



BARAHONA, DOMINICAN REPUBLIC

# MID-TERM REVIEW OF HUMAN RIGHTS GRANT PROGRAM FAMILY/GENDER-BASED VIOLENCE IN THE DOMINICAN REPUBLIC

## Learning, Evaluation and Research Activity II (LER II)

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This Human Rights Grants Program Mid-Term Review was conducted by a team of international and local consultants fielded and managed by The Cloudburst Group, namely Jessica Harris (Team Lead), Dorina Lopez-Matias (Local Gender Expert), Consuelo Cruz (Local Gender Expert), Noureen Akber (Research Analyst) and Aleta Starosta (Tasking Coordinator and Evaluation Specialist).

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Prepared by:

The Cloudburst Group  
8400 Corporate Drive, Suite 550  
Landover, MD 20785-2238  
Tel: 301-918-4400

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## ACRONYMS

AGO	Attorney General's Office
AMELP	Activity Monitoring, Evaluation, and Learning Plan
CDCS	Country Development Cooperation Strategy
CEG-INTEC	Center for Gender Studies Technical Institute
CIMUDIS	Circle of Women with Disabilities
CJH	Community Justice House
CJSSP	Criminal Justice System Strengthening Project
CONADIS	National Council for People with Disabilities
CONANI	National Council for Children and Adolescents
CSO	Civil society organization
DA	District Attorney
DIFNAG	Department for Children, Family and Gender Issues
DEAMVI	Directorate of Attention to Women and Domestic Violence
DNP	Dominican National Police
DR	Dominican Republic
ENESIM	Experimental Survey on the Situation of Women
F/GBV	Family/gender-based violence
FY	Fiscal year
GBV	Gender-based violence
GIDA	Gender and Inclusive Development Assessment
GODR	Government of Dominican Republic
HRGP	Human Rights Grants Program
ICITAP	International Criminal Investigative Training Assistance Program
LGBTI	Lesbian, gay, bisexual, transsexual, and intersex
MINERD	Ministry of Education
MW	Ministry of Women
NGO	Non-governmental organization
ONE	Office of National Statistics
PACAM	Patronage of Help of Battered Women
PLANEG III	National Plan for Gender Equality and Equity III
PM	Public Ministry
PWD	Person with disabilities
SDW	Santo Domingo West
SINAVIG	National Information System on Gender Violence
TA	Technical assistance
TIP	Trafficking in persons
TOC	Theory of change
UNFPA	United Nations Population Fund
USAID	United States Agency for International Development
USG	United States Government
VAU	Victims Assistance Unit
VAW	Violence against women

## EXECUTIVE SUMMARY

The purpose of the mid-term review of the Human Rights Grants Program (HRGP) Family/Gender-Based Violence (F/GBV) program in the Dominican Republic is to identify the most significant achievements, key challenges, and progress made toward achieving the program’s stated objectives and results. The review is not intended to be a rigorous performance evaluation. Instead, it aims to use program documents and qualitative interviews to identify HRGP approaches that have the potential to reduce F/GBV in that country, as well as to identify gaps and weaknesses that could be addressed in the remaining months of the program.

The HRGP F/GBV is a grant program whose goals align with the primary Development Objective of the United States Agency for International Development (USAID)/Dominican Republic (DR), which seeks to strengthen the prevention of crime and violence. It is a \$1.6 million program spanning one year and nine months (October 2019-July 2021) that aims to improve service delivery of psychological support services and access to justice for victims, and to promote sensitization training and police reforms related to F/GBV cases.

Unlike traditional USAID programs, the HRGP F/GBV consists of a pool of funding used to augment program activities under two traditional USAID/DR programs. The first program is the Criminal Justice System Strengthening Project (CJSSP), implemented by Chemonics. The second is the Dominican National Police (DNP) Reform Program implemented by the U.S. Department of Justice International Criminal Investigative Training Assistance Program (ICITAP). This mid-term review assesses its respective strengths and challenges and makes recommendations to strengthen future HRGP F/GBV programming.

## METHODOLOGY

The mid-term review takes a mixed-methods approach that combines quantitative and qualitative elements in the triangulation of findings and conclusions. The review is informed by the recent literature review that examined approaches to reduce gender-based violence (GBV) in Latin America and the Caribbean and is built on the recent Gender and Inclusive Development Assessment (GIDA) for the Dominican Republic.<sup>1</sup> The Assessment Lead and two local Dominican consultants conducted qualitative semi-structured virtual interviews from June 9–26, 2020 with USAID/DR implementation partners: International Criminal Investigative Training Assistance Program (ICITAP); the Dominican National Police (DNP); Chemonics; Community Justice Houses (CJHs); Patronage of Help of Battered Women (PACAM); victims receiving psycho-trauma treatment services; the Attorney General’s Office (AGO); the District Attorney (DA’s) office; the GBV Unit; the Department for Children, Family, and Gender Issues (DIFNAG); Commission for Gender Equality of Judiciary; Profamilia; ENTRENA; Tu Mujer; United Nations Population Fund (UNFPA); Center for Gender Studies Technical Institute (CEG-INTEC); and independent researchers. The team used four approaches simultaneously: the gender approach, the intersectional approach, the victim-centered approach, and the “3 Ps” approach. The “3 Ps” paradigm—prosecution, protection, and prevention—serves as the fundamental framework. Many global actors, including the US Department of State, follow this approach.<sup>2</sup>

## MOST SIGNIFICANT ACHIEVEMENTS

**HRGP F/GBV:** Some of the key achievements of the HRGP/ F/GBV project include: beneficiaries receiving high-quality psycho-trauma treatment services, F/GBV prevention services by CJHs, CJH staff

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<sup>1</sup> USAID/DOMINICAN REPUBLIC MONITORING, EVALUATION, AND LEARNING PLATFORM, Gender and Inclusive Development Assessment (GIDA) Dominican Republic Final Report, April 2020.

<sup>2</sup> US Department of State 3Ps: Prosecution, Protection, and Prevention <https://www.state.gov/3ps-prosecution-protection-and-prevention/>

training on how to detect F/GBV, improved data management and inclusion of persons with disabilities (PWD), development of a referral mechanism for GBV victims in Santo Domingo West (SDW), expanded use of a joint protocol for *in flagrante delicto* to increase the execution of arrest warrants, a GBV-awareness campaign in SDW called “Know Who You Know,” draft guidelines for litigation with a gender perspective to improve the prosecution of GBV cases, expanded/improved comprehensive psycho-trauma treatment services for victims reaching a total of 1,755 F/GBV victims in the first two quarters of fiscal year 2020 (59 percent of the goal), development of a best practice for service provision for victims of F/GBV, and protocols for working with vulnerable populations.<sup>3</sup> When planning future activities, the participants should:

- seek to increase inter-institutional coordination;
- focus on preventative work at the community level and;
- provide basic empowerment education.

**One of CJSSP’s** most significant achievement was improving victims’ emotional well-being by providing beneficiaries with a better understanding of what violence is and how to recognize it; with increased self-respect, security, and optimism about the future; improved relationships with their families and their children; increased well-being/psychological stability; increased self-esteem; increased levels of empowerment; and with increased knowledge of tools, and strategies they can use to break the cycle of violence. Other key achievements include:

- Delivery of empathetic services that enabled trust building.
- Guaranteed confidentiality, security and privacy.
- Victim care protocols are efficiently implemented so that victims can develop confidence in the system and change their lives.
- Articulated response between all the actors according to the particularities of the cases.
- Services that respond to particular needs and cause sustainable changes in their lives.
- Trained personnel who are sensitive and committed to the subject, which requires specialized training to address F/GBV.
- Clear rules and ethical norms for the provision of services that are victim-centered.
- Institutionalized services (norms, routes, protocols, etc.) to attend to victims and aggressors.
- Services that guarantee comprehensive care for victims (prevention, care, protection, criminal sanction) focused on satisfying the needs of users.
- Putting in place a follow-up system for F/GBV cases.
- Clear roles and processes identified among the different institutions involved.
- Application of satisfaction surveys.

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<sup>3</sup> CRIMINAL JUSTICE SYSTEM STRENGTHENED PROJECT ad hoc report on gender based violence (GBV) September 2019 to April 2020, page 8.

**ICITAP** focuses on comprehensive management of F/GBV within the DNP, as well as the care and equity of women with a focus on human rights. This consisted of four subcomponents: institutional development, inter-institutional coordination, police culture, and prevention within the community. The program has made progress regarding all four subcomponents. The review also found, however, that police reforms are urgently needed for the protection of victims and the prosecution of perpetrators. In addition, many challenges remain to carrying out investigations of F/GBV cases, enforcing protection/restraining orders, and addressing the low arrest rate of perpetrators. Efforts should be focused hereafter on inter-institutional coordination and information management and community prevention, which are critical to effectively combatting F/GBV.

### **Some of the key ICITAP achievements include:**

- Assisted the DNP with the development of the Institutional Gender Commission;
- Developed a proposal and procedures for the Directorate of Attention to Women and Domestic Violence (DEAMVI) structure;
- Assisted the DNP with developing the characterization of arrests by court order jointly with the SDW Victim Attention Unit;
- Created an incremental improvement in the DNP culture with higher levels of awareness around F/GBV;
- Created a police app with an option to report cases of F/GBV;
- Developed an institutional social network called "Values of Co-existence" that seeks to promote peaceful coexistence;
- Developed RelacionARTE, (relation + art), which includes a virtual platform for prevention actions on F/GBV and community dialogues where F/GBV was raised as a major issue;
- Provided technical support and assistance to the DNP to draft inclusion policies for PWD with the National Council for People with Disabilities (CONADIS).

### **CHALLENGES**

The main implementation challenges for CJSSP have been the COVID-19 pandemic and the responsive declaration of the State of Emergency on March 1, 2020; staff rotation at the SDW Victim Attention Unit; and visit/approval of DIFNAG for the use of the Gesell chamber in SDW, which minimizes the risks of re-traumatizing victims of F/GBV. These challenges caused a delay in implementation of several activities that required in-person visits and/or training because of social distancing requirements. But the CJSSP was adaptable and moved to virtual or online psycho-trauma treatment services to keep the e program moving forward. The interviewed beneficiaries who were receiving the psycho-trauma services online reported that they preferred the in-person treatment, but they saw some benefits to doing the treatment online.

COVID-19 has constituted a major challenge for ICITAP and has slowed down implementation—especially for community interventions—due to social distancing. Overall, the DNP has faced many challenges, including: a lack of information-sharing between the organizations combating F/GBV; the lack of a common agenda with concrete goals; the lack of clearly defined roles of the multiple actors for F/GBV; critical gaps in statistics and how they are being collected for F/GBV (DNP Statistics Unit is mostly descriptive); the absence of an electronic repository/database/tracking system for the history of violence, the judicial process, protection orders, restriction orders, complaints, and arrest warrants; police directorates' lack of capacity and resources to conduct investigations/follow-up for F/GBV cases; the lack of physical spaces

in the prosecutors' offices or Violence Units for the police; and the absence of personnel, equipment, and human capital dedicated to F/GBV cases.

## RECOMMENDATIONS

### F/GBV MEDIUM/LONGER TERM FUTURE PROGRAMING IN THE DOMINICAN REPUBLIC:

1. **Design a comprehensive program** with better coordinated measures for extensive prevention, protection, and prosecution interventions between the participating institutions and actors.
2. **Provide strong political commitment to policies and laws on F/GBV and femicides, including advocating for the reform** of the Penal Code; and advocate for the Draft Law on Femicides (2+012) and the Draft Organic Law for the Prevention, Care, Sanction, and Eradication of Violence against Women (2012) laws to be passed by Congress;
3. **Establish a protocol for covering femicide cases in the media** that does not re-victimize the survivor so as not to justify sexist violence and generate empathy for the perpetrator; ensure respect for the privacy of the victims and the images that are published; and facilitate a greater understanding of GBV and the prevention of femicide.
4. **Build data capacity for costing out of F/GBV so public institutions can strategically plan for the investments needed to combat F/GBV.**
5. **Build capacity and approaches within the private sector to tackle F/GBV.**
6. **Advocate for including mental health services** in the family health insurance of the social security system and including it in the health services.
7. **Build public awareness of the National Plan for Gender Equality and Equity III (PLANEG III)** and engage all the institutions involved in eradicating GBV to widely use and promote this excellent public policy instrument.
8. **Develop a more comprehensive national plan to address GBV (more than one page in length).**
9. **Put into operation a comprehensive information system**—a shared database for arrest warrants, protection/restraining orders, complaints, historical information on victims, and reliable statistics on F/GBV that links with the National Information System on Gender-based Violence (SINAVIG).
10. **Focus on primary prevention interventions to strengthen community response.** Few coordinated actions exist to prevent F/GBV or actions that bring about changes in violent and macho behavior in all areas, such as schools, communities, the media, workplaces, institutions, etc.
11. **Focus on women's and girls' empowerment to prevent and protect them from F/GBV.** Strengthen and expand preventive actions that will promote changes in the empowerment of women and in the beliefs and attitudes of men and society in general. It is important to create violence prevention initiatives for specific vulnerable groups.
12. **Develop new progress indicators and theory of change (TOC).** The progress indicators for measuring the implementation of the Inter-American Convention on the Prevention, Punishment, and Eradication of Violence Against Women (Belém do Pará) could be used to guide development of a new TOC and set of future indicators for HRGP if it is extended over the medium/longer term. At



the level of outputs and outcomes, indicators must measure the actual program-related change taking place, not simply whether an activity was completed, how many people were trained, or the number of informed bodies, policies, and procedures, etc.

