifying a list of institutions that have a visible presence in the community, namely the Ministry of Security, the National Police, the Municipality, and the Church. Close to 20 percent said there was no institutional response to GBV. KIs tended to note municipal initiatives, mentioning the existence of Inter-institutional Committees on GBV Violence (37 percent), and GBV policies and plans (37 percent). But at the same time, when probed for more detail through the FGDs, there was a great deal of criticism regarding the role of authorities. The below summarizes the frequency with which FGDs mentioned the issues (with similar statements):

- “Authorities do nothing” (93 percent)
- “Complaints result in nothing” (71 percent)
- “We have no confidence in the police” (50 percent)
- “In our communities, you see, you listen, and you keep quiet” (36 percent)
- “Women’s organizations are the ones working to fight GBV” (29 percent).

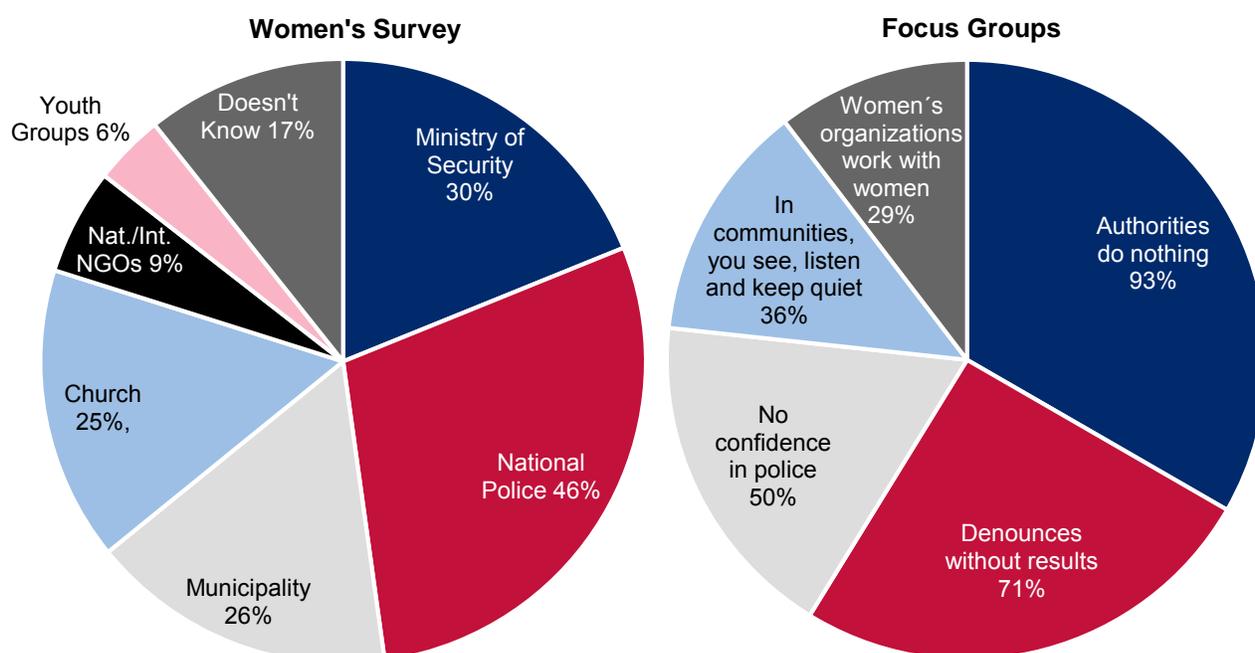
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<sup>20</sup> GBV Study, Focus Group Discussion Report, October 2015, Annex G, p. 17.

The reflection of a woman representing the Justice Sector in La Ceiba summarizes the challenges:

*“A better connection is definitely needed between all institutions working on this same subject (GBV) both the state and NGOs, if they try to work together they could do a better job. As a system of institutions there are many with a lot of deficiencies, a specific case is when a woman arrives to file a complaint for violent assault, sometimes a physical evaluation is not performed because the doctor is out, which is a major flaw because this information is vital as evidence to the courts. Moreover, members of the judiciary are not sufficiently linked or there are not enough judges [to] provide an adequate response. These deficiencies affect many women, who are confused or unaware of where they need to go or what they have to do.”*

**Exhibit 20: Institutions that Respond to GBV, Based on FGD and WS responses\***



\* Data is based on frequency in which institutions have been mentioned by participants. Multiple selections account for percentage to exceed 100%.

KII identified a number of agencies responding to violence against women, although informants recognized that the majority do not adequately address GBV. Among the most mentioned are:

Government Institutions	Non-government Institutions
Police Emergency Line (911)	Women's and Feminist organizations (NGOs)
Family Council Units (Consejerías de Familia)	Youth Community Centers (NGOs) (Centros de Alcance)
Domestic Violence Courts	Violence Prevention Community Groups (NGOs)

Government Institutions	Non-government Institutions
Women's Public Prosecutor Office	Free legal counselling provided by universities (UNAH, UNICAH, UNITEC)
Municipal Women's Offices (OMM)	Shelters for VAG survivors (NGOs)
Human Rights Defenders (CONADEH)	Early Pregnancy Prevention Community Committees (NGOs) (COPEITSAS)
One Stop Centers (CEIN La Ceiba y SPS)	
Violence Observatory from National University (IUDPAS)	
Shelters for VAG survivors (municipal level)	
Health Centers at community level	

The KII questionnaire also included a question about efficiency and efficacy of institutional responses and the large majority of observations noted the weaknesses, as summarized in **Exhibit 21** below:

**Exhibit 21: Observations on Efficacy and Efficiency of GBV Institutional Responses (in order of importance)**

Positive		Negative	
There are some improvements	27%	Insufficient institutional capacity	46%
Good services	12%	Lack of resources	46%
		Inexistence of institutional services	32%
		Work overload	17%
		Corruption and lack of political will	17%
		Lack of specific training on GBV	17%
		Lack of logistics	17%
		Processes are slow	17%
		Low efficiency/lack of credibility	15%
		Efforts are dispersed/lack of sustainability	15%

Clearly, informants across the board recognized the severe institutional limitations. The rest of this chapter examines in more detail the principal sectors that have a mandate to address GBV, namely the justice sector, health sector, municipal authorities, and community actors.

## JUSTICE SECTOR

In this section, observations regarding the efficacy of the key justice sector institutions (the Courts, Public Prosecution, and the National Police) are presented.

### JUDICIARY (*ORGANISMO JUDICIAL OR OJ*)

In 2006 the Honduran Supreme Court created a set of specialized courts, the Special Domestic Violence Courts (hereinafter: Special DV Courts), to address GBV and currently three exist nationwide. These Special DV Courts have extremely limited coverage and staffing. Where a Special DV Court does not exist (in the majority of the country) a Justice of the Peace, who has limited specialized training or knowledge, receives complaints.

