





Government of the Republic of Zambia – United Nations Joint Programme on GBV Phase II

MPTF 2023 Annual Programme¹ Narrative Progress Report

Reporting Period: 1 January 2023–31 December 2023

Programme Title and Project Number	Country, Locality(s), Priority Area(s) / Strategic Results
• Programme Title: GRZ-UN Joint	Country: Zambia
Programme on Gender Based Violence in Zambia	Priority area/ strategic results –
Phase II	GBV Prevention and Response
MPTF Office Project Reference Number:	•
00120438	
Participating Organisation(s)	Implementing Partners
Organisations that have received direct	Government/CSOs/NGOs
funding from the MPTF Office under this	Gender Division, Judiciary Department,
programme.	National Prosecution Authority (NPA),
	Ministry of Health (MoH), Ministry of
	Community Development and Social Services
International Labour Organization (ILO)	(MCDSS), Ministry of Home Affairs and Internal
International Organization for Migration (IOM)	Security (MoHAIS), Zambia Statistical Agency,
United Nations Development Programme (UNDP)	Women for Change, Chisomo Community
United Nations Population Fund (UNFPA)	Programme (CCP), National Legal Aid Clinic for
United Nations Children's Fund (UNICEF)	Women (NLACW), Young Happy Healthy
	and Safe (YHHS), Young Women Christian
Cooperating Partners:	Association (YWCA), Zambia
Governments of Sweden and Ireland	Information Communications and
	Telecommunications Authority (ZICTA), Zambia
	Centre for Communication Programmes (ZCCP),
	Zambia Disability HIV/AIDS Human Rights
	Programme (ZAMDHARP), Zambia National Men's
	Network for Gender and Development (ZNMNGD)
Programme/Project Cost (US\$)	Programme Duration
Total approved budget as per project document:	
USD 7,201,735.00	Overall Duration 3 (52 months)
MPTF /JP Contribution ² :	Overall Duration ³ (52 months)
• by Agency (if applicable) Not applicable	
Agency Contribution	Start Data 04 12 2010
• by Agency (if applicable)	Start Date 04.12.2019

¹ The term "programme" is used for programmes, joint programmes and projects.

²

³ The duration of the Programme has been extended to 52 months from 36 months to enable completion of construction works and launches

Government Contribution	
(If applicable) In Kind Gender to quantify in-kind	
contribution.	Original End Date 31.12.2022
Space by Judiciary, technical support on design	
of the infrastructures for the FTCs.	
Other Contributions (donors)	Current End date 31.03.2024
(If applicable) Not applicable	Current End date 31.03.2024
Programme Assessment/Review/Mid-Term	Report Submitted By
Eval.	
Light Touch Assessment – Attached as Annex 2	Name: Shupe Makashinyi
<u></u>	T (willet Silespe Translating)
Yes, No Date: 30.06. 2023	Title: Programme Coordinator
	_ ,
Yes, No Date: 30.06. 2023	Title: Programme Coordinator

CONTACT FOR THIS REPORT

Gregory Saili
Assistant Resident Representative & Governance & Gender Advisor UNDP, Lusaka, Zambia
P.O. Box 31966, Lusaka
Zambia

Tel: (260) 211-386200 Email: <u>Gregory.saili@undp.org</u>

Contents

List	of Ac	cronyms	4
Exe	cutive	Summary	5
1.0	Ge	ographical Coverage Area	7
2.0		rpose	
3.0	Res	sults	9
3.1 ac		Outcome 1: GBV survivors and persons at risk (including children and adolescents) have increase and utilise quality GBV prevention and response services	
	3.1.1	Output 1.1 Target districts have increased capacity to deliver coordinated GBV services	10
	3.1.2	Output 1.2 GBV survivors have increased access to safe shelter.	14
	3.1.3	Output 1.3 Target districts have increased capacity to deliver quality legal services	15
3.2 ab	use.	Outcome 2: GBV Survivors, those at risk and communities are empowered to break the cycle of	
	3.2.1 3.2.2	Output 2.1: GBV survivors and those at-risk access economic empowerment services Output 2.2 Community and traditional leadership structures have capacity to mobilise on GBV	
		ntion.	
	3.2.3	Output 2.3. Improved multi-sectoral coordination and governance related to GBV prevention a	
		ise	
4.0	•	aluation, Best Practices, Lessons Learned and Selected Knowledge Products	
5.0	Ke	y Challenges and Mitigation Measures	23
6.0	Qu	alitative Assessment:	24
7.0	Suc	ccess Stories	.38

List of Acronyms

BCC : Behavioural Change and Communication

CBO : Community Based Organisation

CEDAW : Convention on the Elimination of All Forms of Discrimination Against Women

CPU : Child Protection Unit CSO : Civil Society Organisation

CWACs : Community Welfare Assistance Committees

EC : Emergency Contraception

FTC : Fast Track Court
GD : Gender Division
GBV : Gender Based Violence

GRZ : Government of the Republic of Zambia HMIS : Health management Information System

HRC : Human Rights Commission ICB : International Competitive Bidding

IEC : Information, Education and CommunicationIOM : International Organization for MigrationILO : International Labour Organization

JP : Joint Programme

LAZ : Law Association of Zambia

MoCTA : Ministry of Chiefs and Traditional Affairs

MOH : Ministry of Health (MoH)

MCDSS : Ministry of Community Development and Social Services

MOHAIS : Ministry of Home Affairs and Internal Security

MoJ : Ministry of Justice

NHC : Neighbourhood Health Committee (NHC) NLACW : National Legal Aid Clinic for Women

OSC : One Stop Centres

PEP : Post – Exposure Prophylaxis PPE : Personal Protective Equipment

PWD : People with Disabilities
PQA : Project Quality Assurance
SGBV : Sexual Gender Based Violence

SRHR : Sexual Reproductive Health and Rights SBCC : Social Behaviour Communication Change

STEM : Science, Technology, Engineering and Mathematics

SASA : Start, Awareness, Support and Action

TEVETA: : Technical Educational Vocational and Entrepreneurship Authority

TWG : Technical Working Group

UN : United Nations

UNDP : United Nations Development Programme

UNFPA: : United Nations Population Fund UNICEF : United Nations Children's Fund VLOSC: : Village Led One Stop Centre

VSU : Victim Support Unit WfC : Women for Change WHO : World Health Organization

ZCCP : Zambia Centre for Communications Programme

ZPS : Zambia Police Service

Executive Summary

The Phase II of Government of the Republic of Zambia (GRZ)-United Nations (UN) Joint Programme (JP) on Gender Based Violence (GBV) (GRZ-UNJP-GBV II) focuses on *prevention* and *response of GBV* at national and sub-national levels. The response component includes four key elements, namely: Anti-GBV & User-Friendly Fast Track Courts (FTCs), One Stop Centres (OSCs), Temporary Safe Shelters, and Village Led One Stop Centres (VLOSCs). These are avenues for strengthening professional practice through capacity development of service providers such as police officers, social workers, medical workers, and legal officers to respond effectively, efficiently, and provide comprehensive services to GBV survivors.

There has been an increase in the number of GBV cases reported to the Victim Support Unit (VSU) at the Zambia Police Service (ZPS) from 2012 to 2023. However, there was a slight decrease of cases reported from 26,370 in 2020 to 20,540 in 2021 due to COVID-19 restrictions that were an inhibitor to accessing services. In 2023 42,965 GBV cases were reported countrywide compared with 33,536 GBV cases recorded in 2022, indicating an increase of 9,429 cases translating to 28.1%.

This report is the 4th in a series of annual reports for the Government of the Republic of Zambia (GRZ)-United Nations (UN) Joint Programme (JP) on Gender Based Violence (GBV) since inception in December 2019.

Detailing the significant progress made by the project in alignment with the 2023 annual work plan, the report reflects on the implementation environment, highlighting key aspects such as opportunities, lesson learned, challenges, mitigation measures and risks. Additionally, a dedicated section provides an update of the cumulative progress of the project and its substantial contribution to the prevention and response of GBV at national and sub-national levels since inception in 2020.