#### RECOMMENDATIONS FOR THE HRGP F/GBV

1. **Increase engagement/inter-institutional coordination.** Participants in the program employ institutional policies, programs, action plans, protocols, and action guides, among others, to counteract F/GBV. These planning instruments must contain clear and measurable objectives, goals, and actions that can be verified through constant monitoring. In addition, the plans must have an allocated budget/public investment.
2. **Employ UNFPA technical table and existing tools being developed/piloted for F/GBV inter-institutional coordination,** such as the strategy to support the strengthening of inter-institutional coordination of technical teams, the proposal for National Training of System Actors and its unique form of reference and counter-reference of the victims of violence, and the guide for essential services to address GBV to ensure the provision of high-quality services.
3. **Coordinate with the Center for Gender Studies Technical Institute (CEG-INTEC),** which has extensive experience promoting comprehensive care systems in the area of GBV and linking CJHs/DNP with their local networks for the eradication of GBV.
4. **Coordinate efforts with the Ministry of Women (MW),** which also provides legal/psychological support services at the provincial level, and link the CJHs/DNP with their **community networks to prevent GBV.**
5. **Increase collaboration with churches and religious leaders** to ensure that they address the prevention of F/GBV and give attention to the problem.
6. **For the continuity of this program, the COVID-19 pandemic and the political circumstances of the country must be taken into account.**

#### RECOMMENDATIONS FOR CJSSP

1. **Focus on the protection of F/GBV victims.** Having access to quality services is not enough for victims to report GBV and access justice. They must first recognize themselves as victims, who should be informed about the cycle of abuse, so they understand why it is important to file complaints, etc.
2. **Address weaknesses in prosecution.** The increased number of complaints by victims generally puts them in increased danger due to the weaknesses of the system for prosecution. They do not receive sufficient follow-up, accompaniment, and support to guarantee their safety once they report. Also, the prosecution of those who commit crimes needs to be more consistent and in accordance with established protocols. The CJSSP could consider further training for judges and the implementation of a monitoring mechanism so that judges, in the absence of evidence of a charge, can inquire about the victim's silence.
3. **Initiate coordination with those responsible for supporting employment alternatives or activities and/or link to social assistance programs, if necessary, for victims of F/GBV.**
4. **In addition to successful one-on-one counseling, consider adding/creating emotional support groups for victims** so there is a place for women victims to mentor and support each other while sharing their stories.

## RECOMMENDATIONS FOR ICITAP

1. **Strengthen the Dominican National Police (DNP) and the Public Ministry's capacity to conduct investigations of cases of F/GBV** in order to collect evidence beyond the victim's testimony.
2. **Use improved technology to enhance** enforcement, including panic buttons for victims, georeferenced tracking bracelets for perpetrators, and compliance reminders to ensure that perpetrators understand the terms of restraining/protection orders.
3. **Focus on the arrests of perpetrators**, ensure warrants for arrest/restraining orders are enforced, and create a Warrant Service Task Force.
4. **Strengthen and accelerate the implementation of the program to change police cultural/social attitudes.** The DNP needs to further adopt women's civil society approaches to shifting cultural and social attitudes. Women's organizations should continue to work closely with the DNP and expand the strategy with local networks to prevent, detect, and address F/GBV based on the experiences of the Ministry of Women (MW), the Center for Gender Studies Technical Institute (CEG-INTEC), and the Alerta Joven Project. Moreover, awareness-raising and sustained mobilization campaigns should continue to be implemented and aimed at the DNP and the general population.

## I.0 MID-TERM REVIEW OVERVIEW

### PURPOSE, QUESTIONS, AND STRUCTURE

To address the high rates of F/GBV and femicides in the Dominican Republic, USAID/DR implemented the \$1.6 million HRGP in October 2019, which will last until July 2021. The program aims to improve service delivery of psychological support services and access to justice for victims and promote sensitization training and police reforms related to F/GBV cases. This program contributes to the Mission's primary Development Objective to strengthen the prevention of crime and violence through funding for additional components via the following two implementing mechanisms:

1. CJSSP implemented by Chemonics (with an implementation period of June 2015–June 2020 which has been extended to June 2021, and an overall budget of \$22,034,000 with \$1.4 million in additional funds for HRGP).
2. DNP Reform Program implemented by the U.S. Department of Justice ICITAP (with an implementation period of July 2015–July 2021 and a budget of \$6,800,000 with \$200,000 in additional funds for HRGP).

The purpose of the mid-term review is to provide a timely review of recent and current programming (October 2019–May/June 2020) to inform the design of future activities. The HRGP responds to the GODR's needs to address F/GBV with: (1) cultural change and systemic reform to promote better systems for incident response within the DNP and (2) more effective coordinated service provision to F/GBV victims by local governments and civil society organizations (CSOs). The Mission has adopted an integrated "3 Ps" approach, focusing on prosecution, protection, and prevention of victims.

### GUIDING RESEARCH QUESTIONS

1. What are the most significant achievements of the HRGP F/GBV program?
2. What are the key weaknesses and/or challenges of the HRGP F/GBV program?
3. What progress have the implementing partners made toward achieving their stated objectives and results?
4. What recommendations could be provided to improve the HRGP F/GBV program?

### LEGAL FRAMEWORK FOR F/GBV AND FEMICIDES

The Dominican Republic has a fairly broad legal framework based on international instruments that the country has ratified and national regulations stemming from the Constitution of the Republic. In 1997, Law 24/97 was passed, which defines, establishes, and punishes family violence, among other types of violence, established specific care programs in the judicial system and the health sector to deal with cases of domestic violence and other forms of violence against women (VAW). Although femicide is not criminally recognized in the Dominican Republic, the AGO and the Citizen Security Observatory record intimate femicides<sup>4</sup> in their statistics. They have attempted to update the legislation, with the reform of the Penal Code, the Femicide Law Project (2012), and the Organic Law Project for Prevention, Attention, Sanction, and Eradication of Violence against Women (2012). In addition, a group of institutions have prepared the Protocol for the Investigation of the Crime of Femicide in the Dominican Republic. The vice

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<sup>4</sup> According to the World Health Organization, femicide committed by a current or former husband or boyfriend is known as intimate femicide: [https://apps.who.int/iris/bitstream/handle/10665/77421/WHO\\_RHR\\_12.38\\_eng.pdf;jsessionid=A7CC404476EA7A9D77B7EE37DE083594?sequence=1](https://apps.who.int/iris/bitstream/handle/10665/77421/WHO_RHR_12.38_eng.pdf;jsessionid=A7CC404476EA7A9D77B7EE37DE083594?sequence=1), page 1.

presidency of the Dominican Republic expanded the protocol of the Program of Attention to apply to boys, girls, and adolescents orphaned by femicides in the Dominican Republic.

A comprehensive law is critical for the prevention, care, sanction, and restitution of rights that underpin the implementation of a comprehensive strategy. The lack of a comprehensive law limits the actions of all institutions in the care and prevention system. It also creates confusion due to outdated definitions of different kinds of F/GBV. The nature and characteristics of these outdated definitions permeate the design and provision of services and limit the collection of data and the establishment of a unified information system. Without that, it is difficult to understand the reality and complexity of F/GBV or be able to evaluate the scope and impact of policies and interventions, especially with respect to femicides.

### JUSTICE SYSTEM FOR VICTIMS OF F/GBV

In 2017, the Directorate for the Prevention of GBV within the AGO was created. It established protection measures that must be enforced to counteract F/GBV and prevent femicides. But limitations on women's access to justice remain. Justice operators (state officials and employees who play a role in the justice system) do not spend the amount of time needed on F/GBV cases—the judicial process can take between three and five years to reach trial, victims are often required to go in person for follow-up, and justice does not occur once the case is reported. Progress has been made as a result of the recent development of the Interview Centers for Women Victims of F/GBV, which help avoid re-victimization. However, a remaining weakness is how the judicial process for F/GBV cases is basically reduced to the victim's statement. A very high number of F/GBV cases end without conviction due to a lack of evidence, mainly because the victim withdraws her complaint or avails herself of her right not to testify. Judges must be sensitized consistently on this matter.

### CULTURAL CONTEXT THAT REINFORCES AND JUSTIFIES F/GBV

Although VAW is a violation of their human rights, women are not always aware of their rights and do not recognize violence in all its manifestations and what it means for their lives. This is attributable to the perception that women have about the social roles assigned to them, the behaviors accepted for men and women, and gender stereotypes that are often used to justify violent behavior toward women. The high tolerance of violence by women is alarming, as evidenced by the fact that 46.7 percent of female victims of intimate partner or ex-partner violence consider these problems or conflicts to be unimportant.<sup>5</sup>

An important finding by the National Statistics Office survey on violence is the low percentage of women who directly justify violence against them in any of the following situations: 3.0 percent of women justify physical violence against a woman on the part of her partner if she is unfaithful to him, 1.8 percent justify violence for neglecting the house or children, 1.1 percent for going out a lot, and for disobeying her partner (1.1%). Such results illustrate the work that remains to close gender gaps. This should be done through a systematic deconstruction of the patriarchal culture, and through the creation, expansion, and strengthening of programs and policies aimed at training on and raising awareness of gender equality.<sup>6</sup>

Long-term strategies are also needed to modify beliefs, habits, and customs rooted in culture. This must be assumed by those who are part of the system, both for the change of approach and paradigm of service providers and for men, women, and society as a whole, to eliminate resistance to addressing the problem and dismantling widespread beliefs by families of the subordinate role of women in relation to men.

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<sup>5</sup> Ministerio de la Mujer. 2019. *Violencia contra las Mujeres en el Ámbito de las Relaciones de Pareja: Un análisis a partir de los datos de la ENESIM-2018*. Ministerio de la Mujer, ONE. Santo Domingo, República Dominicana.

<sup>6</sup> ONE, 2019.

## F/GBV AND FEMICIDE STATISTICS

The extent of reporting on F/GBV violence to the authorities is very low. Only 6.2 percent of the women who experienced any type of violence perpetrated by their current or previous partner sought some type of help, mainly from the DNP (51.7 percent), followed by the Prosecutors' Offices (42.4 percent) and 18.1 percent from other sources (educational or health authority, specialized women's centers, religious help, psychological support). The majority (76.1 percent) of women attach little importance to these events, 10.2 percent do not know or distrust the corresponding authorities, and 5.3 percent thought they would not believe their complaint or were ashamed to talk about what happened. Family violence (without a partner) is also not reported in 98.7 percent of cases, for the same reasons in descending order: they did not attach importance to the facts, economic reasons, shame, fear and other reasons. It is worth highlighting that a high proportion of women victims of intimate partner violence (71.5 percent) reported receiving a rapid response and guidance on their rights from the authorities and 10.7 percent were referred to another institution.<sup>7</sup>

**Femicide** is “the violent death of women based on gender, whether it occurs within the family, a domestic partnership, or any other interpersonal relationship, in the community, in their workplace, in public space, by any person or group of persons known or unknown to the victim, or when it is perpetrated or tolerated by the state or its agents, by action or omission,” either as an autonomous offense or as an aggravating factor in homicide.<sup>8</sup>

The number of women who lose their lives as a result of femicide continues to be a matter of great concern in the country, despite a proliferation of support services to process complaints with an increase in the Special Care Units implemented by the PM. According to the AGO's statistics, 1,418 women were murdered by their partners or ex-partners from January 2005 to November 2019.<sup>9</sup> It is important to note that these statistics differ from the data kept by the media, the Observatory of Homeland Security and Police, and the Global Democracy Foundation and Development Observatory because there is no standardization of the criteria for collecting the information.

## PROGRAMS UNDER REVIEW

### CJSSP

This mid-term review specifically focuses on human rights and F/GBV under the CJSSP, which aims to strengthen that system in the Dominican Republic by improving prosecutor effectiveness and increasing access to justice, particularly for victims of GBV and other vulnerable populations. Pursuant to USAID's Country Development and Cooperation Strategy (CDCS), CJSSP's geographic focus is on high-crime communities in the Dominican Republic, including SDW and communities served by the CJHs located in eight locations throughout the country.