There was positive feedback provided by respondents regarding the Judiciary, namely:

- **Creation of a Gender Unit of Supreme Court** – Created by Resolution No. 4 of September 4, 2010, the Gender Unit was acknowledged to play an active role in training of personnel, dissemination of legal information to diverse audiences, and coordination of public and private institutions working on GBV initiatives.
- **Efficiency of Special Domestic Violence Courts** – Respondents noted that the Special DV Courts maintain good records regarding the number of complaints that are admitted, processed, and sentenced. This data collection is led by the Statistical Data Unit through the Center for Justice Statistics (CEDIJ).
- **Assignment of Sentence Enforcement Judges** to Special DV Courts – Several respondents noted the importance of the assignment of a Sentence Enforcement Judge to the Special DV Courts. This judge is responsible for supervising the application of penalties for perpetrators. Many informants acknowledged that, without proper supervision, the penalties are rarely applied.
- **Launching of Mobile Courts** - In Choluteca, San Pedro Sula and Tegucigalpa, mobile Peace Courts have been able to provide more localized services and receive complaints to be referred to the Special DV Courts.
- **Introduction of new GBV protocols** – The Judiciary has published a set of protocols and special guidelines to respond to cases of domestic and interfamily violence. The Coordinator of the Gender Unit of the Supreme Court emphasized the following:

- Comprehensive Care Protocol for victims of violence against women in situations of domestic violence and interfamily violence
- Technical Guide Protocol implementation
- Sixty-four (64) rules for comprehensive care for victims of sexual violence
- Instructions for use of the Gesell Dome camera (used to record survivors to prevent re-victimization).<sup>21</sup>

While the above highlight some of the positive steps being taken by the Judiciary to address GBV, there were also many complaints and criticisms, including:

- **Poor selection and orientation of judges** – It was noted that many judges appointed to the Special DV Courts were not sensitive to issues around GBV and have not received adequate training. This is particularly a concern with Justices of the Peace.
- **Inadequate application of GBV victims care procedures** – While the protocols may exist, this does not mean that there is widespread understanding or application. On the contrary, KIIIs indicated the lack of implementation of the GBV protocols and guidelines.
- **Poor summons delivery systems** – Insufficient resources (both human and financial), as well as lack of appropriate logistics, result in staff being unable to deliver summons in a timely matter, or in some cases at all. There were also several comments that the victims themselves were asked to deliver the summons, putting them at further risk of retaliatory violence.
- **Underutilization of Gesell cameras** – Gesell Dome cameras are not always used, even if they are available, due to a lack of trained staff or attention to protocols.
- **Insufficient number of judges and staff** – With few judges and even fewer judicial staff members assigned to the Special DV Courts, judges tend to have an unmanageable caseload resulting in slow response times, among other issues. These delays often result in the case being dropped. As noted by Special DV Court Judges in San Pedro Sula and La Ceiba, respectively:

*“Domestic Violence Court responsiveness is not as expected because the assigned personnel, including judges and secretaries, is far below the number required to handle the number of cases admitted each day. Because of this, hearings are scheduled for a month to 6 weeks after the complaint is received, even though the law says it must be held expeditiously in 24 hours.”*

*“For example, right now there are cases being cited for hearings in November (the interview was carried out in early September), which will lead many women to drop the case, or even worse, suffer from even more violence until the hearing is held.”*

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<sup>21</sup> The Gesell Dome is a room with one-way mirror. It is one of the measures used to obtain survivors’ statements while avoiding their re-victimization.

## PUBLIC PROSECUTION (*MINISTERIO PUBLICO* OR MP)

In 1994, the Public Prosecutor created the Special Public Prosecutor's Office for Women and Children's Affairs. In 1997, with the reforms to the Penal Procedure Code, the *Fiscalia Especial de la Mujer* became an independent body focusing only on crimes committed against women, including sexual violence. More recently, a Femicide Research Unit was created in 2008 and annexed to the *Fiscalia Especial de la Mujer*, although in February of 2013, this unit was absorbed into the Prosecution of Crimes against Life, causing great concern to women's organizations.

Positive feedback regarding the Special Prosecutor's Office for Women's Affairs includes:

- **Implementation of the Comprehensive Care Model (MAI) and related protocols** – Several respondents noted the importance of the MAI, first established in La Ceiba in 2011 with ongoing attempts to replicate it in other regions. The MAI provides coordinated medical, psychological, and legal support for victims.
- **Appointment of Special Prosecutors**– The appointment of Special Prosecutors to investigate crimes against women has been lauded as a positive step forward.

Limitations of the Special Prosecutors for Women's Affairs include:

- **Inadequate private space for hearings** – Most offices do not have separate physical spaces to guarantee women's privacy or to separate children from their mothers when they need to provide details regarding the crime.
- **Limited geographic coverage** – The Special Prosecutor's Offices for Women's Affairs are limited to a few cities (La Ceiba, San Pedro Sula, Santa Rosa de Copán, and Tegucigalpa).
- **Uncertainty regarding the role of the Technical Agency of Criminal Research (ATIC)** – The protocols and operation of the newly created ATIC are unknown. For example, it is unclear as to whether ATIC investigators would receive GBV training.
- **Lack of resources** – Similar to all government agencies, there were many complaints regarding the lack of equipment, materials, and logistical capacity. Prosecutors, like the police, frequently use their own personal resources (e.g., telephone, transport) to get their work done.
- **High turnover rates and lack of empathy** – Turnover rates of prosecutors and investigators are very high due to political interests, and often prosecutors are not committed to GBV issues. In criticizing his colleagues, one prosecutor commented: "*To be a public prosecutor, you must have empathy; if you don't have the capacity to put yourself in the place of other people, better put a grocery store or raise pigs.*"
- **Insufficient number of prosecutors and investigators** – Due to budget cuts, there are few investigators available to work on the cases, resulting in the prosecutors themselves having to assume the role of investigators. One prosecutor noted:

*“We as prosecutors are very frustrated due to the lack of institutional support. We would like to respond to at least 80 percent of our cases, but perhaps our resolution rates are reaching 20 or 30 percent. Our Women’s Office used to have a good percentage of judicial orders and judgments issue, but this is no longer the case because the Special Crimes against Women Unit does not exist. Now from 20 cases that are presented, investigations are made for maybe 3, and from these, only 1 is sentenced.”*

## POLICE

As pointed out by one public prosecutor in La Ceiba: *“The biggest point of entry to the problems of domestic violence in the city is the police.”* This comment is highly consistent with the results reported on VS in all five municipalities because the police stations (or *postas*) have the greatest geographic coverage and, typically, are the only State presence at the community level. However, the great majority of complaints voiced by respondents are related to the police performance and attitude. This is not surprising given that several police officers interviewed showed little understanding or interest in GBV. Even a Chief of Police showed his ignorance by asking the interviewer a series of questions that showed a clear disregard of the legal framework on GBV and the role assigned to the police:

*“And what exactly is this issue of domestic violence?”*

*“Who has the right to influence in a problem between couples?”*

*“The person who comes first to file a complaint wins.”*

*“Words are not violence.”*

It is striking to note how little knowledge this seasoned and senior police leader had and his overt unwillingness to publicly dismiss GBV. It was generally agreed that the police are not adequately trained on GBV, nor do they take the issues seriously. A local government official in Tela and a public prosecutor in La Ceiba commented, respectively:

*“We must strengthen support from the police on GBV because it is not right that police officers keep blaming women when they receive the cases of violence, especially those occurring after working hours and during the weekends. All police should have a special area for women victims of violence.”*

*“The police must create a training mechanism to provide better attention to gender issues so they can better serve women. The formation of a policeman should not be an isolated talk of one day, but should be fully integrated into their educational training curriculum.”*

This challenges of providing adequate training and police applying their knowledge are exacerbated by the high turnover rates of officers. According to a Special DV Court Judge in San Pedro Sula:

*“Definitely something has to be done to work with the national police because, although many courses and many induction are given (from different organizations) (sic), there is a serious problem of staff turnover, it is like if you throw salt to sea water. A police officer is trained the first year (when he comes to the municipality), and when you return to provide the next elements, you no longer reach the same staff.”*

Another serious problem reported was with the hotline 911 used for emergency police calls. In the past, each municipality had its own emergency call center, but the call center is now centralized in Tegucigalpa, which has reportedly led to serious delays in police responding to local complaints. Note that the hotline 114, created to support GBV victims, is no longer operational.

Respondents voiced the clear observation that the government is investing heavily in military forces at the community level and were particularly concerned about the presence of the military police (Policia Militar de Orden Publico or PMOP). With a visible presence in public spaces, the PMOP is meant to convey a sense of security, although respondents actually reported feeling less safe and often further victimized by the forces. Youth respondents in Choloma noted:

*“The investment that has been made in the military police is dangerous because they are not trained to work with the population.”*

*“Military only come to look at girls in the park. The military molest girls and annoy boys. When there is a group of young men, they always stop them. I believe that the situation is worse with the military and the police. They are killing us. Youth organizations are falling apart.”*

## **SERVICE PROVIDERS**

In addition to the justice sector, which is mandated by the State to resolve criminal cases, service providers offer support to victims (and in some limited cases perpetrators) of GBV. Observations shared by respondents are detailed in the below sections.

