Gender-based violence is one of the most pervasive and yet least-recognized human rights abuses in the world. As many as one in every three women has been beaten, coerced into sex, or abused in some other way - most often by someone she knows, including by her husband or another male family member. Gender-based violence leaves its victims with long-term psychological and physical trauma, tears away at the social fabric of communities, and is used with terrifying effect in conflict settings, with women as the main target.

While rape is perhaps the most horrific example, gender-based violence includes a host of violations such as domestic abuse, female genital mutilation and other cultural practices that irreparably damage girls' and women's reproductive and sexual health, honour killings or reprisals, child abuse, and sexual slavery such as forced prostitution – any act that results in physical, sexual or psychological harm or suffering. Enrenched gender roles and unequal power relationships make women more vulnerable and less able than men to exercise control over their bodies and lives. Nearly universally, cultural norms of masculinity foster aggressive and often violent behaviour for men.

Long after the act of gender-based violence, survivors continue to experience physical injuries, psychological trauma, and social stigma. According to the World Bank, gender-based violence accounts for as much death and ill-health in women aged 15–44 years as cancer. Women who suffer sexual abuse or ongoing psychological and physical violence have more unplanned and/or unwanted pregnancies than other women, more sexually transmitted infections, and higher rates of HIV. The risk for maternal mortality is three times as high for abused mothers, but because of stigma and lack of awareness in the medical profession, women suffering from violence are much less likely to seek medical assistance. Children conceived from rape are often rejected or discriminated against. Raped women are ostracized by their husbands or communities, or become victims of further violence in so-called ‘honour killings’.

In conflicts, rape has been used by fighting forces as a tactic of war to humiliate, intimidate and traumatize communities, and as a method of ethnic cleansing. The facts are stark: up to 50,000 women were raped in Bosnia and Herzegovina, and up to 500,000 during the Rwanda genocide. During the height of fighting in the conflict in the Democratic Republic of Congo in 2008, nearly 40 women were raped a day in one province alone. Women and girls are abducted into sexual slavery or forced to exchange sex or marriage for survival. While men are largely the perpetrators of sexual violence, rape against men is a hidden shame of conflicts around the world, used to equally devastating effect on its male victims.

Despite the recognition of the gravity of gender-based violence, the response mechanisms for the care and support for survivors are often woefully inadequate. Incidents of gender-based violence are underreported, as many women do not know their legal rights and are afraid to come forward, for fear they will be victimized again. Access to protection, health and psychosocial services and legal redress is limited by lack of resources and political will, continuing violence, poverty, cultural and social stigma, and impunity.
CARE’s response

CARE works with communities, governments, and local groups around the world to prevent and address gender-based violence. Including gender equity in all our programming, CARE takes a multi-pronged approach by addressing underlying causes of gender-based violence, improving legal, health and support services for survivors, empowering women and girls, and working with men and boys. CARE builds on local support systems and structures, ensuring that solutions are community-driven and all actors are involved in their implementation.

CARE is currently implementing projects in more than 20 countries that are explicitly focused on reducing and mitigating gender-based violence. Dozens more projects address gender-based violence as a cross-cutting theme, particularly projects in maternal health, education, and HIV/AIDS prevention, care and treatment. Providing access to counselling services, support and care through women’s savings and loans groups, for example, has proven to be an effective way of educating women of their rights and helping them find the support they need.

CARE’s programs foster women’s empowerment and prevent gender-based violence through:

- Encouraging strength of local networks to address legal, psychosocial, medical and other needs of gender-based violence survivors;
- Building capacity of women in taking part in policy analysis, advocacy and policy development;
- Fostering women’s economic savings and loans programs and finding a voice through collective action;
- Engaging men and boys in exploring their own understanding of gender identities, cultural expectations of violent behaviour, and their role as allies in promoting gender equity;
- Supporting women’s rights organizations that are seeking to promote social change towards gender equity;
- Facilitating public dialogue and debate on the rights of women as citizens and human beings;
- Protection of women’s property and inheritance rights;
- Enhancing universal girls’ education.

CARE advocates at national and international levels to change laws and policies to protect and empower women during and after conflict through better coordination of responses, better access to humanitarian assistance for survivors, better prevention, and better data collection. The adoption of the UN Security Council Resolution 1888 in September 2009 is an important step forward, calling for strengthened UN leadership and coordination of global efforts to put an end to rape as a weapon of war.

Recent examples of CARE’s work

Democratic Republic of Congo In the heavily conflict-affected area of Birambizo, North Kivu, CARE provides survivors of violence with medical assistance, psychosocial support, and help in recovering their ability to provide for themselves and their families, and works with communities to help women reintegrate into their former lives.

In India CARE is teaching community-based health care workers to understand how violence is not inevitable or normal, to overcome their own shyness to counsel and refer women who report domestic violence, and to counsel couples about mutual consent in sexual relationships. CARE works with women’s groups to support each other and advocate with the police for a community that promotes safety and reduces discrimination against survivors of violence.

In Burundi CARE raises awareness and reduces tolerance for violence through targeted community messages via radio and interactive theatre. CARE trains village volunteers to counsel and refer rural women who are experiencing domestic violence. After the training, the local clinic providing health services treated more than 500 victims of violence, 70 percent of whom were girls under 18 years of age.