CJSSP supports a network of one-stop shops, comprising both 23 GODR victim attention units within the AGO and eight CJHs managed through a collaboration among civil society, local governments, and the private sector. These one-stop shops not only provide legal and psychological support to victims but also assist with coordination among relevant Non-Governmental Organizations (NGOs) and GODR agencies

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7 ONE 2019.

8 According to the Declaration on Femicide adopted at the Fourth Meeting of the Committee of Experts of the Mechanism to Follow-up on the Implementation of the Convention of Belém do Pará (CEVI). Document MESECVI/CEVI/DEC. 1/08, on 15 August 2008.

9 Informe la Procuraduría General de la República (PGR). 11 nov. 2019 <https://www.diariohispaniola.com/noticia/57148/se-dice-se-comenta/republica-dominicana-registra-62-femicidios-en-lo-que-va-de-2019-.html>

for each individual case. CJSSP provides this support through two subcontractors/subgrantees: PACAM, a Dominican NGO, and the CJHs.

## **ICITAP**

This review also focuses on human rights and F/GBV under the Institutional Capacity and Transparency Strengthening for Police Reform (ICITAP). This program aims to strengthen institutional capacity and transparency within the DNP. Gender equality is included in the DNP Reform Program and specific technical assistance (TA) will be provided by ICITAP staff/consultants to the DNP's Gender Directorate. Since the DNP has a culture of bullying and harassing women and Lesbian, Gay, Bisexual, Transsexual, and Intersex (LGBTI) individuals, TA and training and additional materials will be created by ICITAP/DNP to recruit and hire more women within the DNP and the training will be expanded beyond DNP headquarters in Santo Domingo to the entire country. The mid-review analyzed the progress made within the four sub-components, which are highlighted in the ICITAP HRGP progress reports below.

This initiative focuses on strengthening the DNP by providing TA to develop organizational management, improve police-community relations, and sustainably embed gender-sensitive policies within the DNP. HRGP funds aim to improve treatment of women officers and F/GBV victims, to increase TA to the DNP, to build alliances with women's organizations and public institutions working to eliminate F/GBV, to build awareness within the DNP, and to promote gender policies and a gender-sensitive cultural transformation.

## **METHODOLOGY**

The mid-term review included a desk review, beginning with a review of quarterly and final reports for the HRGP F/GBV Program, the CJSSP and ICITAP reports on GBV activities and MEL plans, the Mission CDCS, the USAID GBV Strategy, the studies under the USAID Gender Based Violence Learning Agenda, the Standard Key Issue Narratives on GBV, the latest GIDA for the Dominican Republic, and the recent literature review. The team also collected secondary data through desk research, including gathering, reviewing, and analyzing pre-existing datasets, research, and documents that are relevant to F/GBV prevention and reduction in the Dominican Republic.

The review employed a mixed-methods approach that combines quantitative and qualitative elements in the triangulation of findings and conclusions. Qualitative semi-structured virtual interviews were conducted with over 40 stakeholders from June 5–26, 2020 with USAID/DR implementation partners: ICITAP staff, the DNP, Chemonics, CJHs, PACAM, victims receiving psycho-trauma treatment services, the AGO, the DA's office, GBV Unit, the DIFNAG, Commission for Gender Equality of Judiciary, Profamilia, ENTRENA, Tu Mujer, UNFPA, CEG-INTEC and independent researchers.

PACAM recommended the beneficiaries. The team conducted interviews using WhatsApp, Skype, phone calls, Zoom, and Google Hangout. The Team Lead used the focus group discussion semi-structured guidelines and conducted two FGDs with Chemonics and PACAM. The quantitative research was based on datasets from studies and surveys, which provided information about the prevalence of F/GBV and femicides from 2015–2019.

The Team Lead asked victims to speak about their experience accessing psycho-trauma treatment services and explain: a.) what help they sought; b) how they knew about services provided to support victims in their community; c) whether the location was accessible, whether they had a safe room, and whether confidentiality was physically possible; d) whether their needs were met; e) whether the service provider had the capacity to provide the services they needed; f) whether they were referred to other resources or other service providers and whether someone helped them to navigate the complex systems/safety planning; g) whether they felt respected and safe; and h) what needs to be done to improve

services/responses for F/GBV victims. The anonymity and safety of the beneficiaries was a priority. The team took a victim-centered and trauma-informed approach to prevent re-traumatizing victims and to believe their stories and to actively listen without judgment.

The team conducted the data collection for the assessment during a three-week period from June 5-26, and in accordance with the availability of participants. It was easy to access stakeholders during the pandemic since people were working remotely. However, many stakeholders also had family or friends affected by COVID-19.

## Theory of Change

The TOC guided the review. It holds that *if the culture, practices and attitudes within the DNP and service providers become more gender-sensitive and services and coordination are expanded and reinforced, then victims' access to high-quality services will improve. As victims' access to services improves, then more F/GBV victims will bring complaints, deterring perpetrators and preventing future crimes. Ultimately, as prevention, prosecution, and victim protection efforts improve, the incidence of femicide should decrease.*

The team took four approaches simultaneously during the review: the gender approach, the intersectional approach, the victim-centered approach and the “3 Ps” approach. This review complements USAID’s mandatory gender analysis,<sup>10</sup> and it is guided by the principles of USAID’s GBV Strategy.<sup>11</sup> The “3 Ps” paradigm—prosecution, protection, and prevention—serves as the fundamental framework. Many global actors, including the US Department of State, follow this approach.<sup>12</sup>

## 2.0 SIGNIFICANT ACHIEVEMENTS OF THE HRGP F/GBV PROGRAM

### CJSSP

The provision, coordination, and governance of essential health, justice, and social services can significantly mitigate the consequences that GBV has on the well-being, health, and safety of the victims and, therefore, assist in their recovery and empowerment to break the recurrent cycle of violence. The project’s geographical focus was SDW, with a close partnership with the SDW DA’s office to strengthen the Victims Assistance Unit (VAU). CJSSP has been able to implement five significant interventions with GODR prosecutors in case management, judiciary personnel on correct implementation of restraining orders, multiple stakeholders on implementation of a national care and referral model for victims, and communities on awareness and behavior change toward violence.

In partnership with PACAM, CJSSP is providing GBV victims with sustainable access to psychological assistance. Also, as part of the institutional strengthening of the CJHs and in order to increase access to psychological assistance to GBV victims, PACAM provided training on psychological assistance for GBV victims to CJH psychologists. In addition, PACAM started training other CJH staff, managers, mediators, lawyers, administrative assistants, and security guards on how to detect F/GBV. PACAM is also now certified to provide much-needed paperwork for the judicial system.

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<sup>10</sup> Suggested Approaches for Integrating Inclusive Development Across the Program Cycle and in Mission Operations Additional Help for ADS 201 Authored by DCHA/DRG/HR July 2018: [https://usaidlearninglab.org/sites/default/files/resource/files/additional\\_help\\_for\\_ads\\_201\\_inclusive\\_development\\_180726\\_final\\_r.pdf](https://usaidlearninglab.org/sites/default/files/resource/files/additional_help_for_ads_201_inclusive_development_180726_final_r.pdf), page 1.

<sup>11</sup> USAID Strategy to Prevent and Respond to Gender Based Violence. [https://www.usaid.gov/sites/default/files/documents/2155/GBV\\_Factsheet.pdf](https://www.usaid.gov/sites/default/files/documents/2155/GBV_Factsheet.pdf)

<sup>12</sup> US Department of State 3Ps: Prosecution, Protection, and Prevention <https://www.state.gov/3ps-prosecution-protection-and-prevention/>

The review found the program's most significant achievement was improving victims' emotional well-being by providing beneficiaries with a better understanding of what violence is and how to recognize it; with increased self-respect, security, and optimism about the future; with improved relationships with their families and their children; with increased well-being/psychological stability; with increased self-esteem; with increased levels of empowerment; and with increased knowledge of tools and strategies to use to break the cycle of violence. The quote below from one of the victims receiving psycho-trauma treatment from PACAM captures the impact of the HRGP:

"I now know my value as a person, and I am very grateful for this program. I had many needs and it was very good to feel supported, to grow as a person. I did not have the motivation and this program motivated me to open my salon, my own business. I realized my importance as a person. There has been a very big change/shift. I like to have the space to vent, to be listened to, to see life from another perspective, to realize that I was in a toxic situation; I feel more secure, positive, and optimistic about my future."

Another identified success was the prevention services offered by one of the subcontractors/subgrantees, the CJHs: training of community leaders, promotion of women's rights, and supporting strategies to strengthen community networks for F/GBV. The well-trained CJHs offer psychological services to women, youth, and children who are victims of violence. Those interviewed asserted that this training has made a difference because cases of women/children who are at risk are being detected and victims are then referred for psychological services. The CJHs also provide psychological services to male perpetrators and follow up with other partner institutions once they have made the referrals for victims. The CJHs utilize a victim-centered approach.

#### **The review attributed CJSSP's successful service provision for F/GBV victims to:**

- Delivery of empathetic services that enabled trust building.
- Guaranteed confidentiality, security and privacy.
- Victim care protocols that are efficiently implemented so victims can develop confidence in the system and change their lives.
- Articulated response between all the actors according to the particularities of the cases.
- Services that respond to needs and cause sustainable changes in their lives.
- Trained personnel who are sensitive and committed to the subject, which requires specialized training to address F/GBV.
- Clear rules and ethical norms for the provision of services that are victim centered.
- Institutionalized services (norms, routes, protocols, etc.) for victims and aggressors.
- Services that guarantee comprehensive care for victims (prevention, care, protection, criminal sanction) focused on satisfying the needs of users.
- Establishment of a follow-up system for F/GBV cases.
- Clear roles and processes identified among the different institutions involved.
- Application of satisfaction surveys.



## ICITAP

ICITAP is supporting the DNP to create the Institutional Gender Commission that will raise the level of importance of F/GBV across the institution. In accordance with that effort, the team conducted interviews and information-gathering with the Office for Gender Equity. They also developed an initial proposal for the DEAMVI structure. In addition, they conducted a document review to identify the design of the institutional gender policy.

The ICITAP staff/consultants assisted and coordinated with staff of Chemonics to develop a characterization of arrests by court order jointly with the SDW VAU. The second version of arrest warrant and *in flagrante delicto* arrest procedures was also approved. The information flows for arrests were developed, as was the characterization of arrests by judicial order in the Gender Violence, Intra-family and Sexual Violence Unit of SDW. In addition, there was a pilot test in SD West by the police to monitor the attention paid to executing arrest warrants.

The police have since developed an app that contains an option for reporting cases of F/GBV. It is also making plans to include a panic button. A program was created through institutional social networks, called "Values of Co-existence," which seeks to promote peaceful coexistence. Through this, more than 35,000 people have been reached. Followers on Instagram also increased by 29,900 from March 20-29, 2020. A DNP strategy has been developed called RelacionARTE, (relation + art) that includes a virtual platform for prevention actions on F/GBV. This platform provides information on F/GBV and is aimed at schools, universities, and community leaders. ICITAP also provided technical support to draft inclusion policies for people with disabilities.

ICITAP staff/consultants reported an incremental change in the DNP culture, how the institution is becoming more analytical, how there is a desire to change, and greater levels of awareness around F/GBV issues. An online program delivered education on methodologies/programs for police used to prevent domestic violence, reaching a total of 30,000 people. A study investigated the state of the relationship and treatment of the policewoman within the institution, behaviors towards F/GBV victims, level of knowledge on legislation, and police processes for cases of F/GBV violence. The representative sample was 1,310 police officers nationwide.<sup>13</sup> The Police Culture Model includes an objective to promote the protection and respect of human rights. In addition, the application to become a police officer has been changed to remove the inherent bias and no longer includes the gender, thereby making the process more equitable.

### Some of the key ICITAP achievements include:

- **Sub-component 1 Institutional Development:** With support from the HRGP F/GBV funds, ICITAP staff have assisted the DNP with the development of the Institutional Gender Commission and conduct of interviews., In addition, information gathering has taken place with the Office for Gender Equity, and a proposal and procedures for the Directorate of Attention to Women and Domestic Violence (DEAMVI) structure has been developed.
- **Sub-component 2 Inter-Institutional Coordination:** With support from the HRGP F/GBV funds, ICITAP staff have assisted the DNP with developing the characterization of arrests by court order jointly with the SDW Victim Attention Unit, approving a second version of arrest warrants and *in flagrante delicto* arrest procedures, developing information flows for arrests, conducting a pilot test in SDW to monitor the attention to execute arrest warrants, developing a proposal for an arrest

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<sup>13</sup> The Assessment Lead for the Mid-term Review asked for a copy of this research and the ICITAP was unable to share, as it has not yet been published.

form with the structured information to improve the results, and improving the exchange of information between the DNP and the Public Ministry (PM).