## **HEALTH SERVICES**

One of the main contributions of health sector in Honduras to address GBV is the creation of the Family Counseling Units (*Consejerias de Familia*) in 1993. The *Consejerias* are tasked to “function as a monitoring mechanism and guarantee of human rights, and to prevent and provide assistance, protection and support to victims of interfamily violence.”<sup>22</sup> In 2005, Article 6 of the Honduras Domestic Violence Act added a legal obligation to the mandate of the *Consejerias* by declaring that they “are tasked to prevent the recurrence of the domestic violence through the rehabilitation of perpetrators and the strengthening of the self-esteem of women.”<sup>23</sup>

*Consejerias* are strategically located at hospitals and health centers in populated neighborhoods, and are meant to serve as a one-stop-center, providing multi-sectorial case management for victims, including counseling, assistance from a social worker, and legal services in one location. Some of them also provide counseling to male perpetrators and work on redefining masculinity. Meant to cover the whole

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<sup>22</sup> Article 1 of Family Council Regulation approved by Executive Agreement No. 0153 of July 5, 1993

<sup>23</sup> Gobierno de Honduras (2005): Ley contra la Violencia Doméstica y sus reformas, Decreto 250-2005, Diario La Gaceta 30,950, 30 de marzo del 2006

country, less than 12 Consejeria are still operational, most providing only limited services due to scant resources. In the case of San Pedro Sula, the Consejeria attached to the Hospital Leonardo Martinez (the main hospital for the North Coast) closed due to lack of staff funding and the international NGO CARITAS has temporarily assumed the provision of services. Regarding CARITAS, a staff member noted:

*"In the absence of a Consejeria in the region of Sula Valley, CARITAS receives clients from different municipalities (including Pimienta, Potrerillos, Villanueva, San Manuel, La Lima, Choloma and Puerto Cortes). In order to facilitate access to service [for] users, the psychologists are mobilized once a week to other municipalities providing coverage for certain regions, especially Puerto Cortes and Villanueva as meeting points for people from nearby municipalities. Actually, the work of CARITAS is filling a role that is a State's responsibility."*

Apart from the limited coverage, some of the problems faced by the Consejerias, as mentioned by KIIs, include:

- Lack of human and financial resources – Many of the Consejerias do not have technical staff, lawyers, social workers, and masculinities re-education specialists. Extension services, previously provided by social workers, are no longer offered. Telephone lines are not available for emergency situations, resulting in staff using their personal phones. Personal contributions are also used to fund transport, photocopies, and assistance to victims and their children. Different respondents noted that the Consejerias work with meager resources. (*trabajan con las uñas* they work with their fingernails).
- Scant support for masculinity reeducation – While the law dictates the need for perpetrators to attend masculinity sessions, almost no services actually exist, with just two specialists nationwide, both based in Tegucigalpa (Alonzo Suazo Health Center and Villa Adela).
- Community outreach – As noted, the Consejerias, which used to do extension work, no longer conduct community visits. According to respondents, *"You cannot work now in communities because people do not want to risk their lives."*
- Lack of internal supervisory structures and resources – In the past, the Consejerias were part of the Mental Health Department. With the new multi-tier health structure (called *Redes*), specialized mental health department no longer exists. As such, the Consejerias, already with insufficient resources, have been effectively abandoned.

## MUNICIPAL SERVICES

In the absence of sufficient specialized national bodies to address GBV, several municipalities have created their own structures, mainly through the Municipal Offices for Women (*Oficinas de la Mujer*, OMM). The OMMs are often the first point of entry (after the police) for victims of GBV to look for support. There are significant variations between OMMs in each municipality, largely determined by the political will of the mayor, levels of advocacy by women, and the availability of financial resources. While

some OMMs have been fully equipped and have multiple staff, others consist merely of one woman and a desk. Like many others who support GBV victims, employees of the OMMs often use their own resources.

Since the approval of the Integral Policy of Coexistence and Citizen Security 2011-2022, many municipalities, including the five municipalities that form part of this study, have formulated municipal security plans. In 2015, with funding from USAID, UN Women, and UNDP, several municipalities have designed gender-sensitive security plans. Implementation of the plans is often limited by a lack of financial resources. Multiple municipal government representatives complained about the fact that the national government was not channeling resources from the Security Tax.

## COMMUNITY RESPONSES

With limited support from the national and municipal governments, respondents acknowledged the important role assumed by community groups, particularly women's groups. However, they also complained about a consistent decline in support from the government and donor community. The GBV Analysis Team visited several nationally recognized women's groups (for example the Mariposas Libres of Tela and MOMUCLA of Choloma) that no longer receive any external funding.

# FINDINGS AND DIAGNOSIS - GBV IN SCHOOLS

## SCHOOL-RELATED GENDER-BASED VIOLENCE (SRGBV)

As previously pointed out, the school years are critical in terms of shaping the characters of boys and girls, in influencing the acquisition of norms and values needed to function in society. For this reason, it is crucial for schools to play a role in impeding and preventing violence, and to develop educational plans and policy initiatives for violence prevention that respond to current realities and needs of children.

Due to its complexity, GBV must be analyzed in a relationship manner because SRGBV has multiple manifestations including: teacher-girl, teacher-boy, boy-girl, boy-boy, and girl-girl relations, among others. One of the most common manifestations of gender-based violence in schools is seen in the abuse of power of teachers towards students, often in the form of sexual harassment. During the process of data collection for this study, female students expressed a prevailing concern about the proliferation of cases of sexual harassment and abuse in the schools:

*"Harassment is common and constant – apparently there is no remedy. Many times I was hiding from a male teacher and missed many classes. Teachers have no shame and blame girls, they also threatened us with our grades. School committees that can regulate sexual harassment do not exist." (adolescent girl 1, youth group Choloma)*

*"Teachers are abusing and harassing young girls, it is normal. Teachers always touch." (adolescent girl 2, youth group Choloma)*

Motivations behind violence perpetrated by teachers towards students are both varied and complex. However, it is critical to note that the teachers themselves are often community members and, thus, in addition to being perpetrators of violence in the school setting, have often been victims themselves. As one key informant from an international NGO in San Pedro pointed out:

*"Children and youth in reality are exposed to two real curricula, one that comes from the formal education and other which is linked to the lives of the teachers as individuals. Students live side by side with many teachers that can be violators or are perpetrators, who may have their own hidden agenda, since all of their emotional and personal dynamics are also playing in their interaction with students; that is to say that they can become teachers and perpetrators (sic). It is important to mention that, in counseling services, we receive many cases of teachers who are both suffering and exercising violence."*

While SRGBV perpetrated by teachers against students is alarming, it is important to note the significant levels of violence between peers (students), which can also take many forms. **Bullying**, according to

newspaper La Tribuna, the Education Department of Francisco Morazán, registered 1,000 complaints in the first 9 months of 2015. The national Ministry of Education reported 150 complaints nationwide, on a daily basis. The number of complaints are beyond the capacity of institutions to investigate and resolve due to and the logistical constraints. **Violence between boyfriends and girlfriends** is also common, with most students noting that these relationships start at ages 12 to 13. With little sexual education in the school, teen pregnancy is not uncommon. While the Honduran legislation does permit pregnant girls to attend school, due to social stigmatization and other reasons, they simply often abandon their students. According to the survey data, 18 percent of girls state that boyfriends do not treat their girlfriends well, while this number drops to 9 percent of boys who recognize the same tendencies.

A relatively new characteristic of SRGBV, mentioned repeatedly by respondents and linked to insecurity and impunity, is **the infiltration of organized criminal groups and youth gangs** (“maras”), particularly in high-risk urban areas. The influence of organized criminal groups is negatively affecting and undermining the physical and psychological integrity of students within schools, as well as in transit to/from schools.