The programme facilitated the revision of the Case Management Handbook, Prosecutors' Handbook on Sexual Gender-Based Violence (SGBV) and supported the amendment of the aged ZPS Form 32 and 32 B into the revised ZPS Form 32. A total of 2,470 beneficiaries (705 males, 1765 females) accessed services related to psycho-social counselling, referrals, economic empowerment, and legal information from the Community Response Mechanisms (Village led one stop centres by 31 December 2023, bringing a cumulative figure of 4,411 (3,195 females and 1,216 males).

During the reporting period, the project supported 255 female GBV survivors (169 adult; 86 children) with specialised services from the temporary safe shelters bringing the cumulative total to 716 female GBV survivors since inception. Support was also rendered to the Ministry of Home Affairs and Internal Security to launch a Forensic DNA Laboratory at Levy Mwanawasa University Hospital in Lusaka. A total of 115 cases were analysed at the Forensic DNA Laboratory, 47 of which were resolved, while 68 are still undergoing analysis during the period under review.

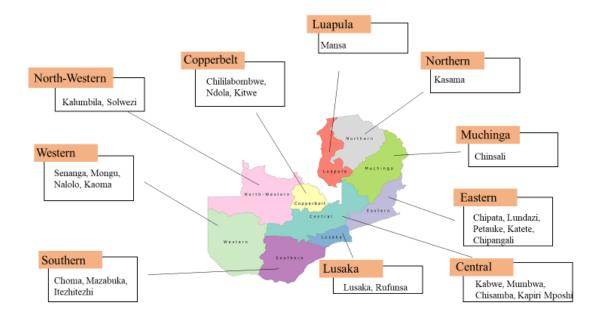
In relation to increasing Information Communication and Technology (ICT) knowledge for women and girls, the project supported the establishment of the Itezhi-tezhi district ICT Hub. So far 200 women and girls have been reached with ICT knowledge and skills.

In line with provisions of the Children's Code Act No. 12 of 2022, the Project further provided child-friendly supplies and Information, Education and Communication (IEC) materials, which explain the guidelines on child victims and witnesses through cartoons in flip books and posters to the six established and the 4 upcoming Fast Track Courts. The five facility-based OSCs have also been provided with child-friendly supplies.

The Programme was granted a No-Cost Extension to 31st March 2024 at the 6th Project Steering Committee meeting held on 12 September 2023 to facilitate completion of construction-related activities such as Anti-GBV and User-Friendly Fast Track Courts and safe shelters.

In relation to financials, the total contribution from donors as at end of 2023 was USD 7,201,735.00 of which transfers to PUNOs was USD 7,137,846.00. A cumulative financial expenditure of USD 6,156,714.00 was incurred for the period 2019-2023, of which USD 1,149,176.00 was spent during 2023 alone, against an approved budget of USD 489,487.00. The high expenditure during 2023 was mainly due to construction of Anti-GBV and User-Friendly Fast Track Courts. A detailed expenditure report is at Annex 6.0.

1.0 Geographical Coverage Area



2.0 Purpose

The GRZ-UN Joint Programme on GBV Phase II was developed to provide a coordinated, consolidated, linked, sustainable and, strengthened package of response services and prevention mechanisms at the national, sub-national and community levels that address Gender Based Violence (GBV). In addition, the programme aims to support institutional transformation to facilitate the implementation of Zambia Anti GBV Act No. 1 of 2011 through the establishment of an integrated and multi-sectoral mechanism for its implementation. The annual narrative progress report provides a summary of information, data and indicative financial reports by the Programme.

The programme strengthens GBV prevention and response system linking community VLOSCs economic and social empowerment initiatives and sub-national (health facility-based OSCs, Anti-GBV temporary safe shelters, GBV specialised court services. The Facility based and Village Led OSCs and community response mechanisms are aimed at conducting outreach activities to promote the services and support prevention efforts. The programme empowers community and traditional leadership structures to speak out against GBV and promote a culture of zero tolerance towards GBV.

Table 1: GRZ-UN JP against GBV II - Geographical Coverage and Services Provided

Provinces	Districts -		Anti-	GBV Services Pro	vided	
Copperbelt Eastern Luapula Lusaka Muchinga Northern North-Wester	Districts	FTC	osc	VLOSC	EE	Temporary Safe Shelter
Central	Chisamba					
	Kabwe					
	Kapiri-Mposhi					
	Mumbwa					
Copperbelt	Chililabombwe					
	Kitwe					
	Ndola					
Eastern	Chipangali					
	Chipata					
	Katete					
	Lundazi					
	Petauke					
Luapula	Mansa					
Lusaka	Chongwe					
	Lusaka					
	Rufunsa					
Muchinga	Chinsali					
Northern	Kasama					
North Wostorn	Kalumbila					
MOI (III-Westelli	Solwezi					
	Choma					
Southern	Mazabuka					
	Itezhitezhi					
Western	Mongu					
	Nalolo					
	Senanga					

The programme was implemented by various State and Non-State Actors and coordinated by the Gender Division under the Office of the President, with technical support from five (05) UN Agencies (ILO, IOM, UNDP, UNFPA, UNICEF) and financial support from the Governments of Sweden and Ireland.

The programme contributes to two overall outcomes:

i) GBV survivors and persons at risk (including children and adolescents) have increased access to and utilise quality GBV prevention and response services.

ii) GBV survivors, those at risk and communities are empowered to break the cycle of abuse.

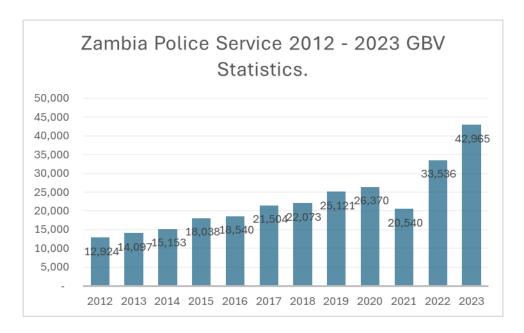
3.0 Results

Since December 2019, the GRZ-UN JP GBV II has implemented GBV related prevention and response interventions in line with the provisions of the Anti-GBV Act No. 1 of 2011 in a co-ordinated and multi-sectoral manner. Increased awareness on GBV, laws in place and support services for GBV survivors and their families have led to a continued increase in the number of cases reported to the police.

The graph below demonstrates the changes in the incidences of GBV cases recorded across the country since 2012 as reported by the Zambia Police Service.

According to the Zambia Police Service national statistics in 2023, 42,965 GBV cases were reported countrywide compared to 33,536 GBV cases recorded in 2022, indicating an increase of 9,429 cases translating to 28.1%. Of the 42,965 cases reported, 7,557 were men, 24,989 were women and 10,402 (2,833 boys, and 7569 girls).

The increase in reported incidences of GBV between 2012 to 2023 can be attributed to increased awareness, advocacy, and confidence in service providers.



Source: Zambia Police Service Victim Support Unit (ZPS-VSU) Statistics, Lusaka 2012- Dec 2023





Zambia Police ICT User Training in GBV case reporting – August and September 2023

Overview of the Programme Output Results under Outcomes 1 and 2

The programme achieved 32 output indicator targets out of 34 representing 94% achievement. The remaining two output indicators are in progress and mainly relate to construction of Anti-GBV Fast Track Courts, Temporary Safe Shelter and Village led One Stop Centres.

- 3.1 Outcome 1: GBV survivors and persons at risk (including children and adolescents) have increased access to and utilise quality GBV prevention and response services.
- 3.1.1 Output 1.1 Target districts have increased capacity to deliver coordinated GBV services

During the reporting period, traditional leaders, religious leaders and marriage counsellors conducted community dialogues involving 5 community structures such as Safe Motherhood, Community Welfare Assistance Committees (CWACs), Community Crime Prevention Unit (CCPU), Neighbourhood Health Committees, bringing the cumulative total of structures mobilised to 71. The community dialogues led to increased knowledge and awareness of the different forms of GBV and in turn helped communities to include GBV issues in their discussions to ensure that GBV survivors are empowered socially and economically and also that survivors and those at risk are able to report cases leading to increased GBV cases reported. In strengthening facility-based One Stop Centers, the programme supported the Ministry of Health with child friendly supplies in five sites in Chinsali, Senanga, Katete, Lundazi, and Solwezi,

ensuring child survivors are protected and safety while being supported by different professionals such as Social workers including during court processes.