- **Sub-component 3 Police Culture:** With support from the HRGP F/GBV funds, ICITAP staff have assisted the DNP by creating an incremental improvement in the DNP culture with higher levels of awareness around F/GBV; presenting an online program on methodologies that police should employ to prevent F/GBV that reached a total of 30,000 people; conducting a study with a sample of 1,310 police officers on police culture regarding treatment of policewomen, behaviors towards F/GBV victims, and level of knowledge of DNP on legislation and processes for cases of F/GBV; implementing the Police Culture Model that promotes the protection and respect of human rights; and removing the gender bias for the application to become a police officer.
- **Subcomponent 4 Community Prevention:** With support from the HRGP F/GBV funds, ICITAP staff have supported the DNP with the development of a police app containing an option to report cases of F/GBV (plans are being made to include a panic button), engagement with the Community Police, an institutional social network called "Values of Co-existence" was developed that seeks to promote peaceful coexistence (35,000 people reached), RelacionARTE, (relation + art) was developed that includes a virtual platform for prevention actions on F/GBV and community dialogues where F/GBV was raised as a major issue, and technical support and assistance was provided to the DNP to draft inclusion policies for PWD with the National Council for People with Disabilities (CONADIS).

### **3.0 KEY WEAKNESSES AND/OR CHALLENGES OF THE HRGP F/GBV PROGRAM**

Section Three discusses findings related to the weaknesses and challenges facing each implementer of the HRGP F/GBV program to date.

#### **CJSSP**

The outbreak of COVID-19 and the declaration of the State of Emergency on March 1, 2020 had a negative impact on CJSSP implementation. CJSSP responded by adjusting its business continuity plan and project work plan. It could continue some activities by working remotely while others had to be put on hold. In addition, the SDW VAU suffered as a result of a change of coordinator three times between December 2019 and February 2020, which delayed the approval of the Operational Manual. The DIFNAG visit was cancelled on two occasions and resulted in an important delay in the operationalization of the Gesell Chamber in the SDW VAU.

#### **ICITAP**

COVID-19 slowed down community interventions and training of personnel due to social distancing. The pandemic has delayed the application to monitor arrest warrants in cases of F/GBV and to work on inter-institutional coordination, both of which are critical for victims of F/GBV. One of the program's biggest challenges was identifying why information was not accessible and why other key actors working on F/GBV, such as the PM and MW, had limited access to information. In addition, those interviewed asserted that a common agenda containing concrete goals, a compatible inter-institutional approach, or coordination and clarity on the different roles of the multiple actors did not exist.

The team also found critical gaps in statistics and how they were being collected for F/GBV. The DNP Stats Unit is mostly descriptive, and it needs to be more investigative. It also found no

repository/database/tracking system that stores information on the history of violence, how the judicial process is working for the victim, protection orders, restriction orders, complaints, and arrest warrants (they are only sent to one region, so there is no way to track when the perpetrator goes to another province).

There is also a lack of capacity and teams to conduct criminal investigations of F/GBV. Evidence in F/GBV cases is often reduced to the victim's statement so a high number of criminal proceedings initiated on F/GBV end without conviction. The Police Directorates do not have the faculty and the resources to carry out investigations of F/GBV cases. The fourteen Directorates in the country do not have specialized staff for F/GBV, who can do the proper follow-up on cases.

Overall, there is a lack of personnel, equipment, and human capital dedicated to F/GBV cases, and the required resources are not being invested. There is also a lack of follow-up on restraining orders with perpetrators and responses are not always immediate, consistent, and systematic. Women and children can be at greater risk when a complaint is submitted because the DNP cannot adequately protect them. The restraining order is submitted to the supervisor in the region and there is minimal monitoring. In addition, there is no records management system, nothing is automated from one region to another, and there is no means for exchanging information—no system where all law enforcement share information and where warrants are recorded (i.e., National Crime Information Center). Due to a new Director of the Community Police, the progress of this subcomponent has been delayed.

The weak inter-institutional coordination between the different actors of the system is another significant challenge that hinders the ability to efficiently and effectively respond to F/GBV victims at the national and local levels. The coordination of these cases takes place at a technical level, but it is important to influence key decision-makers to invest resources to ensure an effective and pertinent response that safeguards the physical and psychological integrity of victims and responds to their needs. The rotation of trained and committed personnel also limits the progress of interventions.

## 4.0 PROGRESS MADE TOWARD ACHIEVING OBJECTIVES AND RESULTS

Section Four discusses key findings related to the progress the two IPs, CJSSP and ICITAP, have made in meeting the objectives and results state in their MEL plans.

### CJSSP

CJSSP has successfully made progress in achieving its stated objectives and results. CJSSP has four targets, but only two are relevant and used for the HRGP. These are:

**Target #2:** Increased access to effective and humane justice and related social services for victims of GBV and other vulnerable groups, and

**Target #3:** Expanded availability of community justice psychosocial and violence and crime prevention services in priority high-crime communities.

#### There are four main expected results:

EO 5: National GBV protocol refined and implemented in SDW to improve case prosecution and victim treatment during criminal procedures.

EO 6: PM capacity to manage F/GBV criminal cases in SDW improved.

EO 7: Improved psycho-trauma treatment services for victims of F/GBV.

EO 8: Support for legal services to F/GBV victims by the MW, AGO, and Public Defense, as appropriate.<sup>14</sup> CJSSP has expanded comprehensive care and psychology services for women, and services were expanded for boys, girls, adolescents, and male perpetrators, reaching 1,755 people and 59 percent of the goal. This was a significant drop in services in Q2 due to COVID-19.

#### INDICATOR PROGRESS

INDICATOR	TARGET FISCAL YEAR (FY) 2020	ANNUAL CUMULATIVE	% ACHIEVED	QUARTERLY STATUS—FY 2020	
				Q1	Q2
Ind. 3 Gender Standard Indicator-6: Number of people reached by a United States Government (USG)-funded intervention providing GBV services (legal, psychosocial counseling, shelters, hotlines, other).	3,000	1,755	59%	1,555	200

The Subcontractors/Subgrantees PACAM and CJHs Implementation Progress Figures from January 2020-June 30, 2020 are:

#### Psychological attention:

1. PACAM: 17 women and 13 children
2. CJHs: 53 women

**Trainings:** 224 (Workshops for CJH, AGO Lifeline, SDW Violence Care Unit).

Most of the progress made has occurred under EO5: National GBV protocol refined and implemented in SDW to improve case prosecution and victim treatment during criminal procedures.

**Improving Data management:** CJSSP assisted the SDW VAU in reviewing and adjusting its current data management system and provided training on its use. The adjustments seek to increase the availability of data for decision-making, GBV case tracking, and monitoring of the efficiency and effectiveness of the VAU operations. A novelty is the inclusion of the precise recordkeeping of GBV services provided to PWD. As a result, the SDW VAU has become the first VAU in the nation generating monthly statistics on GBV services offered to PWD. CJSSP received a formal request from the AGO to provide TA for the replication of recordkeeping on GBV victims with disabilities. The AGO is considering replicating this in other jurisdictions across the country.

**Referral mechanism for GBV victims in SDW:** CJSSP worked with relevant stakeholders in SDW to strengthen the referral and counter-referral of services for victims with the aim of increasing their access to justice and decreasing the risk of re-victimization at the institutional level.

**SDW VAU and local police working relations and coordination improved to combat GBV in SDW:** They implemented a pilot project to increase the number of arrest warrants executed by the

<sup>14</sup> Criminal justice system strengthened project Activity monitoring, evaluation and learning plan (AMELP), May 12, 2020, Version 16, page 10.

police on GBV cases. This coordinated effort concerning GBV protection and prevention demonstrated initial momentum. The SDW VAU and SDW police met regularly to coordinate actions, helping to increase the number of arrest warrants executed by the police in GBV cases from 10 per month on average to more than 49.

**The expanded use of a joint protocol for in flagrante delicto management designed by CJSSP:** One positive spin-off effect of the pilot initiative to increase the execution of arrest warrants has been the expanded use of a joint protocol for in flagrante delicto management designed by CJSSP. This aims to standardize which information should be collected by the police when managing an in flagrante delicto case and how it should be collected and shared with the DA's office. The joint protocol also provides guidance on recordkeeping in these cases.

**GBV awareness-campaign in SDW:** CJSSP implemented the awareness-raising campaign "Know Who You Know." The purpose of this campaign is to invite women in SDW to reflect on how well they know the people around them—including but not limited to partners, friends, and coworkers—in order to allow them to make better decisions and, if needed, have the information necessary to facilitate and prosecute the perpetrator. In total, 275,903 women were reached via the digital media channel of this campaign. The target population for phase one of this activity was 200,000 women between 18 and 44, all living and working more than eight hours a day in SDW and surrounding areas. The target population within SDW is approximately 110,000 women. The scope was broadened to other areas surrounding SDW to target 200,000 women. The campaign reached 275,903 women between age 18 and 44 in SDW (and surroundings), 42 percent of whom were women between the ages of 25 and 35.<sup>15</sup>

**Litigation with a gender perspective to improve prosecution of GBV cases:** CJSSP's technical team is working with international and national experts on guidelines for litigation that take a gender approach to improving the prosecution of GBV cases.

**Capacity-building of the PM on GBV criminal case management:** CJSSP has provided technical and financial support to the Diploma Program on GBV hosted by the National School of the Public Ministry, which is being developed within the framework of the AGO's National Action Plan on F/GBV.

**Capacity-building on access to justice for vulnerable people, with a focus on Trafficking in Persons (TIP) and on GBV:** CJSSP is developing an eLearning tool on TIP that emphasizes the identification and referral of victims, and another eLearning tool on GBV.<sup>16</sup>

Protocols for working with vulnerable populations have been developed in the eight CJHs. They have made direct and consistent contact during the past year with the operators of the system, improving their processes for registering, measuring, and building technical capacity for record management, and creating the culture to record information.

## ICITAP

The HRGP for ICITAP is focused on four subcomponents: institutional development, inter-institutional coordination, police culture, and community prevention.

The **goal of subcomponent I is institutional development.** It aims to improve this to face F/GBV and strengthen inter-institutional coordination and articulation by establishing processes, decision-making and articulation spaces that allow the construction of a comprehensive institutional gender policy,

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<sup>15</sup> Criminal Justice System Strengthened Project ad hoc report on GBV, September 2019 to April 2020.

<sup>16</sup> CRIMINAL JUSTICE SYSTEM STRENGTHENED PROJECT ad hoc report on gender based violence (GBV) September 2019 to April 2020, page 8.

standards of care (protocol and physical space), and a team to carry out the criminal investigation of F/GBV cases.

**The expected results:** Organizational management is expected to establish standards for the treatment of victims when they approach the police to report F/GBV; improvements in prevention and protection of victims; awareness-raising campaigns within the DNP and to promote gender policies and gender-sensitive cultural transformation; integration of gender policies in a sustainable manner; TA, training and additional materials to recruit and hire more women in the DNP; inter-institutional coordination mechanisms between the DNP, the PM, and shelters; and improved information management and knowledge management of the information obtained and produced as a result of legal actions.

The implementation of the 12 interventions below has been delayed and there has been little progress on some of them due to the pandemic and the political context. This subcomponent is critical to making progress internally on F/GBV and externally to improve services for victims of F/GBV.

- I.1 Form a permanent institutional commission to combat GBV.
- I.2 Design and structure institutional processes, protocols, and guides to effectively combat gender violence and improve institutional coordination.
- I.3 Define actions to protect victims that can be formalized through standardized processes at the national level and have a space dedicated to the care of victims and the processing of arrest warrants.
- I.4 Manage information for monitoring cases of GBV (arrest warrants, arrest *in flagrante delicto*).
- I.5 Create a manual of positions and competencies of the Directorate of Attention to Women and Domestic Violence. Define standards of care (protocol and physical space) for victims, especially when they approach the police to report a case of domestic or gender violence.
- I.6 Form immediate response teams in cases of F/GBV in the five prioritized regions.
- I.7 Train and sensitize staff on new processes, protocols, and guides.
- I.8 Conduct workshops on the “role of policewomen.”
- I.9 Jointly design the Gender Equality Policy proposal.
- I.10 Document prevention and investigation procedures (DEAMVI).
- I.11 Formulate an institutional gender-equity policy.
- I.12 Organize a team to carry out the criminal investigation for cases of GBV.

**The goal of subcomponent 2 is inter-institutional coordination.** It aims to establish inter-institutional coordination mechanisms between the DNP, the PM, and shelters and improve knowledge/information management obtained and produced for legal proceedings. **The expected results:** Measures will be coordinated with the CJSSP to ensure sensitive treatment of F/GBV victims; and established alliances with women's organizations, and institutions that work to eliminate F/GBV. While some progress has been made with respect to coordination with the PM in SDW, little has been made in developing alliances with women's organizations or the elaboration of inter-institutional procedures, cited below, which is critical to improve actions to combat F/GBV.

- 2.1 Articulate with the PM through the CJSSP.