Respondents observed with great concern the alarming escalation and dimension of this situation:

*"In the past, there were no cases in schools of boys carrying guns to their classrooms to terrify their companions or girls that, as early as from second grade (7 or 8 years old), are threatening their teachers telling them that their parents are “mareros” that can kill them if they don’t treat them as they want to.” (woman worker at international NGO, San Pedro Sula)*

*"Many parents which have domestic violence situations at their home tell us that, as a result of the conflictive environment in the family, many children and adolescents prefer to leave their house and get involved in the “mara” because they find in these groups what cannot find in their homes. This is a common talk in public hearings and the parents tend to blame each other, this situation is for both boys and girls, because there are now many girls “mareras.” (woman, Judiciary Court, San Pedro Sula).*

The strong links between domestic violence, school-based violence, and the propensity to join the *maras* has been noted by multiple key informants in the study. The team noted that **violence at the household level was seen to be a major factor in perpetuating gang membership and SRGBV.**

*“Violence is something that we get from the house and then is reinforced in the school.” (woman, Focus Group, Tegucigalpa)*

The access to information, communication, and social media networks has also created new forms of virtual violence, which might take the form of sexual harassment, school abuse, and bullying. Issues around **cyber-bullying and sexting were mentioned by different informants, as was the sending of photos of schoolgirls to be recruited (or forced) into prostitution, known as “prepagó.”** Honduran Education Minister, Marlon Escoto, referred to this problem commenting that:

"That happens more often at the largest schools in the country, in small schools teachers have more control ... (The girls) are more likely to be recruited (as prostitutes) when they are offered easy access to money, property, and assets, especially at their ages when they have no income because they do not even have jobs." (La Tribuna, 2015)

Finally, it is important to note that violence is not only perpetrated within the school, but students are also subject to violence on their way to/from school.

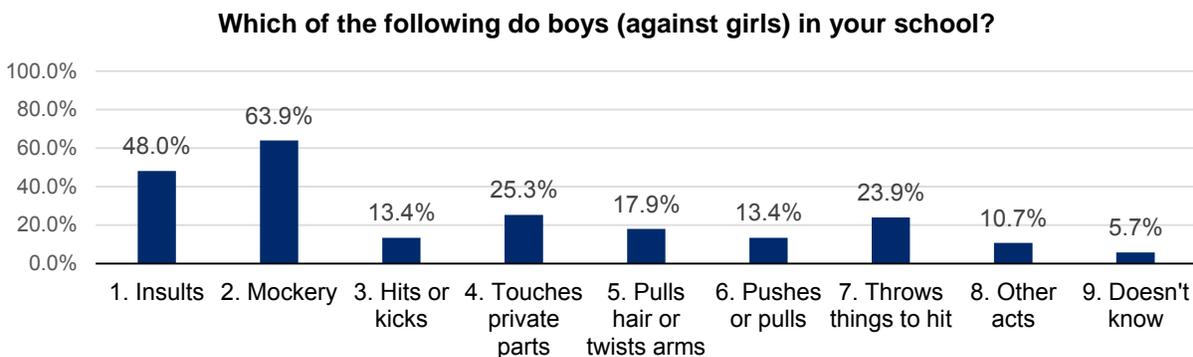
## MINI STUDENT SURVEY (MSS) DATA -

The GBV Team formulated and administered a mini student survey, which was applied to boys and girls at selected schools in the five municipalities according to the methodology laid out previously in this report. A total of 598 students (boys and girls), grades 7 to 12, were surveyed, representing multiple schools in each target municipality.

One of the important results noted is that the forms of violence can vary depending on the gender of both the perpetrator and the victim. For instance, as can be seen in **Exhibit 22**, students claimed that violence exerted by boys against girls is mostly psychological – 64 percent of the respondents pointed to mockery as one of the actions of violence most commonly committed by boys against girls and 48 percent cited insults. With regards to physical violence, 24 percent of respondents said that "throwing objects to hit" is the most common type of physical violence exercised by boys against girls.

An alarming 25 percent of respondents said that girls are victims of sexual violence by boys as "they touch their private parts." According to United Nations Children’s Fund (UNICEF) “World Report on Violence against Children” (Pinheiro 2006), school faculties commonly observe sexual harassment among students (assiduously against girls) "as a normal part of school life and normally they simply ignore it.” When it comes to relationships between boyfriends/girlfriends, in answering the question "In this school, do boyfriends treat their girlfriends well?" 13 percent of respondents reported that boyfriends are abusive to their girlfriends.

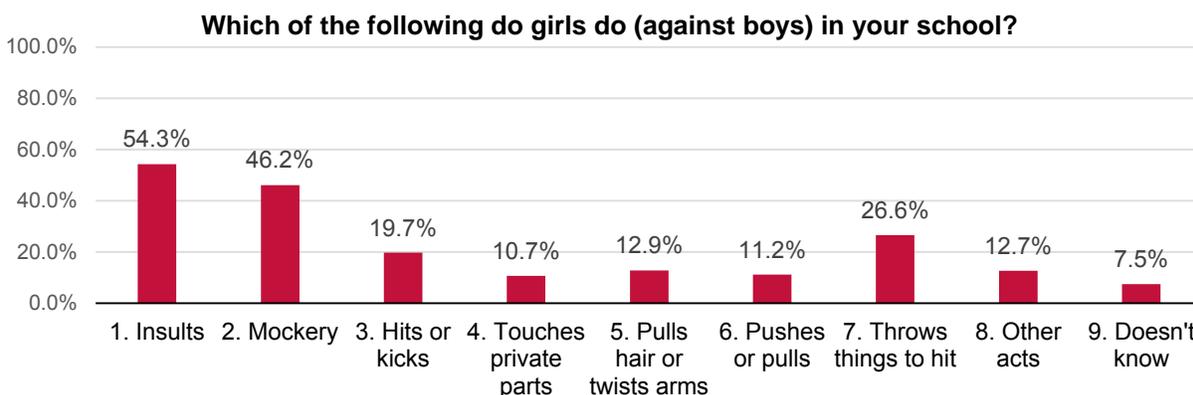
### Exhibit 22: Types of GBV Reported to be Committed Against Girls in Schools



Source: Students Survey, GBV Study, October 2015

GBV in schools is not limited to boys acting against girls. Students also described that violence perpetrated by girls against boys is common and is mainly psychological violence, as seen in **Exhibit 23**. Fifty-four (54) percent of respondents indicate that it is common for girls to “tease” or “mock”, 46 percent said that they “insult”, 27 percent said that they “throw objects to hit them.” In comparing the data for boys and girls, it is reported that boys are much more likely to mock girls (64 vs. 46 percent), but less likely to insult them (48 vs. 54 percent). These findings tend to confirm gender stereotypes with regards to verbal abuse.

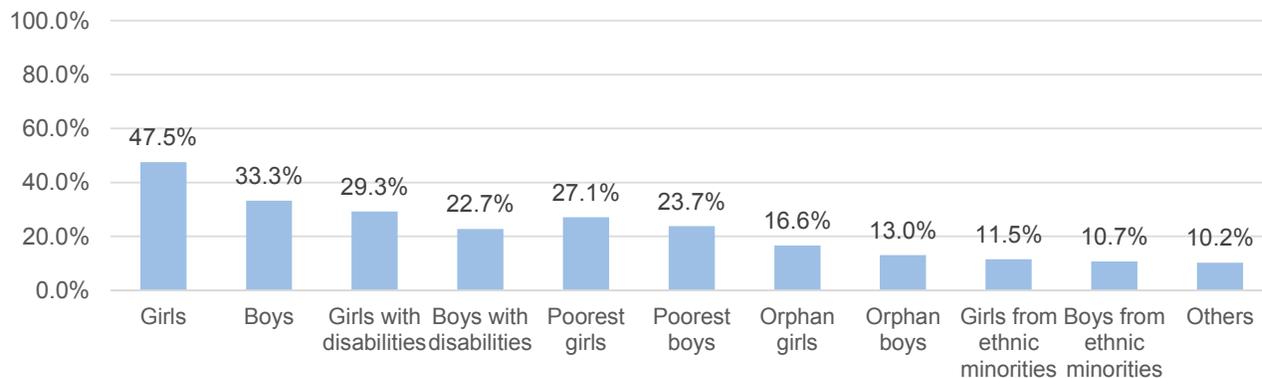
**Exhibit 23: Types of GBV Reported to be Committed Against Girls in Schools**



Source: Students Survey, GBV Study, October 2015

When the question was raised as to who suffers the most from violence within the school, it was clear that girls bear the brunt. It is also obvious that, in addition to gender, there are other social and economic factors influencing the vulnerability of the victims, including social class, ethnicity, family situation, and physical disabilities. This reflects the complexity of the problem and the need to adequately address these risk factors. This doubles, at the least, the victimization girls affected by both gender discrimination and social exclusion have to face.