To increase GBV prevention and essential services a vehicle was bought which will be used for community outreach and mobile GBV services. The motor vehicle will also be used for access to essential services such as health, police and justice for survivors including transportation of witnesses during court proceedings.

As of December 2023, 9,144 GBV (8,011 female, 1,133) survivors, were provided with integrated GBV services⁴ at the OSCs across the project sites. In collaboration with the Ministry of Health (MoH), the Zambia Police Service, Ministry of Community Development and Social Services (MCDSS), Gender Division, National Prosecutions Authority (NPA), and Cabinet Office at the national, provincial and district level, four OSCs in Chinsali, Mongu, Kabwe and Solwezi were made child-friendly by improving the artwork, toys and other materials for children. As at December 2023, a total of 3,782 (2,282 girls and 1,500 boys) cases of GBV involving child victims and witnesses were provided with psychosocial counselling and escort to courts by trained frontline officers from the NPA, MCDSS, MoH, ZP and CSOs who benefited from the training on Guidelines on Minimum Standards for Child Victims and Witnesses in the Justice Process. This has led to rehabilitation of children from their traumatic experiences.



Figure 1. A mural at a facility-based One Stop Centre depicting different service provided at the OSC.

⁴ Services include psychosocial counselling, basic legal information, referrals, basic medical first aid and community sensitisation.

As a result of concerted efforts of the Traditional Leadership, Zambia Police Service, Community Neighbourhood Health Watch, Ministry of Education and Ministry of Community Development and Social Services (MCDSS), five girls (three from Misolo and two from Rufunsa villages) were retrieved from early and forced marriages and returned to school. This was due to the concerted efforts of the Traditional Leadership, Zambia Police Service, Community Neighbourhood Health Watch, Ministry of Education and Ministry of Community Development and Social Services (MCDSS). All the five perpetrators were members of the girls' communities whose cases are in court while one perpetrator is on the run.

Through the VLOSCs the Programme has enhanced coordination by the various players at community, district, and national levels resulting in monthly anti-GBV coordination meetings that feed into the national GBV Technical Working Group led by the Gender Division.

Further, the Programme working with Ministry of Local Government and Rural Development and Civil Society Organisations (CSOs) established four Village Led One Stop Centres (VLOSCs) (Chief Nkula, Chief Mwase, Chief Chanje, Chief Maguya), in addition to the two established in 2021 and 2022, namely Chief Chamuka and Chief Mumena, respectively, bringing the cumulative total to six VLOSCs out of the targeted nine VLOSCs The Programme is on course to launch VLOSCs in Chief Shakumbila, Chief Munkonchi and Chief Bundabunda by March 2024.

In 2023, a total of 2,470 (1765 females, 705 males) GBV survivors accessed services that included psychosocial counselling, basic health services, legal information, economic empowerment, awareness creation on Sexual and Gender Based Violence (SGBV), and referrals to the Victim Support Unit (VSU), health facilities and courts. A total of 4,411 survivors have accessed services from the VLOSCs since inception. The establishment of the VLOSCs has not only brought services closer to the communities but also strengthened and heightened awareness on GBV prevention and response.

Fig 2: Below: United Nations Resident Co-ordinator, Beatrice Mutali, Senior Chief Nkula, Kate O'Donnell, Embassy of Ireland and Matthews Chilekwa - Muchinga Province Deputy Permanent Secretary at the launch of the Chief Nkula Village Led OneStop Centre In Muchinga Province





<u>Figure 3: Above</u> His Royal highness Chief Chanje of Chipangali District, Beauty Undi Phiri - Eastern Province Deputy Permanent Secretary and UNDP Deputy Resident Representative, Ethel Bangwayo officiating at the launch of the Village Led One Stop Centre in Chipangali

The pre and post training evaluation of 123 VLOSC volunteers (63 males and 60 females) indicated an increase in knowledge levels and skills in combating GBV and providing support from 30% to 60% following an extensive training session held in Chiefs Nkula, Munkochi, Bundabunda, Shakumbila,

Chanje and Maguya. The programme achieved this by working in close collaboration with the National Legal Aid Clinic for Women (NLACW), Women for Change, Young Happy Healthy and Safe (YHHS), MCDSS, ZPS, NPA and the Judiciary. The training sessions covered essential aspects such as GBV-related concepts, legal frameworks, health protocols, and support services, and referrals. The comprehensive approach emphasized the significance of community collaboration and ethical practices in addressing GBV at multiple levels.

To strengthen coordination and harmonise policies and Guidelines, the programme supported the development, review, finalization and launch of the following:

- a. The Anti-GBV Act No. 1 of 2011, overall objective was to develop processes for the enforcement of the Anti-GBV Act and to establish an institutional framework that fully operationalise this legal instrument to promote women's empowerment and gender equality. At the time of reporting the Gender Division was in the process of submitting a letter to Ministry of Justice to effect the recommendations.
 - b. Zambia Police Service training curriculum by incorporating GBV modules.
 - c. ZP Form 32 (police-medical form). This was followed by capacity building of 352 service providers (police officers, health practitioners, legal and judicial officers) in the administration of medico-legal response to GBV on how to use and apply the revised ZP Form 32 in 16 Districts of Zambia; this is anticipated to fast track GBV cases as other personnel will be able to sign aside from the medical doctors.
 - d. Effects of Online Gender-Based Violence on Women and Girls Recommendations.
 - e. Minimum Standards for Operationalization of VLOSC
 - f. Minimum Standards for Safe-Shelters and Trafficked Persons

3.1.2 Output 1.2 GBV survivors have increased access to safe shelter.

In collaboration with the Ministry of Community Development and Social Services, Chisomo Community Programme, YWCA, National Legal Aid Clinic for Women and Zambia Police Service, the programme supported a total of 255 GBV survivors (169 female, 86 children) in accessing temporary safe shelters in Chipata, Chongwe, Lusaka, Kabwe, Kitwe, Mongu, Lundazi and Solwezi, bringing the cumulative total from inception to 716. At the time of developing this report, the cases were referred to relevant service providers.

Services provided in the temporary safe shelters to ensure clients have humane conditions during their stay included medical aid, referrals, social services, psychosocial counselling, education support, legal

advice, start-up capital as well as escort to courts and reintegration back into families when it was ascertained that the environment was safe.

The rehabilitation of the Kitwe temporary safe shelter brought the total number of shelters to three established of the planned target of four in 2023 contributing to increased access to safe shelter for GBV survivors.

A total of 120 Child-GBV survivors (80 girls and 40 boys) were placed in alternative family care where they received psychosocial counselling and court preparedness. This was facilitated by the twenty Social Welfare Officers that were trained in statutory case management. This brings a cumulative total of trainees to 421 (357 female, 64 male) since inception. The benefits from the trainings will be sustained beyond the lifespan of the GRZ-UN Joint Programme against GBV Phase II as they are embedded in existing government systems and led by public service officers.

Following the launch of the *Minimum Norms and Standards for Temporal Safe Shelters for Gender-Based Violence Survivors and Victims of Trafficking* guidelines in September 2023, 23 staff (15 female and 8 male) were trained focusing on their compliance in treating and managing GBV survivors and Victims of Trafficking (VOTs). The revised guidelines have provided standardization of service provision across facilities and services.





Figure 4: UN Zambia Resident Coordinator Beatrice Mutali and IOM Zambia Chief of Mission at the launch of the Minimum Norms and Standards for Temporary Safe Shelters –28 Sep 2023

3.1.3 Output 1.3 Target districts have increased capacity to deliver quality legal services

The Programme provided legal services to 1,016 GBV survivors (914 female and 102 male) in collaboration with the National Legal Aid Clinic for Women (NLACW), Women for Change, and the Young Women Christian Association (YWCA). Legal assistance included legal advice, legal information, and legal representation before the Anti-GBV and User-Friendly Fast Track Courts and other courts of law. In the reporting period, 210 cases were filed before the functional six Anti-GBV and User-Friendly Fast Track Courts where Protection and Occupation orders were obtained.