- 2.2 Establish alliances with women's organizations and institutions that work to eliminate intra-family violence and gender violence.
- 2.3 Design and elaborate on inter-institutional procedures, protocols, and guides to effectively combat gender violence.
- 2.4 Conduct socialization and training in new procedures, protocols, and guides.

**The goal of subcomponent 3 concerns police culture.** It aims to improve respectful treatment of victims of F/GBV by police officers, as well as increase knowledge/training of the police officers about internal treatment of policewomen and the legislation and understanding of the rights of victims and police service in cases of F/GBV. **The expected results:** It aims to improve sensitive treatment of F/GBV victims since detachments (police stations) and care units are the first two points of entry into the justice process for F/GBV victims; knowledge and understanding of the rights of victims of F/GBV; and transformation to a more gender sensitive culture. Some progress has been made regarding the interventions below regarding online training and online platforms, with the aim to transform the DNP to a more gender-sensitive culture.

- 3.1 Design and implement mobilization guides for police culture with an emphasis on these objectives in prioritized regions. Based on the Police Culture Model already created, the design and development of police culture mobilization guides is expected to strengthen behavior when dealing with cases of F/GBV and when interacting with policewomen within the institution.
- 3.2 Structure and conduct a first meeting with the aim to strengthen the police culture with an emphasis on proper treatment of victims and respect for policewomen.

**The goal for subcomponent 4 is community prevention.** It aims to strengthen channels and means of interaction through dialogue with communities and participation in the campaigns conducted by the MW and work in partnerships to establish a comprehensive prevention strategy for F/GBV. **The expected results:** It aims to improve relationships between the police and the vulnerable population community of gender violence; and engage in activities with at-risk youth. The progress of this subcomponent has been delayed due to the pandemic.

- 4.1 Incorporate the issue of prevention of F/GBV in the Community Youth Police program to minimize the risk in this population.
- 4.2 Design, structure, and implement the communications strategy, disseminate the progress of the intervention, and strengthen prevention.
- 4.3 Structure a prevention program where actors such as community leaders, schools, youth, and parents are articulated.
- 4.4 Define new online alternatives to receive reports of cases of F/GBV.

#### INDICATOR PROGRESS

The indicators in the table below apply to the HGRP funds in the ICITAP 2019 Activity Monitoring, Evaluation, and Learning Plan (AMELP). The project extension was recently signed but an AMELP for 2020 still needs to be developed. ICITAP has suggested changes to the indicators, which could come into effect after July 2020. Overall, progress has been made particularly with respect to procedural documents, but progress has been slow regarding training of judicial personnel and for protocols and guides to effectively deal with victims of F/GBV and other vulnerable populations.

INDICATORS THAT APPLY TO HRGP 2019-2020	TARGET	ACHIEVED	%
Number of judicial personnel trained with USG assistance	567	174	30.6
Number of models conducted to enhance police management	4	4	100
Policy and procedural documents developed and presented to the Police Board for the prioritized directorates (departments)	22	14	63.6
Number of procedures that correspond to the mission process applied according to their manual in the prioritized directorates (departments)	68	46	67.6
Number of studies, methodologies, protocols, and guides developed to dynamize the relationship and the effective response of the police to the vulnerable population	10	5	50

## 5.0 RECOMMENDATIONS

### F/GBV MEDIUM/LONG TERM PROGRAMING IN THE DOMINICAN REPUBLIC

1. **Design a comprehensive program.** There are many reasons for violence; therefore, it requires a multidisciplinary approach. It is important to empower victims and provide them with a means of subsistence. At the societal level, community/grassroots employment of technology is critical for the media and the education sector. Since a punitive approach to GBV will not succeed, the root cultural causes must be addressed, including by providing more services aimed at men. It is necessary to rethink how to intervene with regards to F/GBV with better coordinated efforts for comprehensive prevention, protection, and prosecution interventions between the different institutions and actors: the Ministry of Education (MINERD), the Ministry of Women, the Ministry of Health, the Ministry of Culture, the Ministry of Youth, CSOs, the DNP, the AGO, the Judiciary, United Nations agencies, and other international cooperation agencies.
2. **The application of the “3 Ps,” approach for prosecution, protection and prevention particularly when well focused, can provide a holistic approach to the needs of persons at risk of violence and can provide a means to address this serious problem for Dominican families.** Prevention interventions need to start in early childhood and include a focus on female empowerment. It is also important to educate the population and create large-scale community awareness campaigns to break the cycle of violence. It is necessary to create stable, sustainable, and continuous programs aimed at crime prevention.
3. **Secure political commitment, policies, and laws for GBV.** It is important to advocate for reform of the Penal Code, Draft Law on Femicides (2012), and congressional passage of Draft Organic Law for the Prevention, Care, Sanction, and Eradication of Violence against Women (2012). This can help clarify/unify definitions of GBV, create an updated legal framework that allows the ordering of interventions, clarify roles of institutions, manage a common approach, strengthen the governance of response coordination, organize and produce data to monitor the impact of policies, improve case documentation, and deepen and expand prevention efforts.
4. **Establish a protocol for covering femicide cases in the media** that does not re-victimize the survivor, so as not to justify sexist violence and generate empathy for the perpetrator. In addition, it is important to respect the privacy of the victims regarding the images that are published, cover cases



regardless of the nationality or immigration status of the victims, and monitor cases beyond the crime report. It is also important to facilitate media leaders' and opinion leaders' understanding of how they need to convey a better understanding of GBV and the prevention of femicide.

5. **Collect data for costing F/GBV and utilize direct accounting methodology.** The review did not include a gender audit, but key informants mentioned many times the importance of an allocated budget for F/GBV and it may be useful to explore if the public institutions involved in the HRGP require data for the costing of F/GBV.
6. **Build capacity and approaches within the private sector to tackle F/GBV.** The beneficiaries who were interviewed suggested that the program contemplate an economic empowerment component that integrates economic development with F/GBV programming, such as vocational training, arts and craft training, and opportunities to gain work experience.
7. **Advocate** for including **mental health services** in the family health insurance of the social security system and including it in the health services.
8. **Build awareness of the PLANEG III:** This public policy instrument contains seven fundamental themes, including an axis aimed at providing comprehensive attention to GBV. One of the six goals is important to the HRGP F/GBV: to promote judicial decisions that satisfactorily address the damages caused to the victims and protect them during the legal process from the prosecution and from capture by the perpetrator. It will be challenging to implement this plan, but it is necessary and should be executed through all the institutions involved in transforming the current reality in terms of eradication of GBV.
9. **Develop a more comprehensive national plan to address GBV, the national plan against gender-based violence** promoted by the AGO is only **one page** and contains a list of 22 actions, with seven actions focusing on prevention and 15 on prosecution. It is necessary to develop a more comprehensive national plan with the key actors and roles clearly identified.
10. **Develop a comprehensive information system/shared database:** It is important to implement a comprehensive information system that begins with definitions of complete variables validated at the international level. This will enable users to visualize the level of the problem and its complexity, and evaluate the services seeking the opinions of the victims. They should also incorporate the single registry of cases so that all actors handle the same information and women are not re-victimized. In addition, they should create a shared database for arrest warrants, protection/restraining orders, complaints, historical information on victims, and collection of reliable statistics for F/GBV that links with SINAVIG.
11. **Focus on primary prevention interventions to strengthen community response:** Few coordinated actions exist for the prevention of F/GBV and that impacts changes in violent and macho behavior in all areas such as schools, communities, the media, workplaces, and institutions. In addition, multi-pronged prevention initiatives that mutually reinforce each other can effectively shift individual and socio-cultural norms.
12. **Focus on women's and girls' empowerment to prevent and protect from F/GBV:** Strengthening services is necessary but is not enough to promote changes in attitudes and practices by service providers. It is necessary to strengthen and expand preventive actions that will promote changes in the empowerment of women and in the beliefs and attitudes of men and society in general. It is also important to create violence prevention initiatives for specific vulnerable groups such as at-

risk children/youth, young women with disabilities, girls and young women of Haitian descent, migrant women, LGBTI persons, and persons living with HIV/AIDS.

13. **Develop new progress indicators and TOC:** The progress indicators for measuring the implementation of the Inter-American Convention on the Prevention, Punishment, and Eradication of Violence against Women Belém do Pará could be used to guide the development of a new TOC and set of future indicators for HRGP, if the program is extended over medium/longer term. At the level of outputs and outcomes, indicators must measure the actual change taking place, not simply whether an activity was completed, how many people were trained, or the number of informed bodies. These should be measures for program-related change. Well-developed GBV indicators should demonstrate progress in achieving meaningful change as set forth in the TOC.<sup>17</sup>

## **RECOMMENDATIONS FOR THE HRGP F/GBV:**

1. **Conduct key stakeholder engagement/inter-institutional coordination:** Institutional policies, programs, action plans, protocols, action guides, and other tools are available to counteract F/GBV. It is critical that these planning instruments contain clear, verifiable, and measurable objectives, goals, and actions that can be confirmed through constant monitoring. In addition, the plans must have an allocated budget/public investment. A set of protocols and care guides exist, such as the Guidelines for Effective Care, Investigation, and Pursuit of cases of GBV, family violence and sexual crimes.
2. **Employ UNFPA technical table and existing tools being developed/piloted for F/GBV inter-institutional coordination:** It is important to implement the strategy developed by UNFPA to support the strengthening of inter-institutional coordination of technical teams and participate in the **Technical Table of Coordinated Interventions**, which seeks to advance the elaboration of specific products aimed at strengthening the capacities of personnel, improving the quality of services, and generating evidence.
3. **Utilize the UNFPA's proposal for national training of system actors** and its unique form of reference and counter-reference of the victims of violence to avoid re-victimization and use the guide for essential services to address GBV to ensure high-quality services. This guide should be used in all the institutions that make up the system and in local networks for the prevention, care, and prosecution of F/GBV.
4. **Coordinate with CEG-INTEC**, which has extensive experience promoting comprehensive care systems in the area of GBV, and link CJHs/DNP with their local networks for the eradication of GBV.
5. **Coordinate with the MW to avoid duplication** since it also provides legal/psychological support services at the provincial level and link the CJHs/DNP with its community networks for the prevention and attention to GBV.
6. **Collaborate with churches and religious leaders** to ensure that they enter into partnerships and take responsibility to address the prevention of F/GBV and give attention to this problem.
7. **Taking into account COVID-19 and political context:** During the balance of this program, the new health context that the world is experiencing during the COVID-19 pandemic must be taken into account, in addition to the political context of the country.

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<sup>17</sup> The "Standard Foreign Assistance Master Indicator List" at <http://www.state.gov/indicators/>.

## CJSSP

1. **Focus more on the protection of F/GBV victims:** While access to justice by victims is important, so too is their protection. Having access to high-quality services is not sufficient for victims to report and access justice; they must be empowered as well. Only 6.2 percent of cases are reported according to the Office of National Statistics (ONE) (2019) so it is important to focus on educating victims to understand the cycle of abuse and why it is important to file complaints. The protection of the victim during the period between the commission of the criminal act and her statement at the interview center or at the trial is critically important. Victims are often subjected to coercion, threats, or pressure from both the aggressor and family.
2. **Continue to address prosecution weaknesses:** The increase in complaints by victims generally puts them at greater risk of danger due to the weaknesses of the system for prosecution. There is a lack of follow-up, accompaniment, and support to guarantee victims' safety once they report. Therefore, the prosecution of those who commit crimes needs to be more efficient, with a greater degree of actions taken in accordance with the established protocols. In addition, CJSSP could consider providing additional training for judges and implement a monitoring mechanism so that these judges, in the absence of evidence of charge, investigate the victim's silence. They should also continue to build the capacity of prosecutors, judges, and administrative personnel, who need to be more sensitive and effective administrators of justice so they are able to accord personalized follow-up to each case and conduct stronger and more solid F/GBV investigations and prosecute cases in a timely manner.
3. **Coordinate efforts with the entities responsible for supporting employment alternatives and/or linking to social assistance programs, if necessary, for victims.**
4. **Consider adding emotional support groups for victims** so there is a space for women victims to be able to mentor and support each other while they share their stories. As one victim stated, "being united to fight machismo, to know our importance as a human being, how there is much adversity but in the end how to see the good, change the mindset, to pass on optimism and how women can be empowered and move forward."

## ICITAP

1. **Strengthen Dominican National Police and Public Ministry's capacity to conduct investigations of cases of F/GBV.** Many F/GBV cases are marked by weak procedures and investigations. It is important to strengthen investigations and investigative capacity for F/GBV cases, collect evidence in addition to the victim's testimony, and improve the DNP's and Public Prosecutor's Office's capacity to collect sufficient evidence to support a firm accusation, knowing that the victim may not testify.
2. **Use technology to address the high rate of inaction in F/GBV cases.** The use of technology can enhance enforcement. Victims can use panic buttons to record incidents of violence for use in a future trial, georeferenced tracking bracelets can be used on perpetrators, and apps can send compliance reminders with clear communication to ensure that perpetrators understand the terms of restraining/protection orders.
3. **Focus on the arrests of perpetrators.** To ensure that warrants for arrest/restraining orders are enforced, the Dominican National Police should create a warrant service task force. Protection orders or restraining orders are a component of F/GBV laws, but they are inadequate and unsuccessful in the DR. The DNP does not have the capacity to enforce protection orders. Technological

interventions and communication improvements may therefore help to increase the efficacy of these programs. In the absence of prosecution of perpetrators or effective protection of victims, we have witnessed how F/GBV is repeated and can escalate.