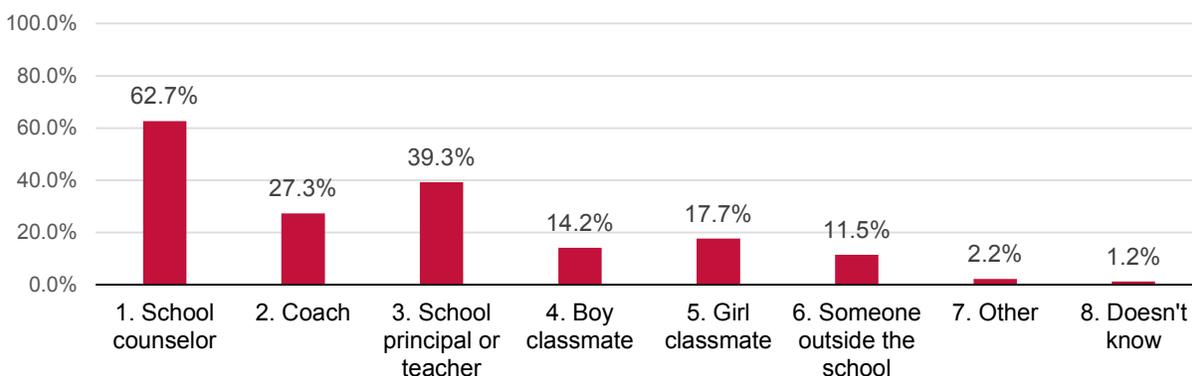
**Exhibit 24: Who Suffers the Most from the Acts of Violence in Schools?**



Source: Students Survey, GBV Study, October 2015

With regards to the question of whom do girls report or complain to regarding school-based violence, most of the respondents mentioned that girls' first option is to go to the person responsible for providing counseling or coaching at school (often a nominated teacher with little training or orientation). While this implies a high degree of responsibility for the counselors, unfortunately, it is commonly acknowledged in Honduras that the school counselors rarely have any specialized training or orientation, and have limited ability to refer cases to higher authorities. In addition to counselors, over 30 percent of respondents noted that they complain or report to peers (male or female) and 39 percent report to teachers.

**Exhibit 25: To Whom do Girls Complain about Violence by Boys?**



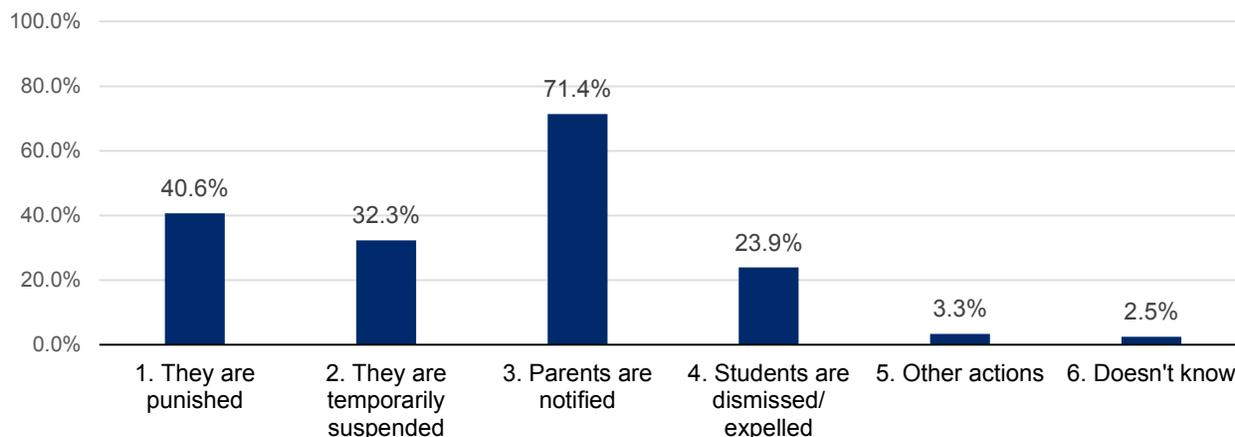
Source: Students Survey, GBV Study, October 2015

The survey also posed questions regarding the consequences (e.g., disciplinary actions or punishment) for gender-based violence, performed particularly against girls. The most common noted response was a call to the parents (71 percent), although both suspension and expulsion were also noted. But given the lack of parental support, the calls to the parents do not always result in a response or a change of behavior. By leaving the punishment to the parents, without adequate internal mechanisms, the school also risks parents ignoring the behavior. Given the adult-oriented control structures, the call to parents could also lead to parental abuse of the child, further perpetuating the cycle of violent behavior. Also, when teachers do punish the offenders directly, this can also result in cases of violence (physical, verbal, or emotional). According to the United Nations Educational, Scientific and Cultural Organization (UNESCO), (2015 policy paper on school related GBV) physical punishment and disciplinary measures applied in schools are often forms of discrimination influenced by gender.

A male respondent in a focus group in La Ceiba noted that with a lack of training, teachers rely on traditional norms to respond to GBV issues:

*“Within the educational system there is an accusing mentality on the part of the teachers, since this is how they were educated and they know of no other way.”*

### Exhibit 26: School Responses to Perpetrators of GBV

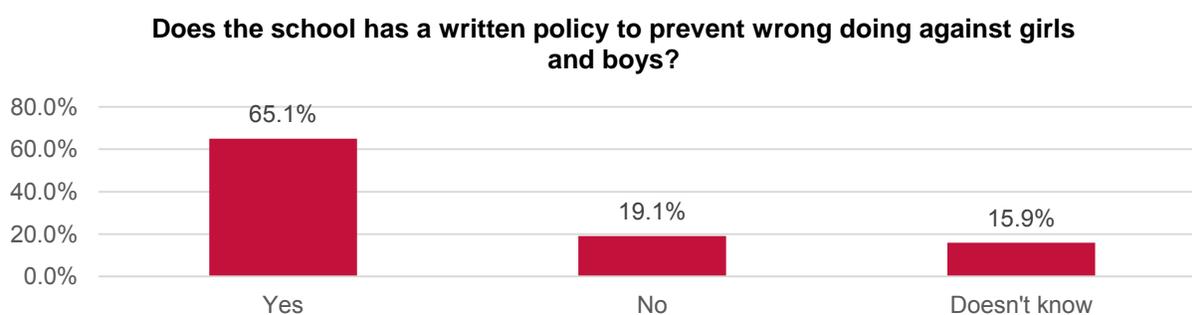


Source: Students Survey, GBV Study, October 2015

Some 24 percent of respondents identified expulsion as a consequence of school-related gender-based violence as a very serious punishment. The response to expel perpetrators likely corresponds to the degree of the violence and the impact on the victim. For example, 27 percent of students surveyed said that girls had to leave school because nothing was being done to prevent or respond to acts of violence, with the highest levels in La Ceiba and Tela.

Sixty-five percent of respondents indicated that their schools have a written policy for the prevention of acts of violence. The fact that policies exist is critically important, although a further question for analysis would be to what extent the policies are implemented/enforced.