The programme working with National Prosecutions Authority supported the judiciary to improve the child-friendliness of the six established Anti-GBV FTCs and the four upcoming FTCs, to ensure

children are protected and feel safe while attending court proceedings. To this end, child-friendly supplies were procured and distributed to all the 10 FTC's in Chipata, Choma, Kabwe, Mongu, Solwezi, Mansa, Kasama, Chinsali, Lusaka, and Ndola) resulting in the set-up of child friendly corners within these courts.



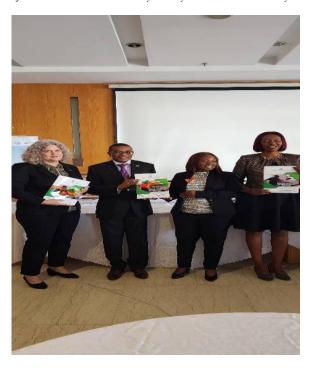
Figure 5: A mural depicting key actors in a child friendly fast track court.

The set up is designed to protect the child and provide a conducive, non-intimidating environment children appearing before the court as witnesses or survivors. supplies The have therefore been useful in safeguarding interests of the child witnesses. The materials also assist the prosecutors in obtaining the best evidence from child witnesses by making them comfortable as they give their testimony.

The Forensic DNA Laboratory at Levy Mwanawasa University Teaching Hospital analysed 115 cases, 47 of which were resolved, while 68 are still undergoing analysis. This brings to a total of 145 cases analysed since the commissioning of the DNA Laboratory. The DNA Lab will reduce the number of genuine cases being lost in the justice process due to lack of evidence.



Figure 6: Above: L-R: Minister of Home Affairs and Internal Security Hon Jack Mwimbu, United States Ambassador to Zambia Michael C. Gonzales, UN Resident Coordinator- Beatrice Mutali, Inspector General of the Zambia Police Service- Graphel C. Musamba at the launch of the Forensic DNA Laboratory at Levy Mwanawasa University Teaching Hospital, Lusaka, Zambia



Above: L-R Head of Development, Embassy of Sweden – Ms. Susannah Hughes, UNDP Resident Representative – James Wakiaga, Chairperson Zambia Law Development Commission Ms. Chipo Mushota Nkhata, PS Gender Division – Ms. Mainga Kabika at the Handover of the Recommendations to the revised Anti-GBV Act to the Gender Division.

- 3.2 Outcome 2: GBV Survivors, those at risk and communities are empowered to break the cycle of abuse.
- 3.2.1 Output 2.1: GBV survivors and those at-risk access economic empowerment services

Following the training of GBV survivors in business skill and disbursement of start-up toolkits, women have started to own businesses in tailoring, poultry and vegetable farming, mobile money vending and

selling used clothes. Women have also shown resilience and improved their business enterprise leveraging the economic empowerment trainings conducted in 2021 and 2022. The beneficiaries' entrepreneurial skills have also been improved as there is wealth creation at community, household and individual levels and improvements in the culture of savings in selected project sites.

The Lusaka Dorcus Women's Savings Group supported with business skills resulted in the group's first share-out of ZMW 31,000, to increase to ZMW 80,000 and their membership increasing from 20 to 25 women. To date, a total number of 68 savings and credit groups have been formed to improve women's lives.

"We were very blank when we started our businesses...." recalls Ba Nakulu Mpundu ..."Now our businesses have grown due to the business knowledge and enterprise skills imparted to us by the UN Joint GBV Programme. The growth in businesses have also helped improve our marriage relationships with our spouses and have made us less abused..." she concludes.



Figure 7: The Lusaka based Kamwala Dorcas Women Savings Group after the profit share-out.

To contribute to reducing the vulnerability to GBV and in line with the UNDP Direction of leaving No One Behind, the Programme capacitated with business skills 11 all females Persons with Disabilities (PWD) in Rufunsa and Magwero in business development skills. Of the 11, 6 had physical disabilities, 3 blind and 2 deaf.

In line with the UN mandates related to strategic innovations and digitalisation the Programme reached a total of 550 (515 female, 35 male) beneficiaries with ICT knowledge through the established Information and Communications Technology (ICT) Hub for rural women and girls in Itezhi-tezhi leading to a cumulative total of 1,581 (1546 female, 35 male). The hub provided a networking platform

for economic empowerment for women, girls and youth through access to the internet. To increase agency and self-efficacy among girls and young women, the programme held a Girls in ICT Summit focussing on cyber security in Itezhi-Tezhi. The programme further equipped girls and women with skills needed to address the risks of online exploitation, abuse and cyber-bullying as they navigate their online experience.



Figure 8: Community members during an ICT training



Figure 9: ICT Training for women and girls at Chisamba Primary School in Chisamba district

3.2.2 Output 2.2 Community and traditional leadership structures have capacity to mobilise on GBV prevention.

Through Men's Networks, 2,502 men and boys were reached with messages on positive masculinity focussing on boys and men as agents of change in collaboration with the Zambia National Men's Network in Gender and Development (ZNMNGD) and the Young Happy Healthy and Safe. The Programme took advantage of National and International events such as the 16 Days of Activism and International Women's Day.

The Programme sensitised a total of 953 (554 males and 419 females) traditional leaders on GBV and COVID-19 bringing the cumulative total from inception to 5,390 (3397 male, 1993 females). As a result of the sensitizations the traditional leaders were able to challenge negative cultural practices. This was achieved despite the programme having reached its target in 2022.

A total of 2,375 spouses of traditional leaders who included (983 males, 1392 females) were sensitized on GBV and COVID-19 prevention bringing the cumulative figure to 4,500 (2622 females and 1,878 males) from inception. Service provision continued beyond the programme target of 1,500 without additional funding.

3.2.3 Output 2.3. Improved multi-sectoral coordination and governance related to GBV prevention and response.

The Programme supported a total of 43 Zambia Police officers (31 men and 12 women) with a refresher course and electronic tools and systems (usage of laptops and software to report and manage data efficiently) with the aim to improve the VSU's ability to better manage GBV cases. Specifically, two Information and Communications Technology (ICT) technical trainings were conducted in the reporting period.

The Programme through a multi-stakeholder process revised, developed, and finalised as needed the following:

- 1. The Anti-GBV Act No. 1 of 2011
- 2. Zambia Police Service training curriculum by incorporating GBV modules.
- 3. ZP Form 32 (Police-Medical form).
- 4. Effects of Online Gender-Based Violence on Women and Girls Study
- 5. Minimum Standards for Operationalization of VLOSC.
- 6. Minimum Standards for Safe-Shelters and Trafficked Persons

To improve multisectoral coordination and strengthen linkages among various service providers, the Programme undertook various coordination initiatives including 5 joint monitoring missions bringing the cumulative total to 23 against the end of programme target of 12. Due to the need for continued orientation of the implementing partners on results-based reporting, four (4) pre-disbursement planning consultative meetings and implementation acceleration meetings were held with various stakeholders and implementing partners.

Further, the Programme facilitated and participated in monthly coordination meetings through the Cooperating Partners Group on Gender (CPGG) in addition to bilateral and ad-hoc coordination meetings with Government and other Implementing Partners. Issues covered during the coordination meetings included: (i) the need to avoid duplication of efforts and conducting of joint field visits and launches; (ii) jointly developing GBV related minimum standard guidelines, and (iii) a joint capacity development plan for IPs. The result of these was a Joint Capacity Development Plan led by Gender Division.

The project and its partners have contributed to strengthened multi-sectoral coordination with Gender Division at the national level. This has improved GBV information sharing in a coordinated approach amongst Government, UN, USAID, EU, FCDO, World Bank, Canada and CSOs.