4. **Strengthen and accelerate the implementation of the program to change police cultural/social attitudes.** The DNP needs to further adopt women’s civil society approaches to shifting cultural and social attitudes. Women’s organizations should continue to work closely with the DNP and expand the strategy with local networks to prevent, detect, and address F/GBV based on the experiences of the Ministry of Women, the Center for CEG-INTEC, and the Alerta Joven Project. Moreover, awareness-raising and sustained mobilization campaigns should continue to be implemented and aimed at the DNP and the general population.

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## ANNEX B. BEST PRACTICES FOR F/GBV

A	<p><b>UNFPA developed a strategy</b> to strengthen inter-institutional coordination of technical teams, supporting the creation and operation of a technical space called the Technical Table of Coordinated Interventions, in which key institutions in the national response to GBV, to advance in the consensual elaboration of specific products aimed at strengthening the capacities of personnel, improving the quality of services and generating evidence. They have developed a <b>Proposal for National Training of System Actors</b>, an elaboration of a <b>Unique Form of reference and counter-reference of the victims of violence to avoid the re-victimization</b> of the survivor and for all of the actors to better handle the flow of information, which was approved and will be piloted in San Pedro de Macoris, elaboration of an instrument that allows gathering information to standardize the quality of the information, accompaniment and the elaboration of a legal framework, which is currently in the final process within the Presidency, <b>development of a guide for essential services to address GBV to ensure quality services</b>, among others.</p> <p><b>UNFPA also supports other public institutions in actions to strengthen the capacities of technical personnel from different institutions</b> involved in the national response to GBV as well as the development of actions to raise awareness among adolescents and young people, both at school and in the communities. They carry out information and awareness campaigns and create spaces for reflection to prevent teenage pregnancy, child marriage, violence between adolescents and in relationships, and also to promote the creation of new masculinities, higher self-esteem, and awareness of how to make complaints, among other initiatives. With the support of UNFPA, there has been work carried out for the development of a national training guide for actors in the system for the attention to GBV in coordination with the Ministries of Women, Education, Health and Youth; the AGO; the National Health System; the National Police; and the National Statistics Office, which includes content that covers protocols, procedures, human and women's rights, gender and masculinity, among other topics. The application of this Guide should be used in all the institutions that make up the system and in local networks for the prevention, care and prosecution of F/GBV violence.</p>
B	<p><b>Alerta Joven:</b> a project coordinated by ENRENA and executed with USAID funds by more than twenty CSOs that work with at-risk youth and children. It is supported by grassroots organizations aimed at preventing and reducing levels of crime and violence. It utilizes the following components: i) Education (primary and secondary) to enable reintegration and school retention through pedagogical support, development of life skills, and work with families; ii) Documentation, to provide birth certificates to this population; iii) Labor insertion through technical training in trades and entrepreneurship and support for insertion into the labor market; iv) Training in sexual and reproductive health, public youth policies, issues related to human rights, prevention of violence, positive masculinities, the peaceful resolution of conflicts, citizen participation, and other programs for the prevention and reduction of crime and violence; v) Promotion of the formation of youth protection and security networks—multidisciplinary and sustainable spaces for the reduction of crime and violence at the territorial level, whose members go through a training process. Through the eight Youth Networks created in the same number of territories, its members design plans for the prevention of crime and violence according to the problems identified and prioritized in the communities.</p> <p><b>Key successful strategies were identified:</b> i) The development of alliances and coordination of this project with state institutions linked to the prevention and care of violence and crime and formal and technical education institutes, with businesses and social organizations; ii) High technical capacities, institutional strength, and credibility of the personnel to engage in the work at the community level with non-profit organizations; iii) Preparation and standardization of guides, protocols, training material, and training of advisers to have the specialized skills set to be able to work with youth and families.</p>
C	<p><b>Plan Dominican Republic</b> works with children and youth living in vulnerable conditions. Its interventions focus on the prevention of adolescent pregnancy; prevention of violence in the families, schools, and in public spheres; and respecting their rights and opportunities for their personal, social, and productive development. It intervenes by carrying out training, implementing awareness campaigns and public advocacy, and strengthening the leadership of local leaders.</p>
D	<p><b>Center for Gender Studies of the Technological Institute of Santo Domingo (CEG-INTEC):</b> they have experience in training for the prevention and care of GBV and offer diplomas and courses for professionals on prevention, care and eradication of GBV and on Developing Local Networks for Eradication of Violence Against Women and Child Abuse. They have a history of research focused on GBV and they have invested in promoting comprehensive care systems in the area of GBV, with the creation of the <b>Local Networks for the Eradication of Gender-Based Violence in various provinces of the country</b>. Lastly, they developed journalist contests for several years to train and motivate these types of professionals to adequately address GBV in the media.</p>
E	<p><b>The MW has a prevention and care program for GBV</b> that includes legal/psychological support services at the provincial level and in coordination with hospitals, Nacional Council for Children and Adolescents, Ministry of Education,</p>



	<p>etc. In addition, it offers follow-up support to victims on how to navigate the different legal processes in the 54 Provincial Women's Offices. It provided 41,140 women in 2019 with legal advice and 5,695 with psychological support. Of these women, 80 percent were assaulted by their partner. In relation to the courts, 1,043 sentences were obtained, of which 823 were criminal and 220 civil. The Ministry has <b>twenty community networks for the prevention and attention to GBV</b>, which operate in most of the country's provinces. The MW has reached 92,819 people through 1,790 educational days throughout the country during 2019.<sup>18</sup></p> <p>The MW, in coordination with the Circle of Women with Disabilities (CIMUDIS), is working to develop a guide to address VAW with some type of disability. This initiative was carried out through the Technical Table for Coordinated Interventions for the Eradication of Gender-Based Violence, a space for inter-sectoral and inter-institutional coordination promoted by UNFPA. This proposal included the elaboration of a diagnosis of the situation of the services and of an improvement plan.</p>
F	<p><b>Community Justice House at las Caobas:</b> a restorative family justice unit was created to mitigate some of the common conflicts between couples in order to ensure that the legal system does not get saturated with these cases. The unit handles cases dealing with child support and parenting rights and division of parenting time. These issues have been identified as one of the main causes of intimate partner violence. Many women come to seek protection to escape from their persecutors.</p>
G	<p><b>Judicial Branch has:</b> a) National Plan 20/24, which establishes in axis 1 the Justice for all component and axis no. 2 on the Timely and Efficient Judicial Service; b) Gender Equality Policy and Implementing Regulations, Interview Center for victims or witnesses; c) The Supreme Court of Justice issued Resolution No. 116/2010 on regulating the procedure to obtain the statements of vulnerable persons, victims or witnesses; d) Protocol Interview Center for people in Vulnerable Conditions, Victims or Witnesses of Crime, through Closed Circuit Television, Gesell Chamber; e) Good Practice Guide, Gender Observatory, continuous training program for judges, community dialogues on the subject and a guide for justice operators on fair treatment is being prepared.</p>
H	<p><b>AGO:</b> a) Agreement with Banco BHD to strengthen the prevention campaign and Life Line (Línea Vida); b.) Messages have been sent through the telecommunications companies Claro and Viva; c) An agreement with INTEC-UBER for the transfer of victims; d) Agreement has been made with the Association of Hotels and Tourism and the Ministry of Tourism to offer talks to the tourism sector and to hotels; e) Protocol was created in the hotels for the prosecution in the Beron Unit, Punta Cana; f) Life Line (Linea Vida) hotline, which has 37 collaborators and works 24/7; g) GBV Units have been opened and renovated; h) Provided scholarships for victims through the Youth Ministry; i) Protocols defined and victim care guidelines have been developed and are used at the national level.</p>
I	<p><b>The Behavioral Intervention Center for Men:</b> was created in 2008 to adopt an intervention model aimed at working with aggressors in the rehabilitation of their abusive behavior. Currently, there are only three units in the South region and the Cibao.</p>
J	<p><b>The National Statistics Office</b> has advanced in the generation of evidence on violence, carrying out numerous investigations and specialized studies on the subject as inputs for decision-making, design, monitoring, and evaluation of public policies based on evidence: <b>ENESIM-2018</b>, the creation of <b>SINAVIG (an initiative by ONE)</b>, and other types of specialized surveys and studies surveying vulnerable population groups such as girls, boys, and adolescents, addressing issues such as child marriage and early unions, teenage pregnancy, violence at school, etc.</p>

<sup>18</sup> Ministerio de la Mujer. 2020. Anuario Estadístico del Ministerio de la Mujer. Santo Domingo, República Dominicana.

## ANNEX C. LIST OF KEY INFORMANT INTERVIEWS

#	NAME	ORGANIZATION AND POSITION
<b>STAKEHOLDER GROUP #1 USAID</b>		
	Lisette Dumit	USAID COR CJSSP and Police Reform
	Mariela Pena	USAID Youth Specialist
	Karla Sanchez	USAID Alternate COR
	Jason Grullon	Civil Society Specialist
<b>STAKEHOLDER GROUP #2 IMPLEMENTATION PARTNERS/ACTORS</b>		
	Lynette B. Batista Alonso	Chemonics International Chief of Party
	Michel Camacho	CJSSP Technical Director
	Linda Eriksson	Deputy Chief of Party
	Belinda Susana Batista	CJSSP M&E Specialist
	Francina Díaz	CJSSP GVB Specialist and Project Manager
	Coronel Roberto Hernandez	Director de Planificación y Desarrollo PN
	General Teresa Martínez	Directora de la Dirección especializada de la Atención a la mujer y violencia intrafamiliar DNP Violencia de Genero
	Coronel Yanet Jiménez	Subdirectora de la Dirección especializada de la Atención a la mujer y violencia intrafamiliar
	Carlos Maldonado	Program Director in the DR Department of Justice/ICITAP Management
	Coronel Frank Duran	Director de Comunicaciones estratégicas ICITAP
	Hector Amaya	Consultor del componente de procesos y relaciones con la comunidad ICITAP
	Sandra Fuentes	Consultora de componente de comunicación, cultura y relaciones con la comunidad ICITAP
	Wilmara Vásquez Peláez	Coordinadora de Proyectos y Capacitación-PACAM
	Lisanna Pérez Estévez	Licenciada en Psicóloga Clínica, Maestrante Intervención en Crisis y Trauma PACAM
	Nadia Ventura	Terapeuta de las mujeres víctimas Patronato de Ayuda a la Mujer Maltratada
	José Ceballos	CJH Project Director
	Massiel Montaña	CJH Director of Management and Control
	Sonia Díaz	Viceministra Políticas de Igualdad/Observatorio MINISTERIO DE LA MUJER
	Emenencia de la Cruz	Directora Casas Acogidas MINISTERIO DE LA MUJER
	Juana Rosario	Abogada técnica MINISTERIO DE LA MUJER
	Marleny Campusano	Abogada técnica MINISTERIO DE LA MUJER

Magda Alina Rodríguez Azcona	Comisión de Equidad de Género Cámara de Diputados y Diputadas
Iluminada González	Dirección de Familia, Niñez, Adolescencia y Género
Ana Andrea Villa Camacho	AG Deputy/Director, GBV Unit
Glorianna Montás	Directora Nacional de Atención a Víctimas, de la PGR
Rosa Delia Paredes	Procuradora Fiscal, Encargada de la Unidad

### STAKEHOLDER GROUP #3. BENEFICIARIES

Yocasta	Victim that has benefited from psychological services from PACAM
Larien	Victim that has benefited from psychological services from PACAM
Nadia	Victim that has benefited from psychological services from PACAM
Ana Rita	Victim that has benefited from psychological services from PACAM

### STAKEHOLDER GROUP #4 NGOS WORKING ON GBV

Katherine Javier	Subdirectora Proyecto Alerta Joven. ENTRENA, S.A
Cristina Sanchez	Executive Director, Tu Mujer
Myrna Flores	Gender Rights Manager Profamilia

### STAKEHOLDER GROUP #5 UN AGENCIES/ACADEMIC INSTITUTIONS

Jeannie Ferreras	Oficial de Género y Juventud, UNFPA
Desiree del Rosario	CEG-INTEC
María Jesús Pola Zapico, Susi	Researcher
Tahira Vargas	Independent Researcher on Masculinities/GBV