### Exhibit 27: Existence of Written School Policies on Violence

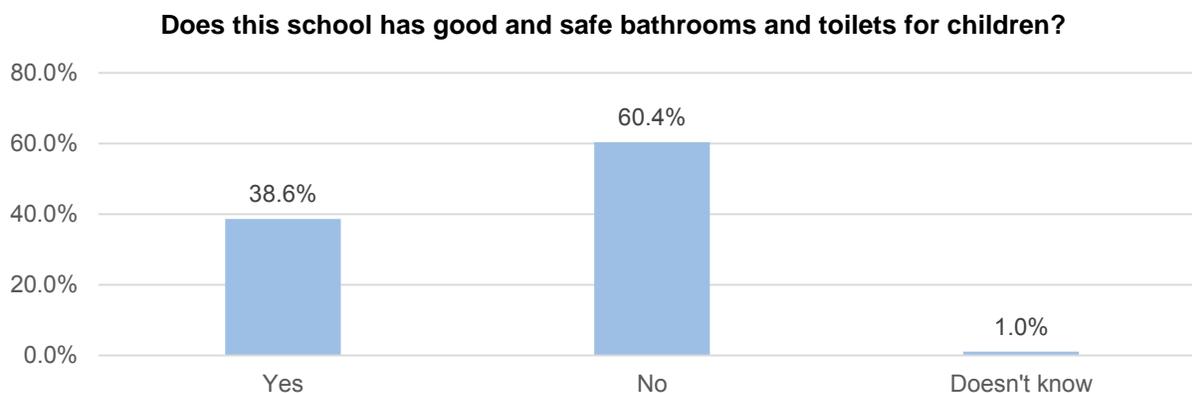


Source: Students Survey, GBV Study, October 2015.

The distribution of school space and the state of infrastructure also affect the occurrence of violence within schools. Of primary concern are solitary, dark spaces, particularly bathrooms, which due to their isolated location are often used by perpetrators of GBV. Sixty percent of respondents noted that their school does not have safe bathrooms and toilets. This finding was further supported in focus group

discussions. The route to/from school is also a major concern for students, with 59 percent of surveyed students acknowledging the presence of criminals and gang members on the way to/from school (boys identified this as a concern more frequently than girls). The threat of gang members in transit to school is most pronounced in San Pedro Sula (94 percent), Choloma (75 percent), and Tegucigalpa (68 percent).

### Exhibit 28: School Physical Infrastructure and Safety



Source: Students Survey, GBV Study, October 2015.

High number of school dropouts also reflects the reality of the multiple manifestations of school-related gender-based violence. According to one mother in Tegucigalpa,

*“There are many dropouts because of the lack of control in the schools, the teachers don’t arrive, and the gang members look out for the students starting in 6<sup>th</sup> grade to recruit them.”*

In conclusion, nearly 40 percent of student respondents do not feel safe in their school. This feeling of lack of safety was most heightened in San Pedro Sula, with only 45 percent of students identifying the school as a safe space. Thirty-five percent of students admitted being afraid of gangs, 33 percent of delinquent groups, and an alarming 24 percent reported being frightened of the school staff itself. With close to 70 percent of students fearing organized violent groups, there is clear evidence of the infiltration of gangs into the school setting. The levels of fear were high for both students and teachers. According to one representative of the private sector of Tela,

*“The criminals have their tentacles everywhere in schools, they threaten teachers, students, and parents. There are sales of drugs, prepagos, and prostitution all over.”*

# RECOMMENDATIONS

The recommendations for USAID are presented here in the context of the USAID/Honduras Country Development Cooperation Strategy (CDCS). The CDCS envisions **a more prosperous and safer Honduras that advances inclusive social and economic development among vulnerable populations. Specifically, these recommendations respond to the Mission’s emphasis on vulnerable populations, those most at risk of crime and violence and those living below the poverty line.**

Under *Development Objective 1: Citizen Security Increased For Vulnerable Populations In Urban, High-Crime Areas*, USAID/Honduras is focusing on the high-density urban areas in which this study took place -- Tegucigalpa, San Pedro Sula, Choloma, Tela, and La Ceiba. According to the CDCS document: “The success of DOI depends on implementing sustainable models, replicable by local organizations, that:

- 1) Improve community safety infrastructure (e.g., new streetlights)
- 2) Increase access to quality services aimed at reducing violence risk factors and strengthening resiliencies of target communities and at-risk youth
- 3) Improve the effectiveness and transparency of the security and justice sectors
- 4) Increase active citizen engagement and oversight of institutions
- 5) Prevent violent crime with specific, targeted community policing initiatives

## RECOMMENDATIONS FOR USAID

Based on the findings of this report, the following section presents recommendations for USAID to address GBV in Honduras. These recommendations respond to the Intermediate Results outlined by USAID/Honduras development strategy -- *IR 1.1: Resilience of communities and individuals to crime increased* and *IR 1.2: Performance of national and municipal justice and security systems improved*. They are tied to USAID/Honduras’ programmatic focus of Citizen Security, Democracy and Governance and Education. Exhibit 29 summarizes the recommendations in alignment with DOI objectives.

### **1) Encourage GOH and support relevant agencies to fully implement existing policies and laws and provide adequate funding and training to institutions tasked with GBV mitigation**

While minor modifications to the legal code are required, the most pressing priority is for the GOH to implement the existing policies and laws, and provide adequate funding in order to strengthen the institutions tasked with preventing and responding to GBV. Full implementation of GBV initiatives requires the allocation of financial, human, and logistical resources so that justice sector operators and service providers can both prevent and respond to cases, with particular attention paid to outreach work at the local or community level.

USAID should provide targeted support to government institutions responsible for addressing GBV:

- National Police – As the National Police are the main interface with the population regarding GBV, this recommendation is a high priority. USAID can provide support and work with the GOH to:
  - Provide training and support to ensure that officers take GBV seriously; work with the police academy to incorporate GBV into the standard curriculum
  - Develop incentive systems so that police are rewarded for addressing GBV and supervisors hold officers accountable for properly responding to GBV
  - Establish police protocols for victim’s services to avoid additional stigmatization from police officers

- Judiciary – Impunity must be reduced to build confidence in the functioning of the sector. USAID can provide support and work with the GOH to:
  - Increase staff and geographic coverage of Special DV Courts and provide short courses for all current Special DV Court staff
  - Develop and deliver orientation programs on GBV to Justices of the Peace
  - Recognize judiciary members who are “champions” of GBV victims
  - Work with university and judiciary training programs to integrate GBV into curricula and create a compulsory certification on GBV for judges

### Prosecuting the Worst Forms of GBV

Multiple respondents noted the common occurrence of rape and incest of young girls, often leading to teen pregnancy. While these issues are not out in the open, there is recognition among mothers that their girls are at risk from a very young age. Members of the Garifuna community explained it as a rite of passage, although acknowledging they did not want their daughters to suffer in the same ways they did. *Only by prosecuting the perpetrators of these crimes and raising awareness about the dangers, will the established practices be eliminated.*

- Public Prosecutor – Provide support to increase staff and geographic coverage of Special Prosecutor’s Office for Women Affairs and provide additional training to staff. Provide adequate physical space to respect women’s privacy. Enhance investigative capacity. Address high turnover rates of prosecutors and ensure proper incentive systems.

USAID should recommend that a high level body be established by the GOH to ensure that GBV is addressed in a coordinated manner nationwide. Full implementation of the MAI, funding of one-stop centers like CAPRODEM, and the expansion of victims services (physical and psychological) are critically required and are predicated on strong multi-sectorial coordination.