4.0 Evaluation, Best Practices, Lessons Learned and Selected Knowledge Products

Evaluation. The Programme underwent a Light Touch Assessment whose findings include:

- (i) Contribution to strengthening the national framework for Anti GBV interventions through the updating of the Anti GBV Act No. 1 of 2011 and development of guidelines and minimum standards that address the needs of the entire value chain, from community to national level actors for improved access to prevention and response services.
- (ii) Enabled various stakeholders (including traditional leaders, ordinary community members, persons living with disability) to publicly take action against GBV
- (iii) Successful in meeting the planned Programme output indicators: 81% of the output indicators were met or exceeded by end of December 2023

Key Recommendations:

1.0 That there is need to (a) document the various components of the programs national and community level multi-sectoral Anti GBV response into a model and publicize it for (a) buy in by other key stakeholders and (b) resource mobilization directed at funding agencies to increase the volumes of funding and allow the program to upscale and roll out its successes.

2.0 That Village Led One Stop Centre (VLOSC) structures should be linked to relevant Government organs such as the Ministry of Commerce, and the Area Members of Parliaments to facilitate access to Constituency Development Fund to enable GBV survivors continue to receive economic empowerment, psychosocial and other services from a human rights perspective. Linking the centres to government support will ensure their sustainability in terms of provision of other services such as maintenance and repair costs.

3.0 Continue strengthening coordination at all levels.

Good Practices.

I. The active engagement of the community in partnering with the programme to build the One Stop Centers has been a transformative initiative. The community contributed building materials in kind, such as blocks, showcasing a tangible commitment to the success of the program. The community's involvement in the construction process has fostered a sense of ownership, pride, unity and collaboration among community members.

II. Continuity of service provision with use of innovative online technologies - a case in point is the Judiciary Department authorities who have continued to hold virtual court sessions even after the COVID-19 outbreak period.

- III. Holding of bilateral meetings with donors on programme complementarity with other co-operating partners through the GBV National Technical Working Group for improved co-ordination of GBV related issues.
- IV. Assigning of resident magistrates by the Judiciary Department to provincial sites to deal with GBV cases.
- V. Use of social media by male networks to discuss male engagement strategies against GBV
- VI. Joint development and reviews of Standard Operating Procedures (SOPs), Guidelines, Policies and Legal Instruments leads to standardisation.
- VII. Empowerment of traditional leaders and GBV survivors as Anti-GBV champions

Selected Knowledge Products developed or finalised in 2023:

- i. Revised Zambia Police Service training curriculum.
- ii. Zambia Police Service Form 32 (Medical-Legal form).
- iii. Effects of Online Gender-Based Violence on Women and Girls Study
- iv. Minimum Standards for Operationalization of VLOSC.
- v. Minimum Standards for Safe-Shelters and Trafficked Persons

Lessons Learned.

- Sustained involvement of traditional leaders and local stakeholders in the implementation of activities enhances ownership, sustainability of programme activities and brings greater impact.
- Engagement with high level government officials, Members of Parliament, traditional leaders, and spouses, has proved to be an effective tool for advocacy pertaining to legal and policy reforms as well as challenging the negative or harmful social and cultural gender norms.
- Social and economic factors play a major role in perpetuating gender inequality.
- Access to ICTs enabling women to access markets for their produce/and services.

5.0 Key Challenges and Mitigation Measures

The following table highlights key challenges faced during the period under review:

S/No	Challenge Description	Mitigation Measure
1	Deep rooted Gender and Negative Norms	Engaging Gender and Anti-GBV players, especially traditional, civic leaders, Ministries of Education and Health authorities and traditional counsellors. Continued male engagement for positive masculinity.

2	Coordination at all levels	Supporting the Gender Division in their coordination role. Support the reduction of duplication of work by donors through engagement in the Cooperating Partners Group on Gender.
3	The high staff turnover experienced by various ministries continued to negatively impact staff performance, resulting in a lack of sensitivity, and understanding when dealing with children who have experienced GBV.	Use of a common platform and sharing of meeting minutes across departments to ensure information is widely shared for institutional memory. For example, the programme enhanced the capacities of professionals through the child Justice Forum quarterly stakeholders' meetings.
4	High attrition levels by experienced trained GBV champions and volunteers based within VLOSC	The Programme undertook refresher trainings to maintain numbers of Champions.

6.0 Qualitative Assessment:

The Programme Steering Committee (PSC) continued to provide the necessary policy, strategic direction and the required capacity development and quality assurance for implementation of the Programme.

The 6th Project Steering Committee meeting held on 12th September 2023 approved a No-Cost Extension of the Project for up to 31 March 2024. This was after taking into consideration the remaining construction works (estimated at about 56% at the time of the 6th PSC in September 2023). Other considerations included the Defects and Liability period and the fact that ICT equipment would have to be installed in the four (4) Fast Track Courts after construction has been completed.

It is worth noting that the Programme is on track on achieving the end of Programme output targets in the Results Monitoring and Evaluation Framework. As of 31 December 2023, 32 out of the 34 (94%) of Programme output indicator targets in the Results Matrix (Refer to Section 10 of the report) were either on track or had exceeded the end of Programme targets.

Continued coordination mechanisms through the UN Gender Theme Group and the CPGG, the National GBV Technical Working Group (GBV TWG) and bilateral coordination meetings with Government Implementing Partners and co-operating partners such as the EU, USAID and the World

Bank has led to synergies in joint development and harmonisation of minimum gender related operational standards, research topics and policies such as the National Gender Policy, leading to cost-effective utilisation of resources.

10.0 2020 -2024 Results Matrix - Cumulative Results for Project Output indicators against End of Programme Targets

Indicator	Consolidated GRZ			2022 Planned Targe		s Results								
											Cumulative GRZ-UN JP GBV II Project Performance			
	Base-line – Jan 2020	End of Programme Target (EPT14) (31 Dec 2022)	2020 Planned Target	2020 Actual Output	2021 Planned Target	2021 Actual Output	2022 Planned Target	2022 Actual Output	2023 Planned Target	2023 Actual Output	Cumulative Actual Total Performance (2019 to Dec 2023)	Achievement- reasons for over/under performance	Means of verification	
Output 1.1: Target districts have increased capacity to deliver coordinated GBV services. Output Indicator 1.1.1: # of hospital based OSC established	10	1	0	0	0	0	1	0	1	1	1		Project Reports/Physical inspections	
Output Indicator 1.1.2: # of hospital based OSC strengthened 15 in the project districts	0	3	0	10	1	5	2	5	0	0	20	MOH HQ provided supportive supervision and mentorship at facility level.	Project Reports	
Output Indicator 1.1.3 # of community	9	30	10	35	10	14	10	22	0	8	79	Exceeded due to demand by community structures.	.Project reports	
Output Indicator 1.1.4: # of OSCs which are made child friendly	4	4	0	0	0	0	4	5	4	4	5	Due to the demand from clients in the OSC.	Project reports	

Indicator	Consolidated (GRZ-UN JP GBV II Project -	2020 to Decemb	er 2022 Planned	d Targets and A	ctual Outputs l	Results				Cumulative GRZ-UN JP GE	BV II Project Performance	
	Base-line – Jan 2020	End of Programme Target (EPT14) (31 Dec 2022)	2020 Planned Target	2020 Actual Output	2021 Planned Target	2021 Actual Output	2022 Planned Target	2022 Actual Output	2023 Planned Target	2023 Actual Output	Cumulative Actual Total Performance (2019 to Dec 2023)	Achievement- reasons for over/under performance	Means of verification
Output Indicator 1.1.5: # of service providers trained on multi-disciplinary GBV Guidelines (disaggregated by type of service provider and sex).	20	1,485: 390 paralegals, 30 doctors, 30 Nurses, 30 clinical officers 270 hospital based OSC staff, officers,	130 paralegal s, 10 doctors 10 Nurses 10 Clinical officers 90 hospital based OSC staff, officers, 40 adjudicat ors, 10 prosecut ors	N/A Indicator developed in Sept 2021	130 paralegal s, 10 doctors 10 Nurses 10 Clinical officers 90 hospital based OSC staff, officers, 40 adjudicators, 10 prosecut ors	355 service providers (231 male 124 Female: 133 Male): 60 paralegals 48 males, 12 females) 13 Doctors (8 males, 5 females 20 Clinical Officers (13 males, 7 females) 12 Nurses (3 males, 9 females) Nurses	130 paralegal s, 10 doctors 10 Nurses 10 Clinical officers 90 hospital based OSC staff, officers, 40 adjudicat ors, 10 prosecut ors	189 Service Providers (96 males, 93 females) 0 paralegals 0 Doctors 0 Nurses 0 Clinical 88 Hospital Based OSC Staff (30 males, 58 females) 35	Nurses -100 female 50 Clinical Officers – 10 female 40 male Hospital Based OSC Staff (105 males, 58 females) 39 clerks of Court, 25 males, 14 females) 275 Prosecutors (120 males155 females 484 Police Officers (200 males284 females)	Nurses -94 female 40 Clinical Officers – 12 female 28 male Hospital Based OSC Staff 90 (58males, 32 females) 39 clerks of Court, 25 males, 14 females) 302 Prosecutors (175 males127 female 480 Police Officers (305 males175 females	1503 (831 males, 672 females) 60 paralegals 48 males, 12 females) 13 Doctors (8 males, 5 females) 60 Clinical Officers (41 males, 19 females) 111 Nurses (3 males, 108 females) 193 Hospital Based OSC staff (88 males, 105 females) 35 Adjudicators (29 males, 6 females) 327 Prosecutors (163 males, 164 females) 685 Police Officers (450 males 235 females	Over-achievement due to demand by other anti-GBV service providers such as court clerks, Prosecutors and Police Officers.	Project reports