## ANNEX D. LIST OF COMPARABLE STATISTICS ON F/GBV AND FEMICIDES

### VIOLENCIA DE GÉNERO, INTRAFAMILIAR Y DELITOS SEXUALES

REPÚBLICA DOMINICANA 2015–2019

VIOLENCIAS DE GÉNERO E INTRAFAMILIAR		AÑOS				
Infracciones	Tipo de Violencia	2015	2016	2017	2018	2019
Violencia de género 309-1 C.P.	Física	3,261	2,708	3,567	4,939	7,773
	Verbal y psicológica	5,313	6,442	5,557	8,016	11,405
	<b>SUBTOTALES</b>	<b>8,634</b>	<b>9,150</b>	<b>9,124</b>	<b>12,955</b>	<b>19,178</b>
Violencia intrafamiliar 309-2 C.P.	Física	25,312	23,905	19,375	21,478	19,263
	Verbal y psicológica	31,360	29,349	28,704	35,180	38,381
	Patrimonial	1,881	2,019	2,188	2,299	1,015
	<b>SUBTOTALES</b>	<b>58,553</b>	<b>55,273</b>	<b>50,267</b>	<b>58,957</b>	<b>58,659</b>
<b>TOTAL GENERAL</b>		<b>67,187</b>	<b>64,423</b>	<b>59,391</b>	<b>71,912</b>	<b>77,837</b>
DELITOS SEXUALES		AÑOS				
Infracciones	Tipo de Violencia	2015	2016	2017	2018	2019
Delitos sexuales	Agresión sexual	2642	2105	1690	2045	2149
	Violación sexual	1275	1167	1238	1290	1403
	Acoso sexual	821	1038	435	543	940
	Sedución de menores	1767	1963	1799	2004	1933
	Incesto	236	168	401	358	436
	Exhibicionismo		66	245	90	53
<b>TOTAL GENERAL</b>		<b>6,741</b>	<b>6,507</b>	<b>5,808</b>	<b>6,330</b>	<b>6,914</b>
CANTIDAD DE ORDENES DE PROTECCION		15,093	13,738	17,148	17,502	19,908

**Fuente:** Procuraduría General de la República, elaborada a partir de registros de las Unidades Especializadas en violencia de género, intrafamiliar y delitos sexuales

**HOMICIDIOS DE MUJERES Y FEMINICIDIOS EN REPUBLICA DOMINICANA, SEGÚN TIPO, 2005-2019**

<b>AÑO</b>	<b>TOTAL</b>	<b>FEMINICIDIOS</b>	<b>HOMICIDIOS DE MUJERES</b>
2005	190	98	92
2006	177	99	78
2007	173	89	84
2008	204	131	73
2009	199	92	107
2010	207	102	105
2011	233	128	105
2012	196	102	94
2013	160	71	89
2014	187	100	87
2015	144	77	67
2016	167	88	79
2017	209	107	102
2018	165	83	82
2019	152	77	75
<b>TOTAL GENERAL</b>	<b>2,763</b>	<b>1,444</b>	<b>1,319</b>

Fuente: Ministerio Público, compilado de la Policía Nacional e Instituto Nacional de Ciencias Forenses

## **ANNEX E: FOCUS GROUP GUIDELINES**

### **INTRODUCTION**

Focus groups can reveal a wealth of detailed information and deep insight. A focus group creates an accepting environment that puts participants at ease and it allows one to understand things at a deeper level. It is a good methodology to use to get more in depth information on ideas and opinions about the current state on family and gender-based development in the Dominican Republic. A focus group can be between 3-12 people. The responses to the questions will be kept anonymous.

### **PARTICIPANT INCLUSION/EXCLUSION CRITERIA**

The following criteria should be used as a basis to screen all potential participants for the focus groups:

- Be familiar with family and gender-based violence
- Known for their ability to respectfully share their opinions
- Willing to volunteer about 1.5 hours of their time

### **DEFINING A FOCUS GROUP**

The ideal amount of time to set aside for a focus group is anywhere from 60 to 120 minutes. A focus group is a small group of three to twelve people led through an open discussion by a facilitator. The group needs to be large enough to generate rich discussion but not so large that some participants are left out.

### **RECRUITING AND PREPARING FOR PARTICIPANTS**

Focus groups participants can be recruited in any one of a number of ways. Some of the most popular include: Nomination – Key individuals nominate people they think would make good participants. Nominees are familiar with the topic, known for their ability to respectfully share their opinions, and willing to volunteer about 2 hours of their time. Once a group of viable recruits has been established, call each one to confirm interest and availability. Give them times and locations of the focus group and secure verbal confirmation. Then e-mail them a written confirmation and call to remind them two days before the scheduled group.

### **CONDUCTING THE FOCUS GROUP**

The focus group facilitator nurtures disclosure in an open and spontaneous format. The facilitator's goal is to generate a maximum number of different ideas and opinions from as many different people in the time allotted.

### **FOCUS GROUP DISCUSSION PROCESS**

#### **I. WELCOME**

Thanks for agreeing to be part of the focus group. We appreciate your willingness to participate.

## 1.1 INTRODUCTIONS

The moderator, assistant moderator and participants introduce themselves. Emphasize the importance of their input at the beginning of the focus group. Have everyone provide an introduction as a warmup.

## 2. REVIEW THE PURPOSE OF FOCUS GROUP

We have been asked by the Cloudburst/USAID DR MELP to conduct the focus groups. The reason we are having these focus groups is to find out your opinion on family and gender-based violence issues in the Dominican Republic. We need your input and want you to share your honest and open thoughts with us.

## 3. FOCUS GROUP QUESTIONS

The focus group discussions for the Mid-term Program Review for the Human Rights Grants Fund are structured around a set of carefully predetermined questions – but the discussion is free flowing. Focus group participants do not have a chance to see the questions they are being asked. So, it is important for the facilitator to make sure the participants understand the question and can fully respond.

## 4. FOCUS GROUP GUIDELINES

**1. We want you to do the talking.** We would like everyone to participate.

**2. There are no right or wrong answers.**

Every person's experiences and opinions are important. Speak up whether you agree or disagree. We want to hear a wide range of opinions.

**3. What is said in this room stays here.**

We want people to feel comfortable sharing their thoughts and opinions.

**4. Record the Informant**

If you do not have an assistant, have one or two participants record the focus group discussion information in detail. One person can use the flip chart and the other person can record information via paper and pen or laptop.

### 4.1 Responsibility of the Assistant

The assistant will need to record the information for the responses. They will need to record the responses to each question and compile in Word or an excel spreadsheet.

### 4.2 Responsibility of the Facilitator

The focus group facilitator has a responsibility to adequately cover the prepared questions within the time allotted. The facilitator must remain neutral, refraining from nodding/raising eyebrows, agreeing/disagreeing, or praising/denigrating any comment made. The facilitator also has a responsibility to get all participants to talk and fully explain their answers. Some helpful probes include: “Can you talk about that more?” “Help me understand what you mean” “Can you give an example?”

## 5. Focus Group Questions

## 6. End of Focus Group

At the end of the focus group, thank participants for their thoughtful and insightful responses. Describe how the information will be used for the draft final report mid-July 2020.

## 7. Writing of Report

Write a short paragraph summarizing findings for each question, possibly noting similarities and differences across the group. If possible, add powerful quotes. Upon completing a focus group, please write a summary of the participants' ideas. We ask that these reports be submitted to Jessica Harris, Assessment Lead at: [jsscharris@gmail.com](mailto:jsscharris@gmail.com) no later than 5 days after your group. Please use the report template to structure your summary.

## 8. Demographics of Participants:

### 9. Report Template—Focus Groups

#### 1. Meeting date:

#### 2. Focus group facilitators:

#### 3. Number of participants:

**4. Methodology:** Explain how many focus groups you held, how many people participated, how they were recruited, and the date and location of meetings. Mention the ways that you obtained the input, such as note taking. List the questions that the moderator asked the participants.

#### 5. Feedback summary:

- a.) What specific ideas did the group propose (as related to each question)?
- b.) What additional ideas/opinions, if any, were suggested?
- c.) Were any suggestions, feedback, and/or criticism offered regarding the process?
- d.) Briefly describe your sense of the focus group.
- e.) Were people active and engaged?

**6. Summary of Findings:** Include a results page. List and summarize the information obtained from the focus groups. Highlight any particularly relevant or insightful comments from group members, including representative quotes, results of questions.

**7. Conclusion:** Finish the report with a conclusion. Explain what you learned from the focus group. List recommendations that describe how you can use this information to improve USAID's family and gender-based violence programming.

#### 8. Date submitted:



## ANNEX F: QUESTIONNAIRE FOR DONORS/NGOS/ACADEMIA

### THEORY OF CHANGE

The Mid-term program review is guided by the program's **theory of change**:

*The theory of change is that if the culture, practices and attitudes within the National Police and service providers become more gender-sensitive and services and coordination are expanded and reinforced, then victims' access to high-quality services will improve. As victims' access to services improves, then more Family and Gender-Based Violence victims will bring complaints, deterring perpetrators and preventing future crimes. Ultimately, as prevention, prosecution, and victim protection efforts improve, the incidence of femicide should decrease.*

1. Do you understand that providing psychological and legal support and protection services to victims of gender-based violence that are sensitive to gender, increases and strengthens coordination between actors, would the quality of these services be improved? What does the quality of this type of service mean for you?
2. For you, if there is an improvement in victims' access to services, would this be enough for more women to come to report family and gender-based violence?
3. What impact would it have if women increase complaints on aggressors? / Do you think it would stop aggressions and prevent future femicides or on the contrary increase the danger for women?
4. Do you think that when the prevention, care, protection and access to justice services for victims improve, the incidence of femicide and gender-based violence will decrease? What has been the trend in the rates of femicides and GBV decreasing in the last 9 months?

### USAID/DR HUMAN RIGHTS GRANT PROGRAM FOR FAMILY AND GENDER-BASED VIOLENCE

1. Are you familiar with the USAID/DR Human Rights funds for Family and Gender-Based Violence in the DR? For improving psychological, legal and medical services for victims of F/GBV and for training and reforms within the national police around GBV?
2. If you are familiar, what are the most significant achievements of the HRGP F/GBV program?
3. What are the key weaknesses and/or challenges of the HRGP F/GBV program?
4. What recommendations can be made to improve the HRGP F/GBV program?

### GBV INTERVENTIONS

1. Do you have any interventions aimed at strengthening the capacity of service providers to prevent and respond to gender-based violence?
2. What opportunities do you have identified to coordinate and collaborate with service providers?
3. Are they aware of and / or working in community initiatives to prevent and respond to gender-based violence undertaken in collaboration with groups of men and women?
4. Has a multi-sector network been created to improve access to services for GBV survivors? Are men, women, boys and girls accessing and using quality services more effectively and efficiently?
5. Are there critical gaps in knowledge, other gaps in services for victims of violence?

6. What has worked for your programs for the prevention and care of domestic violence / gender violence? What are the main Lessons learned?
7. Do you have or know of any intervention aimed at creating awareness and transforming the norms related to gender violence? Have the implemented strategies impacted on increasing knowledge about violence against women in women, girls, aggressors, and society as a whole?
8. What have been the main barriers you have had to promote cultural changes in the different actors and in public debates about the impact of gender-based violence in your community?
9. Have your activities changed the attitudes and beliefs of community members and networks, end-to-end increased the use of services by GBV survivors?
10. Are you aware of the existence of networks and / or support groups and if these networks have made it possible to increase the use of services by GBV survivors?
11. Have capacity building activities for police officers, social workers and service providers improved the timeliness, timeliness and quality of the services provided, in addition to the collection of evidence to support the processes of the victims?

## ANNEX G: GOVERNMENT QUESTIONNAIRE

### CORE TOC QUESTIONS

1. Do you know some services that are provided to women who are victims of domestic or gender violence? Which?
2. What is your assessment of the services offered to victims of gender-based violence, are they quality services? How would the quality of these services be improved? Do you consider that the increase in quality services leads victims to seek justice?
3. For you, if there is an improvement in victims' access to services, would this be enough for more women to come to report family and gender-based violence? When victims' access to services improves, do they file more complaints?
4. What impact would it have if women increase the complaints of the aggressors? / Do you think it would stop the aggressions and can prevent future femicides or on the contrary increase the danger for women? Do you think that the more it is reported, the perpetrators are deterred from using more violence and preventing future crimes?
5. Do you think that when the prevention, care, protection and access to justice services for victims improve, the incidence of femicide and gender-based violence will decrease? In your experience, what has been the trend in the rates of femicides and GBV? decreased or increased in the last 9 months?

### USAID/DR HUMAN RIGHTS GRANT PROGRAM FOR FAMILY AND GENDER-BASED VIOLENCE

1. Are you aware of the program and the funds that USAID / RD is investing in human rights, prevention (awareness raising and culture change), care (psychological, legal, orientation), protection and punishment of domestic violence and gender-based violence in the country, aimed at improving psychological and legal services for victims of violence and for training and reforms within the national police around GBV? In the case that you do not know the program, go to question 5.
2. If you are aware of these funds, what are the most significant achievements of the HRGP F / GBV program so far?
3. In your opinion, what are the main weaknesses and / or challenges of the HRGP F / GBV program?
4. What recommendations can be made to improve USAID's HRGP F / GBV program?