## 2) Increase support to government services that address GBV

As noted, the institutions that work on GBV are woefully under-resourced and have little to no decentralized presence at the community level. USAID directed resources and programs can build the capacity of the following:

- Health Sector –
  - Ensure proper staffing of the existing Consejeria services and expand coverage

- Identify GBV point of contact person in all health centers nationwide and provide additional training
- Recruit and train a corps of masculinities specialists to work with perpetrators of GBV
- Design comprehensive referral system for victims of GBV
- Municipal government –
  - Provide support to establish functional OMMs in all municipalities, provide continuous training for staff, and ensure coordination and collaboration with local women’s groups at the community level
  - Promote the creation of dialogue spaces to include and discuss security issues from a gender perspective at the municipal level
  - Support Municipal Open Council initiatives to specifically address citizenship security and the analysis of current scenarios of violence against women
  - Provide adequate funding for municipal gender security plans
  - Evaluate the role of Municipal Justice Units and Municipal Police in the supervision and monitoring of sanctions of GBV perpetrators
  - Facilitate the opening of shelters for victims of GBV and their children
- Institutions serving vulnerable populations – Provide additional support to institutions serving vulnerable populations (e.g., CONADEH, DINAF) to ensure GBV is addressed and that vulnerable groups receive adequate protection.

### **3) Provide support, recognition and capacity building to women’s groups (at all levels) that work on GBV issues**

Aside from the police the only groups operating at the local/community level tend to be women’s groups, which have been plagued by a reduction in donor funding. There is an urgent need to support these grassroots organizations, particularly in communities that display high levels of violence, and more specifically GBV. Furthermore, any prevention initiatives that do work at the community level (for example Outreach Centers or *Centros del Alcance*) should ensure the direct engagement of legitimate women’s groups and provide gender-sensitive programming directed to a wide range of residents.

### **4) Encourage GOH and the Ministry of Education to implement existing laws and policies, and design new ones, to protect children and youth in schools**

USAID can encourage and support the Ministry of Education in implementing a comprehensive policy to prevent and address SRGBV that involves teachers, students, parents, and community leaders. The policy must involve multiple sectors in preventing and responding to SRGBV (e.g., law enforcement, health sector, local government) and include components on training for teachers and school management, engagement of parents and community leaders, design and implementation of communication, planning after-school activities, supportive counseling and coaching services, and fundraising strategies for school initiatives; all aligned to address and reduce the impact of SRGBV.

### **5) Support the GOH in developing programs to help schools address SRGBV**

As previously noted, most of the counselors/coaches tasked with providing counseling do not have significant training, nor external support. Punishments meted out by school management often reinforce the cycle of violence. USAID can support the school system in supporting a program of counseling services or referral services for both victims and offenders. Regular interaction between schools and service providers should be encouraged to increase trust and confidence.

#### **6) Support in-depth research and monitor GBV (and SRGBV)**

Little solid research has been done on GBV or SRGBV in Honduras that could help determine the factors that drive violence. One effective proposal could be the integration of GBV and SRGBV questions into national household surveys and in regular assessments carried out by the Ministry of Education, with the purpose to obtain comparable data to inform preventive and corrective measures.

#### **7) Design innovative strategies to raise awareness on SRGBV, particularly with parents**

Recent efforts, specifically Parents Classes (*Escuelas para Padres*), recognize the critical role that can be played by parents in shaping children's values and behaviors. Many such programs are plagued by a lack of attendance or interest on the part of the caregiver, and efforts to make attendance mandatory have failed because they only result in a further alienation of the student. Furthermore, these initiatives typically do not address GBV or gender issues. Innovative strategies must be designed and promoted, taking into account the reality of caregivers and looking for ways to incentivize and simplify parental involvement. Use of mobile phones as a way to disseminate information should be evaluated, as it does not require physical presence and can be used to share information on victimization anonymously. Positive incentives should be put in place to encourage parental engagement, not simply a punitive system that punishes the child if the parent does not attend (as is promoted by the *Escuelas para Padres*).

#### **8) Develop and support programs for awareness raising and behavior change**

This study reveals that GBV is still highly stigmatized and underreported due to fear, acceptance, and a lack of confidence in institutions and availability of services. By using savvy public and social media campaigns that focus on positive behavior change, the attitude towards GBV can be shifted. This would also provide solidarity for victims of GBV and help them identify resources, seek help, and share their experience to overcome grief. Such campaigns can be linked to an effort to re-establish a hotline or orientation service, possibly through text messaging, for victims of GBV.

A key strategy for behavior change is working with men and boys to prevent GBV. As noted by a police officer in Choloma, "A man is always going to want to feel more manly. That is why he hits." This logic, that violence towards women is part of being a proper man, is common in Honduras and used to justify GBV. Only by working with men and boys in all settings (school, church, workplaces, etc.) to change their views and understanding of masculinity, will GBV be effectively addressed. USAID can support a network of positive male champions and role models and highlight the important role they play.

**Exhibit 29: GBV Recommendations Referenced to USAID IRs and Sector Focus**

Recommendation	Relevant Intermediate Result	Sector Focus
<p><b>1. Encourage GOH and work with relevant agencies to fully implement existing policies and laws and provide adequate funding to institutions tasked with GBV mitigation</b></p>	<p>IR 1.1: Resilience of communities and individuals to crime increased</p> <p>IR 1.2: Performance of national and municipal justice and security systems improved</p>	<p>Citizen Security</p> <p>D&amp;G</p>
<p><b>2. Increase support to government institutions that address GBV</b></p>	<p>IR 1.1: Resilience of communities and individuals to crime increased</p> <p>IR 1.2: Performance of national and municipal justice and security systems improved</p>	<p>Citizen Security</p> <p>D&amp;G</p>
<p><b>3. Provide support, recognition and capacity building to women’s groups (at all levels) that work on GBV issues</b></p>	<p>IR 1.1: Resilience of communities and individuals to crime increased</p>	<p>Citizen Security</p> <p>D&amp;G</p>
<p><b>4. Encourage GOH and the Ministry of Education to implement existing laws and policies, and design new ones, to protect children and youth in schools</b></p>	<p>IR 1.1: Resilience of communities and individuals to crime increased</p>	<p>Citizen Security</p> <p>D&amp;G</p> <p>Education</p>
<p><b>5. Support the GOH in developing programs to help schools address SRGBV</b></p>	<p>IR 1.1: Resilience of communities and individuals to crime increased</p> <p>IR 1.2: Performance of national and municipal justice and security systems improved</p>	<p>Citizen Security</p> <p>DRG</p>
<p><b>6. Support in-depth research and monitor GBV (and SRGBV)</b></p>	<p>IR 1.2: Performance of national and municipal justice and security systems improved</p>	<p>Citizen Security</p>
<p><b>7. Design innovative strategies to raise awareness on SRGBV, particularly with parents</b></p>	<p>IR 1.1: Resilience of communities and individuals to crime increased</p>	<p>Citizen Security</p> <p>Education</p>
<p><b>8. Develop and support programs for awareness raising and behavior change</b></p>	<p>IR 1.1: Resilience of communities and individuals to crime increased</p>	<p>Citizen Security</p>

## PROGRAMMATIC CONSIDERATIONS

The following suggestions are intended for USAID/Honduras, as well as for other stakeholders including other international donors, the GOH, and international and Honduran nongovernmental organizations. Based on the findings of this report, these programmatic considerations are offered as elements for strengthening the efficacy of GBV programs or for incorporating GBV into existing programs to mitigate violence in Honduras.

### **Ensure appropriate balance between emphasis on street (gang) violence and violence at the household level (GBV)**

The GBV Analysis Team coined the phrase “Un Cambio Estratégico de Enfoque: De las Pandillas a las Familias” or a strategic shift in focus from gangs to families. The high level of GBV in the households in the targeted communities undoubtedly has an impact on the prevalence of gang and other forms of pervasive street violence. The main security policies promoted and funded by the GOH focus almost exclusively on law enforcement and military responses to street-level violence. Responses to GBV must be holistic and must address both the causes and the consequences of GBV in the public and private spheres. There is a clear recognition that the focus must shift to more emphasis on families and households. Relevant comments of KIIs include:

- The number one problem is the family environment, if we don't focus our attention on this, we are not doing anything
- Even if we do thousands of things, if we don't work with the family, we are not going to succeed in anything
- Violence is part of the homes – homes disintegrated because the parents are not around
- Honduran families are machines that reproduce violence and that spit out their children
- We should start by focusing on education in the homes, with parents, working from the community that can be done with the help of the lifelines of the communities
- The patterns of child-rearing in the family breed violence, the children learn by seeing how their mother is abused, and learn to be violent in the home, school, street
- There are many young girls who look for an escape valve to flee from violence in the home – they go with the first person who shows them love, they get pregnant, have kids, and the same story repeats itself. It is a cycle that never ends.