Indicator		
	Consolidated GRZ-UN JP GBV II Project - 2020 to December 2022 Planned Targets and Actual Outputs Results	Cumulative GRZ-UN JP GBV II Project Performance

	Base-line – Jan 2020	End of Programme Target (EPT14) (31 Dec 2022)	2020 Planned Target	2020 Actual Output	2021 Planned Target	2021 Actual Output	2022 Planned Target	2022 Actual Output	2023 Planned Target	2023 Actual Output	Cumulative Actual Total Performance (2019 to Dec 2023)	Achievement- reasons for over/under performance	Means of verification
		615 Police officers	205 police officers		205 police officers	VSU police officers (112 male, 33 female); 19 prosecut ors (12 males, 7 females) 67 Welfare Officers (34 males, 33 female) 2 magistra tes (1 male. 1 female) 17 Shelter Manage rs (All female)	205 police officers	es, clerks of Court, Lawyers) (29 males, 6 females) 6 Prosecutors (4 males2 females) 60 Police Officers (33 males 27 females)			2 magistrates (1 male. 1 female) 17 Shelter Managers (All female		
Output Indicator 1.1.6: # of Minimum Standards and Guidelines developed for GBV service providers and facilities for	0	1	0	N/A Indicator developed in Sept 2021	1	5	-	3	3	5	13	Government requested support to launch other Guidelines that were in the pipeline.	Project reports

Indicator	Consolidated	GRZ-UN JP GBV II Project	- 2020 to Docom	ahor 2022 Plann	ad Targote and	Actual Output	e Posulte				Cumulative ¹³ GRZ-UN JP G	ERV II Project Performance	
	Consolidated	CK2-ON OF GEV II TO JOCK	- 2020 to Decem	idei 2022 i idilii		Cumulative Ch2-Ott of C	DV II Toject i enormance						
	Base-line - Jan 2020	End of Programme Target (EPT14) (31 Dec 2022)	2020 Planned Target	2020 Actual Output	2021 Planned Target	2021 Actual Output	2022 Planned Target	2022 Actual Output	2023 Planned Target	2023 Actual Output	Cumulative Actual Total Performance (2019 to Dec 2023)	Achievement- reasons for over/under performance	Means of verification
operationalization of VLOSC												finalization hence the over achievement.	
Output Indicator 1.1.7: # of Community Response Mechanisms (VLOSC) Established	13	9	0	0	3	1	6	1	5	4	6		Project reports, handover ceremony photos
Output Indicator 1.1.8: # of people accessing services at the Community Response Mechanisms (VLOSC) disaggregated by sex.	11318	600	113	N/A Indicator developed in Sept 2021	110	311 (191 females, 120 males)	300	1641 (1512 female, 129 males)	0	2470 (1765 females, 705 males)	4,411 (3,195 females, 1,216 males)	The over-achievement was due to engagement with traditional leadership that led to increased community mobilisation and relaxed on COVID-19 restrictions.	VLOSC Registers
Output 1.2: GBV Survivors have increased access to Safe Shelters Output Indicator 1.2.1: # of survivors that benefit from specialised services at the GBV shelters disaggregated by sex.	1676	380	139	74	141	141	100	246 female	0	255 (169 female, 86 children)	716 (female and children)	Even though this target was already achieved, the safe shelters continued to provide services for the survivors. The Programme received the highest number of survivors due to increased referrals to the safe shelters and sensitizations on available services.	Registers
Output Indicator 1.2.2: # of Anti-GBV temporary	1	4	0	0	1	2	3	1	2	1	2	On Track, Government was working on minimum standards for temporary	Activity reports, Field reports

18 The figure is based on information obtained from Misolo

Indicator	Consolidated	GRZ-UN JP GBV II Project	- 2020 to Decem	nber 2022 Plann	ed Targets and	Actual Outpu	ts Results				Cumulative ¹³ GRZ-UN JP G	BV II Project Performance	
	Base-line - Jan 2020	End of Programme Target (EPT14) (31 Dec 2022)	2020 Planned Target	2020 Actual Output	2021 Planned Target	2021 Actual Output	2022 Planned Target	2022 Actual Output	2023 Planned Target	2023 Actual Output	Cumulative Actual Total Performance (2019 to Dec 2023)	Achievement- reasons for over/under performance	Means of verification
shelters established for temporary housing of GBV survivors												shelters hence the delay. The activity will accelerate in 2023.	
Output Indicator 1.2.3: # of shelters strengthened for temporary housing of GBV survivors	0	9	2	7	4	8	3	6	0	1	22	This was due to the need to increase functional shelters by way of providing supplies.	Project Reports
Output Indicator 1.2.4: # of child GBV survivors supported to access alternative care options19 through case management disaggregated by sex.	348	229	88 (76 Girls, 12 Boys)	N/A Indicator developed in Sept 2021	91	179	50 (46 females, 4 males)	242 GBV survivors (202 girls and 40 boys)	0	219 (155 female, 64 boys)	421 (357 female, 64 boys)	Child survivors were provided with GBV services to access alternative care through the case management systems. Shelters were able to accommodate more survivors due to provision of supplies.	Health facility reports, One Stop Centre Records and Registers, PEP Focal Point a nd Monitoring Visit Reports
Output 1.3: Target districts have increased capacity to deliver quality legal services Output Indicator 1.3.1: # of Fast Track Courts established	6	4	0	0	0	0	4	0	4	0	0	Construction is at 85% complete	Project site inspection reports

.

Indicator	Consolidated	GRZ-UN JP GBV II Project	- 2020 to Decem	nber 2022 Plann	ed Targets and	Actual Outpu	ts Results				Cumulative ¹³ GRZ-UN JP GBV II Project Performance		
	Base-line – Jan 2020	End of Programme Target (EPT14) (31 Dec 2022)	2020 Planned Target	2020 Actual Output	2021 Planned Target	2021 Actual Output	2022 Planned Target (VII)	2022 Actual Output	2023 Planned Target	2023 Actual Output	Cumulative Actual Total Performance (2019 to Dec 2023)	Achievement- reasons for over/under performance	Means of verification
Output Indicator 1.3.2: % of FTC that are operating in line with child friendly standards	0	100	0	0	60%	0	100%	10 of 10 (100%)	10	10	100%		Project Court records
Output Indicator 1.3.3: # of legal service providers trained	9292	320	50 paralegal s 15 prosecut ors 10 adjudicat ors 10 social welfare officers 10 magistrat es	486 N/A Indicators refined in Sept 2021	50 paralegal s 20 prosecut ors 25 adjudicators 20 social welfare officers 25 magistrat es	538 legal service s provide rs trained 10 paraleg als 426 Prosec utors, 40 Adjudi cators, 2 Social Welfar e Officer s	30 paralegal s 15 prosecut ors 15 adjudicat ors 10 social welfare officers 15 magistrat es	(36) participan ts (26 male) and (10)	0	0	700 (506 males, 194 females)	The Project met all the targets for the legal service providers trained. The use of virtual means enabled an increased outreach.	Training Reports.