### FUNDING

1. What is the percentage of national government general and sector budgets dedicated to violence against women/GBV Policy?
2. What is your opinion on the level of resources of the national budget aimed at providing support services to victims and aggressors and monitoring the scope and impact of policies to reduce gender-based violence? How do you feel about budgets to deliver and monitor GBV?

### POLICIES AND PROGRAMS

3. What policies and programs exist to prevent, support, protect and punish gender-based, intra-family violence and violence against women?

4. What is your opinion about the current policies to prevent, support, protect, sanction and monitor them at all levels? Have they been effective? What change would you like to make regarding the implementation of laws, policies and services? How much of that do you think has been achieved so far?
5. What have been the actions developed to promote changes in beliefs, practices and attitudes in service providers in relation to GBV, IFV and against women? And at the level of society in general? And at the level of awareness and empowerment of women? What efforts have you made to change social norms?
6. Is there resistance to address gender violence? What have been the main resistance and what has been done to reduce them? How has the risk of further violence been managed? What are the main causes of violence against girls and women? How is the risk of further violence managed?
7. Does institutional planning focus on the empowerment of women? (given that empowering women is both the means and the end of addressing GBV)? Do they have empowerment mechanisms? Do you have any evidence of changes in the behavior of the beneficiaries of these types of services?

#### COORDINATION AND COLLABORATION

8. Do you have coordinated interventions operating at multiple levels and in multiple sectors? Where are the weaknesses in the country?
9. To create and sustain change, do you support women's rights organizations that are tackling GBV? Do you support building inclusive social movements?

#### JUSTICE SYSTEM

1. According to your experience, how do you assess the actions of the Justice System to confront Gender Violence? What are the main advances for you?
2. What are the main gaps and opportunities to improve the efforts made so far?
3. Do you understand that the existing psychological, legal and access to justice services in the country constitute an adequate response to eliminate gender-based violence?

## ANNEX H: QUESTIONNAIRE FOR IMPLEMENTATION PARTNERS

### ABOUT THE HRGP/F/GBV PROGRAM

1. What are the main successes / achievements of the program? What do you consider a success? / What do you consider an achievement?
2. Is the program reaching diverse populations? If so, are the needs and experiences with these different groups different?
3. Are you keeping records of demographic and geographic information on survivors, e.g., age, geographic location, gender, etc.?
4. Are there significant differences in terms of gender, age, LGBTI population, geographical origin, people with disabilities, survivors?
5. Have you witnessed any cultural or systemic change regarding the care and protection of victims of violence and service providers to F / GBV due to this program?
6. How is this change measured? Do you have a specific data source?
7. How would you describe these changes and what are the most important differences?
8. What are the main weaknesses and / or challenges for the execution of the program? Suggestions to overcome them.
9. What are the existing resources and networks that you are using to address these challenges?
10. What opportunities are there to improve victim services and make interventions more effective?
11. How has the quality of your services for victims improved? Please describe.
12. Are records kept of survivors of GBV?
  - a. • Those who report being optimistic in rebuilding life after the GBV incident,
  - b. • The cases of GBV prosecuted that have resulted in a conviction of the perpetrator,
  - c. • GBV cases filed and adjudicated within X months from the date the charges were filed
  - d. • Average time it takes for cases to be tried, once a GBV charge is filed
  - e. • People at risk of gender-based violence and / or survivors of gender-based violence who report having the ability to financially support themselves and their family

**Prevention:** defined as prevention of gender-based violence from occurring, by working with local organizations, civil society, and key stakeholders, including men and boys.

1. What local organizations were you working with (in 2019)?
2. What local organizations, if any, are you working with at this time?
3. Has the quality of your interaction changed? If so, how?
4. With which civil society organizations did you work (if any) (year 2019)?
5. With which civil society organizations, if any, do you work at this time?
6. Has the quality of your interaction changed? If so, how?

7. With which civil society organizations, if any, do you continue to work at this time and with which do you plan to work during the execution of the USAID program?
8. With which public institutions and CSOs have you been working and do you plan to work on awareness-raising and training actions?
9. Were you working with an educational institute in (2019)?
10. Are you working with any educational institute now?
11. Has the quality of your interaction changed? If so, how?
12. What was the culture like in (2019) in terms of gender violence issues?
13. How is the culture being changed to prevent gender-based violence?
14. Have you explained the program to community leaders and key community members (both men and women) for their support?

**Protection** from gender-based violence by identifying and providing services to survivors once the violence occurs.

1. How do you identify survivors of domestic violence / gender violence?
2. How are people taught when they receive and / or exert violence? How are they encouraged to step forward?
3. What immediate services are provided to survivors of GBV? What safety precautions are being taken to ensure their well-being?
4. What long-term services are offered? Judicial services, psychological support, rehabilitation services, protection?
5. Are victims provided with a basic overview of prevention, care, protection, punishment and reparation for women and children, their rights, ethical issues, safety issues, and referral services available in the communities?
6. Have you received training to comply with international standards for the provision of domestic violence / gender violence services?
7. Are there any accessibility issues (physical or geographic) that affect the ability of victims to access services (including accessible for people with physical disabilities), language? Which are?

**Accountability** to ensure that perpetrators are prosecuted and to end impunity.

1. Has there been an increase in complaints / reports from victims? Is there any evidence that this has led to deterring offenders / perpetrators?
2. In the event of an increase in complaints, what do you attribute this increase to? (women report / others). Do you have information systems that allow you to compare the rates of violence in the event that an official complaint is not filed?
3. Do you think that the number of femicides / levels of violence decreased in the country in the last 9 months due to this program? What are the most important factors in the program that you think contributed to that?
4. Are there gender-sensitive community-based dispute resolution mechanisms?

## ANNEX I: QUESTIONNAIRE FOR NATIONAL POLICE

### CORE TOC QUESTIONS

1. What are the services that are currently being provided to women victims of gender violence?
2. Do you understand that providing psychological and legal support and protection services to victims of violence increases and strengthens coordination between actors, would the quality of these services be improved? What is the quantity and articulation of the services?
3. What does the quality of this type of service mean for you? Does the increase in options and accessibility to quality services lead victims to turn to the justice authorities / the police?
4. For you, if there is an improvement in the access of victims to services, would this be enough for more women to come to report domestic violence / GBV attacks?
5. What impact would it have if women increase complaints on aggressors? Do you think that it would stop the aggressions and prevent future femicides or on the contrary, increase the danger for women?
6. Do you think that when the prevention, care, protection and access to justice services for victims improve, the incidence of femicide and gender violence will decrease? What has been the trend in femicide and GBV rates in the last 9 months?

### USAID/DR HUMAN RIGHTS GRANT PROGRAM FOR FAMILY AND GENDER-BASED VIOLENCE

1. What are the main achievements of the program so far? What is expected at the end of its execution? / Main services offered? Which of the main domestic violence / gender-based violence problems do you consider should be addressed with these funds?
2. What are the main problems that are expected to be tackled for intra-family violence / gender violence with these funds?
3. What are the main weaknesses and / or challenges of the program?
4. What recommendations can be made to improve the program?
5. What are the main factors that are affecting GBV rates in your country? What was the scenario like before the pandemic and now in a pandemic?
6. How is the National Police contributing to the reduction of gender-based violence? Does it have any new approaches to address family violence / gender-based violence at the community level? What has been the strategy and approach used? What has been learned?
7. What capacity do domestic violence units have to help victims? What training is needed for the DNP to have the capacity to recognize, respond to, and address gender-based violence? Are there logistical resources such as vehicles for the transfer of victims or aggressors, physical space for attention to victims, and institutional and inter-institutional information systems to expedite orders for distancing, arrest, among others?
8. Please describe the inter-institutional coordination you have with the justice sector? How is information handled between institutions?
9. How do victims of gender-based violence usually access the police? What prevents victims from reporting violence or seeking police services?

10. How fast are protection orders / restraining orders enforced? What factors contribute to this?
11. What is the level of understanding about the rights of victims of domestic violence / GBV of the members of the DNP at the level of detachments and other departments? Have you had any specific training or training?
12. What measures do you think can be taken to guarantee gender sensitivity in the members of the DNP in the exercise of their functions in terms of GBV?
13. How do you plan to improve relations between the police and the populations most vulnerable to gender-based violence?
14. Do you have any alliances currently established with organizations and institutions of women / LGBTI persons that work to eliminate intra-family violence and gender violence?
15. Are you keeping records of people on survivors in demographic and geographic terms, e.g., age, geographic location, gender, disability, etc.?
16. Are there significant differences in terms of gender, age, LGTBI population, geographical origin, people with disabilities, of survivors?
17. How do you plan to measure the police response to cases of domestic violence and gender-based violence? How do you plan to measure changes in response / service?



## ANNEX J: USAID QUESTIONNAIRE

### CORE TOC QUESTIONS

1. Do you understand that providing psychological and legal support services and protection to victims of gender-sensitive violence, increases and strengthens coordination between actors, and the quality of these services would be improved? What does quality of this type of service mean to you?
2. For you, if there is an improvement in the victims' access to services, would this be enough for more women to come to report the FIGBV attacks?
3. What impact would it have if the women increase the denunciations in the aggressors? / Do you think that it would stop the aggressions and prevent future femicides or, on the contrary, increase the danger for women?
4. Do you think that when victims' prevention, care, protection and access to justice services improve, the incidence of femicide and gender violence would decrease? What has the trend been in rates of femicide and GV decreasing in the last 9 months?

### USAID/DR HUMAN RIGHTS GRANT PROGRAM FOR FAMILY AND GENDER-BASED VIOLENCE

1. Are you familiar with the USAID/DR Human Rights Grants Program for Family and Gender-Based Violence in the DR? For improving psychological, legal and medical services for victims of F/GBV and for training and reforms within the national police around GBV?
2. If you are familiar, what are the most significant achievements of the HRGP F/GBV program?
3. What are the key weaknesses and/or challenges of the HRGP F/GBV program?
4. What recommendations can be made to improve the HRGP F/GBV program?
5. Are there any critical knowledge gaps, other gaps in services for victims of F/GBV?
6. What is the percentage of the USAID/DR budget dedicated to F/GBV Policy?

### GBV INTERVENTIONS

1. Are there interventions aimed at raising awareness and transforming the norms around gender violence at the service provider level and the population in general with specific actions for women and men? Do you think the strategies have increased awareness of violence against women and girls? Do you think these activities have changed the attitudes and beliefs of community members?
2. Do you think peer to peer networks of survivors of violence have increased the use of services by survivors of GBV?
3. What do you think is the main cause of violence against girls and women?
4. Resistances are often observed to address gender-based violence in its root causes. In implementing organizations, how have you handled this type of resistance?
5. Are you aware of some innovative initiatives for the prevention, care, protection and punishment of gender violence in the country and / or other countries in the area replicable in the DR?
6. These initiatives are aimed at creating and maintaining change in:

- a. Build capacities to change practices and approaches of service providers,
  - b. The empowerment of victims (awareness of the situation and rights, creation and strengthening of support networks among victims), and the construction of inclusive social movements?
7. Do you currently collaborate with groups of men and women in community initiatives to prevent and respond to gender violence?
8. What are the main lessons learned from the implementation of the initiatives from USAID?

## **ANNEX K: QUESTIONNAIRE FOR BENEFICIARIES**

*Method: Unfolding experiences with accessing services for gender-based violence issues and their experiences with service providers.*

1. What kind of help / services did you seek after feeling a victim of violence and where did you seek them?
2. How did you learn about the services provided to support victims of domestic violence and gender-based violence in your community?
3. Did they offer you general information about the actions of prevention, attention and protection against violence for women and children, their rights, ethical issues, security issues and the reference services available in the community?
4. Was the location accessible? In the place where she was attended, did the space / room give her security to be attended in strict confidentiality?
5. Did they respond to your needs? If so, do you think you are more confident with the result?
6. Did XX institution have the capacity to provide the services you needed? (Trained personnel with humane treatment, transportation, security, service opportunity, etc.)
7. Were you referred to another institution to continue supporting you and orienting you on the steps to follow? Did you receive any help or support to ensure your physical safety?
8. Did you feel respected and safe in XXX? Do you feel that the help you received strengthened you? Are you optimistic about the future?
9. After the support received, do you think your attitudes, perceptions and thoughts about domestic violence and gender violence have changed? Do you think it has helped you to seek justice? What steps have you taken to get justice done?
10. How has your abuser reacted?
11. Did acting dissuade you from using more violence, in your opinion? Was the risk of violence greater for you and your children because you took such action?
12. What needs to be done to improve services for victims? For example: to encourage more victims to ask for help?