### **Explicitly build GBV components into all violence prevention programming**

The GOH and the donor community have strongly emphasized the importance of crime and violence prevention in order to help reverse the recent trends in the country. However, very few programs have integrated gender components, let alone explicitly address GBV. Most programs continue to focus on working with vulnerable young men in the community (providing livelihoods, leadership, and recreation support). While this is a target beneficiary population, it is certainly not the only group that requires support. All programs that work with these at-risk young men should also include a GBV component

(e.g., masculinity). In addition, other community actors, particularly women and youth, should be integrated into activities, taking gender considerations into account.

### **Recognize and address multiple victimization factors**

The data collected by the team is in line with international research and shows that women and girls that face multiple victimization factors (e.g., disability, ethnic or racial discrimination, poverty, LGBTI) are particular targets of GBV. LGBTI groups, in particular, noted their exclusion from traditional community networks and the extreme discrimination, especially against openly gay young men. Programs must recognize this fact and provide adequate resources to support particularly vulnerable community members, and encourage a greater acceptance and tolerance of different gender identities.

### **Make the GOH aware of the risks of overloading teachers with responsibilities given their vulnerability to threats in the community**

Teachers typically live in the communities where they teach and are, thus, subject to reprisals for any attempts to intervene in issues that arise at the school. With the pervasive influence of the gangs in school life in many of the target communities, teachers are simply too afraid to take action to confront SRGBV. As such, programs that isolate and put the teacher at the very center of interventions are rarely successful. Only by respecting the fears of teachers and facilitating their anonymous support to processes led by specialists who do not reside within the target community (or by community leaders that are comfortable with this role, such as trained CSOs or women's groups), will teachers have the confidence to intervene.

# GLOSSARY OF TECHNICAL TERMS

The following definitions are taken from USAID policies and strategies or the UN Women Glossary of Terms from Programming Essentials and Monitoring and Evaluation Sections,<sup>24</sup> except where otherwise noted.

**Bullying** is most often defined as: (1) intentional negative actions against someone that can be physical or psychological, (2) actions that are repeated over time, and (3) actions that are perpetrated by someone with a perceived or real power over the victim (Olweus 1993 and 1994).

**Child marriage** includes formal marriages and informal unions that take place when one or both of the spouses are under the age of 18.

**Corporal punishment** is any punishment in which physical force is used and is intended to cause some degree of pain or discomfort.<sup>25</sup>

**Dowry-related violence** is any act, including murder, rape, battery, harassment, and other forms of physical abuse, as well as psychological abuse, associated with the giving or receiving of a dowry at any time before, during, or after the marriage.

**Early marriage** is a formal marriage or informal union before age 18.

**Female genital mutilation/cutting** refers to all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs for nonmedical reasons.

**Forced marriage** lacks the free and valid consent of at least one of the parties. In its most extreme form, forced marriage can involve threatening behavior, abduction, imprisonment, physical violence, rape, and, in some cases, murder; an arranged marriage officiated without the consent of the interested parties.

**Gender** is the socially defined set of roles, rights, responsibilities, entitlements, and obligations of females and males in societies. The social definitions of what it means to be female or male vary among cultures and change over time.

**Gender-based violence** is directed at an individual based on his or her biological sex, gender identity, or perceived adherence to socially defined norms of masculinity and femininity. It includes physical,

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<sup>24</sup>UN Women Glossary of Terms: <http://www.endvawnow.org/en/articles/347-glossary-of-terms-from-programming-essentials-and-monitoring-and-evaluation-sections.html>

<sup>25</sup> UN Committee on the Rights to the Child: <http://www.endcorporalpunishment.org/pages/frame.html>

sexual, and psychological abuse; threats; coercion; arbitrary deprivation of liberty; and economic deprivation, whether occurring in public or private life.

Gender-based violence takes on many forms and can occur throughout the life cycle. Types of gender-based violence can include female infanticide; child sexual abuse; sex trafficking and forced labor; sexual coercion and abuse; neglect; domestic violence; elder abuse; and harmful traditional practices such as early and forced marriage, “honor” killings, and female genital mutilation/cutting.

Women and girls are the most at risk and most affected by gender-based violence. Consequently, the terms “violence against women” and “gender-based violence” are often used interchangeably. However, boys and men can also experience gender-based violence, as can sexual and gender minorities. Regardless of the target, gender-based violence is rooted in structural inequalities between men and women, and is characterized by the use and abuse of physical, emotional, or financial power and control.

**Gender equality** concerns women and men, and it involves working with men and boys, women and girls to bring about changes in attitudes, behaviors, roles, and responsibilities at home, in the workplace, and in the community. Genuine equality means more than parity in numbers or laws on the books; it means expanding freedoms and improving overall quality of life so that equality is achieved without sacrificing gains for males or females.

**Gender identity** is an individual’s internal, personal sense of being male or female. For transgender people, their sex assigned at birth, and their own internal sense of gender identity do not match.

**Harmful practices** are all practices done deliberately by humans on the body or the psyche of other human beings for no therapeutic purpose, but rather for cultural or socio-conventional motives, and which have harmful consequences on the health and the rights of the victims. Some harmful practices include early/forced marriages, female genital mutilation/cutting, and widowhood rites.

**“Honor” killings** are practices in which women and girls suspected of defiling their family's honor by their misconduct can be killed by their brother, father, uncle, or another relative who thus restores the said honor. Honor killings are executed for instances of rape, infidelity, flirting, or any other instance perceived as disgracing the family's honor. Women may be killed based on suspicions of a family member alone, and they may not be given the chance to defend themselves. The allegation alone is considered enough to defile a man's or family's honor, and is therefore enough to justify the killing of the woman. The men who commit the murder typically go unpunished or receive reduced sentences. Variants: (1) honor crime; (2) crime of honor.

**Indigenous people** are any ethnic group who inhabits a geographic region with which they have long-term historic connections.

**Persons with disabilities** include those who have long-term physical, mental, intellectual, or sensory impairments, which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others.<sup>26</sup>

**Rape** is the penetration of the vulva or anus, using a penis, other body parts, or an object without the voluntary consent of the individual.

**Sex** is the classification of people as male or female. At birth, infants are assigned a sex based on a combination of bodily characteristics including: chromosomes, hormones, internal reproductive organs, and genitalia.

**Sexual harassment** is unwelcomed sexual advances, requests for sexual favors, and verbal or physical conduct of a sexual nature.

**Sexual violence** is any non-consensual sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances, or acts to traffic, or otherwise directed, against a person's sexuality, by any person regardless of their relationship to the victim, in any setting, including but not limited to home and work.

**Trafficking in persons** is an international crime involving the acquisition of a human being through the use of force, fraud, or coercion for the purpose of exploiting the individual for profit through forced labor or prostitution. Far from being a “soft issue,” trafficking—a modern-day form of slavery—constitutes a violation of human rights in which victims are deprived of their fundamental freedoms. Trafficking in persons can involve either sex or labor exploitation, or both. At its essence, trafficking in persons is about people being bought and sold as chattel.

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<sup>26</sup> United Nations Convention on the Rights of Persons with Disabilities:  
<http://www.un.org/disabilities/convention/conventionfull.shtml>

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# ANNEXES

The following annexes are provided under separate cover:

- A. Literature Review
- B. USAID Study Questions
- C. Data Collection Plan
- D. Women Survey
- E. List of Targeted Neighborhoods
- F. Mini Student Survey
- G. FGD Report
- H. FGD Guidelines
- I. FGD Notes
- J. KII Questionnaire and Guidelines
- K. KII Interview List
- L. Enumerator Manual
- M. Manual to Administer Mini Survey

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