Training will mean capacity strengthening in the following: Multi-disciplinary Management of GBV, GBV Case Management, Best Interest Determination for Vulnerable Migrant Children, Human Rights and gender, handling of child Victims, TEVET paralegal training and witnesses and operationalization of VLOSCs.

Indicator	Consolidated	I GRZ-UN JP GBV II Project	- 2020 to Decen	Cumulative ¹³ GRZ-UN JP GBV II Project Performance									
	Base-line – Jan 2020	End of Programme Target (EPT14) (31 Dec 2022)	2020 Planned Target	2020 Actual Output	2021 Planned Target	2021 Actual Output	2022-23 Planned Target	2022 Actual Output	2023 Planned Target	2023 Actual Output	Cumulative Actual Total Performance (2019 to Dec 2023)	Achievement- reasons for over/under performance	Means of verification
						60 Best Interest Determ ination Panel Membe rs							
Output Indicator 1.3.4: # of GBV survivors provided with legal services disaggregated by sex.	1,200	2,000	1000	130	1500	611 clients (79 women, 532 children	1,500	1950 all- female	0	1,016 (914 female, 102 male	3,707 (3,605 female, 102 male)	Over-achievement due to increased awareness.	Project reports.
Output Indicator 2.1.1: # of GBV survivors and those at risk capacitated in business development disaggregated by sex.	4,500	500	0	569	350	516 (361 females, 37 males)	150	292 (277 females, 15 males)	0	0	1493 (1,441 females, 52 males)	GET Ahead Training in Misolo and Rufunsa. Increased demand for economic empowerment knowledge by GBV survivors due to robust sensitisation campaigns	Training reports, Attendance Registers
Output Indicator 2.1.2: # of GBV survivors and those at risk provided with enterprise (Income Generation Activities) start- up support	2,446	500	0	319	300	398 (361 females, 37 males	200	224 (210 females 14 males)	0	0	1057 (1013 females, 44 males)	Increased demand for economic empowerment knowledge by GBV survivors.	Training reports, Attendance Registers

Indicator	Consolidated	onsolidated GRZ-UN JP GBV II Project - 2020 to December 2022 Planned Targets and Actual Outputs Results										Cumulative ¹³ GRZ-UN JP GBV II Project Performance			
	Base-line – Jan 2020	End of Programme Target (EPT14) (31 Dec 2022)	2020 Planned Target	2020 Actual Output	2021 Planned Target	2021 Actual Output	2022 Planned Target	2022 Actual Output	2023	2023	Cumulative Actual Total Performance (2019 to Dec 2023)	Achievement- reasons for over/under performance	Means of verification		
Indicator 2.1.3: # of GBV survivors and those at risk engaged in saving and credit groups disaggregated by sex.	0	500	0	0	350	398 (361 females, 37 males)	150	348 (287 females, 61 males)	0	0	852 (702 females, 60 males)	Increased demand for economic empowerment knowledge by GBV survivors.	Training reports, Attendance Registers, List of members for Savings Groups Attendance list		
Indicator 2.1.4: # of saving and credit groups supported to improve enterprises (Income Activities)	0	33	0	0	20	42	13	21	0	3	66	Increased demand by existing savings groups for support and strengthening	Training reports, Attendance Registers, List of members for Savings Groups Attendance list		
Indicator 2.1.5: # of ICT Hubs established	0	3	0	0 Indicator established in Sept 2021	0	0	3	3	0	1	1		Project/impl ementing partner reports		

Indicator	Consolidated	GRZ-UN JP GBV II Project	- 2020 to Decen		Cumulative ¹³ GRZ-UN JP GBV II Project Performance								
	Base-line – Jan 2020	End of Programme Target (EPT14) (31 Dec 2022)	2020 Planned Target	2020 Actual Output	2021 Planned Target	2021 Actual Output	2022 Planned Target	2022 Actual Output	2023 Planned Target	2023 Actual Output	Cumulative Actual Total Performance (2019 to Dec 2023)	Achievement- reasons for over/under performance	Means of verification
Indicator 2.1.6: # of women and girls capacitated with ICT knowledge	200	600	200	35	200	420	300	576 girls	0	550 (515 female, 35 male)	1,581 (1,546 female, 35 male)	Strategic set-up of ICT hubs in schools increased the reach of in-school and out-of-school women and girls.	Implementing Partner/Proj ect Progress Reports
Output 2.2 Community and traditional leadership structures have capacity to mobilise on GBV prevention Output Indicator 2.2.1: # of traditional leaders sensitised on GBV and COVID-19 disaggregated by sex.	0	4,213	1513	567.	1500	2,120 (1422 males, 698 females).	1,200	1715 (1025 males and 690 females)	0	953 (419 females, 554 males)	5,390 (3397 males 1993 females)	Due to robustsensitization sessions with traditional leaders and their Indunas.	Activity reports and attendance lists
Output Indicator 2.2.2 # of spouses of traditional leaders sensitised on GBV and COVID-19 disaggregated by sex.	30	1,500	500	N/A. Indicator was developed in Sept 2021	500 (New additional figure to the 500 in 2020)	1,708 (1,019 females, 689 males)	500	417 (206 males, 211 females)	0	2375 (1392 females, 983 males)	4500 (2622 females and 1878 males)	Engagement with chiefs' spouses at chiefdom level was cost-effective and contributed to increased reach	Attendance lists, Activity reports

Indicator		
•	Consolidated GRZ-UN JP GBV II Project - 2020 to December 2023 Planned Targets and Actual Outputs Results	Cumulative ¹³ GRZ-UN JP GBV II Project Performance

	Base-line - Jan 2020	End of Programme Target (EPT14) (31 Dec 2022)	2020 Planned Target	2020 Actual Output	2021 Planned Target	2021 Actual Output	2022 Planned Target	2022 Actual Output	2023 Planned Target	2023 Actual Output	Cumulative Actual Total Performance (2019 to Dec 2023)	Achievement- reasons for over/under performance	Means of verification
Output Indicator 2.2.3 # religious leaders sensitised on GBV and COVID-19 disaggregated by sex.	40	350	100	N/A. Indicator was developed in Sept 2021	100 (New additional figure to the 100 in 2020)	281 (181 females, 100 males)	100	623 (301 females, 322 males)	0	390 (214 males, 174 females)	1294 (572 females, 732 males)	More demand for information by religious leaders contributed to increased reach	Attendance lists, Activity reports
Output Indicator 2.2.4 # of political leaders23 sensitised on GBV and COVID-19 disaggregated by sex.	0	120	0	N/A. Indicator was developed in Sept 2021	60	120 (80 females, 40 males)	60	116 (71 males 45 females)	0	155 (85 males 70 females)	391 (195 females, 196 males	The Project leveraged the orientation programmes of new office bearers and their willingness to receive more information.	Attendance lists, Activity reports
Output Indicator 2.2.5: # of people participating in community structures reached with GBV/COVID- 19 prevention and response messages disaggregated by sex.	0	10,000	2,000	158,102	4000	54,863 (33,684 females, 20,999 males)	4,000	30,466 (16,142 males and 14,324 females)	0	7302 (3469 females, 3833 males)	253,195 (148,558 females and 104,637 males)	Due to intensified mass-sensitizations. using physical meetings as well as radio, TV and virtual platforms increased the reach.	IP Reports

Indicator .	Consolidated	GRZ-UN JP GBV II Project	- 2020 to Decen	Cumulative ¹³ GRZ-UN JP G	Cumulative ¹³ GRZ-UN JP GBV II Project Performance								
	Base-line – Jan 2020	End of Programme Target (EPT14) (31 Dec 2022)	2020 Planned Target	2020 Actual Output	2021 Planned Target	2021 Actual Output	2022 Planned Target	2022 Actual Output	2023 Planned Target	2023 Actual Output	Cumulative Actual Total Performance (2019 to Dec 2023)	Achievement- reasons for over/under performance	Means of verification
Output Indicator 2.2.6 # community structures mobilised to challenge norms and cultural practices that sanction and perpetuate GBV and the low status of women and persons with disability.	0	30	0	N/A. Indicator was developed in Sept 2021	10	14	20	42	0	41	97	There were more than 10 structures in the communities in need of capacity development to address negative cultural practices and norms. ZCCP: 3 - Neighbourhood health committee (NHC), Community Welfare Assistance Committee (CWAC), and Community Crime Prevention Units (CCPUs)	IP Reports
Output 2.3. Improved multi-sectoral coordination and governance related to GBV prevention and response Output Indicator 2.3.1: # of district plans mainstreaming GBV	33	18	0	20	8	13	10		0	0	33	This was due to presence of the Anti-GBV Task Force teams and the Districts Gender Sub-Committees and demand from districts for support on gender equality and gender mainstreaming	Activity reports

.

Indicator		
	Consolidated GRZ-UN JP GBV II Project - 2020 to December 2022 Planned Targets and Actual Outputs Results	Cumulative ¹³ GRZ-UN JP GBV II Project Performance

	Base-line – Jan 2020	End of Programme Target (EPT14) (31 Dec 2022)	2020 Planned Target	2020 Actual Output	2021 Planned Target	2021 Actual Output	2022 Planned Target	2022 Actual Output	2023 Planned Target	2023 Actual Output	Cumulative Actual Total Performance (2019 to Dec 2023)	Achievement- reasons for over/under performance	Means of verification
Output Indicator 2.3.2: # of policies/legal instruments/guidelines finalized	0	9	2	2	3	6	4	4	0	5	14		Programme partner reports
Output Indicator 2.3.3: # of service delivery points tracking GBV data on an MIS.	1	6	0	2	2	2	3	0	0	0	5	The ZP-VSU and Judiciary Department await guidance from SMART Zambia on the Monitoring Evaluation Reporting and Tracking (MERT) System	TWG C o- ordination Meeting Minutes
Output Indicator 2.3.4: # of Steering Committee meetings held	0	6	2	2	3	1	3	2	2	2	7		Attendance List

Indicator		
	Consolidated GRZ-UN JP GBV II Project - 2020 to December 2022 Planned Targets and Actual Outputs Results	Cumulative ¹³ GRZ-UN JP GBV II Project Performance

	Base-line – Jan 2020	End of Programme Target (EPT14) (31 Dec 2022)	2020 Planned Target	2020 Actual Output	2021 Planned Target	2021 Actual Output	2022 Planned Target	2022 Actual Output	2023 Planned Target	2023 Actual Output	Cumulative Actual Total Performance (2019 to Dec 2023)	Achievement- reasons for over/under performance	Means of verification
Output Indicator 2.3.5 # of Joint monitoring missions	0	12	4	2	4	10	4	7	2	5	23	Demand for joint learning visits by various stakeholders and government.	Mission reports Activity reports
Output Indicator 2.3.6 # of Joint planning and review meetings held	0	6	2	7	2	3	2	4	2	2	16	There was need for continued orientation of the IPs on results reporting and acceleration of implementation	Attendance Lists BTOR Minutes

7.0 Specific Stories:

7.1 Mwakamui Katungu's Transformation

Problem / Challenge faced:

Ms. Mwakamui Katungu is a middle-aged resident of Mandanga community in Mongu, Western province and a single mother of 4 children aged between 2 and 10. Mwakamui who was making ends meet through transactional sex, at times against her wish had no one to look after the children when she went out for her sex for money business. To make them sleep and not make noise for neighbors, she used to give the children sleeping drugs (piriton) then lock them in the house. One fateful night Mwakamui had an altercation with her client resulting in bodily injuries. Mwakamui was taken to the hospital by a Good Samaritan and she was admitted for treatment. When she did not return home, the children started crying in the house as the door was still locked form outside. The neighbors heard the children crying and upon hearing that they were often locked up in the house they reported the matter to the police. Mwakamui was arrested upon discharge from hospital.

Programme Interventions:

Provision of Temporary Safe Shelter / Psychosocial Counselling & Economic Empowerment.

The Project provided temporary safe shelter to the four children when Mwakamui was in hospital and later in prison for 3 months. While in prison, and as part of her rehabilitation, the project through YWCA provided psychosocial counselling to her. Upon her release from prison, the Project followed her up and further trained Mwakamui in Entrepreneurial and Business Skills. Mwakamui was provided with ZMW 1,500 seed money, which she invested in Mobile Money business. She also joined a Project's Savings Group.

Result:

Mwakamui is now able to feed and take her children to school. She shares that.. "I am happy that I no longer feed my children from abusive sex for money transactions. I am glad to say I no longer have to lock up my children in the house at night as that was risky for their wellbeing... I encourage the UN-GRZ GBV Joint Programme to do the same to my other friends that are relying on sex for money who usually get abused as sometimes men do not pay after sex..."

Lessons Learnt

That economic empowerment can break the cycle of abuse and vulnerability. She explains that the empowerment fund she received has changed her standard of living as she has now become economically independent.

Leveraging local Civil Society Organisations is impactful as they were able to provide the necessary support, she needed using their clout. This story depicts the impact that the GBV II interventions are having on communities through implementing partners.

7.2 Elizabeth – Economic Empowerment

Problem / Challenge faced:



In Fisako village, under Chief Maguya's Chiefdom in Chipata, lives Elizabeth, a mother of three who was a survivor of gender-based violence at the hands of her husband. Elizabeth was economically vulnerable as she was entirely dependent on her husband.

Elizabeth said:

"I was always insulted and beaten by my husband whenever I asked for money to buy food or clothes for the children. As I did not know where to report I suffered in silence knowing I could not report to my family as this would bring shame as per our culture you cannot just tell people certain marriage issues..."

Programme Interventions:

Economic Empowerment.

The Project working with a local NGO- Young Happy Healthy and Safe (YHHS) identified Elizabeth through their regular community engagements in Maguya village. When she was assessed, Elizabeth

was counselled and underwent entrepreneurship training with the other beneficiaries.

Following the business training, Elizabeth was given a startup capital of ZMW 1,500, which she

invested in Chitenge business. She also joined a village banking group, which after six months she was

able to turn her life around.

Result:

Through good financial management, her capital grew to ZMW 7,000, enabling her to expand her

business into thrift shop selling locally known as "Salaula." Elizabeth now turned Entrepreneur is

financially independent and has earned the respect of her husband.

Now financially independent, Elizabeth supports her family, can purchase farming inputs, and ensures

her children have all they need for school. Recognizing her commitment, the Project adopted Elizabeth

as an official Anti GBV champion. She was further trained in psycho-social support, and now inspires

others, raising awareness about GBV and encouraging women to stand up for themselves.

Lessons Learned:

Elizabeth's story is a powerful demonstration of the impact of targeted interventions of the project,

turning survivors into champions of change. In Fisako Village, her resilience shines as a light of hope,

creating a path towards a future which is free of GBV.

ANNEXES

Annex 1.0 - Project Risk Log



GBVII Project Risk Register.docx

Annex 2.0 -: Final Report GRZ-UN GBV II Light Touch Assessment Report



Final 30.06.2023 GBV II Light Touch A

Annex 3.0 – Minutes of the 12th September 2023 GRZ-UN GBV II 6th Programme Steering Committee



i

Annex 4.0 - Final Terms of Reference (ToR) for the Terminal Evaluation of the GRZ-UN JP GBV II



Annex 5.0 Zambia Police Service - Victim Support Unit 2023 GBV statistics



Annex 6.0: GRZ-UN JP GBV II Financial Expenditure Report 2019-2023



Annex 7.0

Graphics	Links
The Consentence of Zamba United hadrons plant Programma on Cannote Based Violence (CICL-LARRICAL) is an India particle intelligence of india programma and in the programma and with the appear from the large of indians (2015). In the control of the programma and with the appear from the large of indians (2015) and in	https://twitter.com/unicefzambia/status/164904962585540198 5?s=20 https://www.instagram.com/p/CrSZ2HZN0xP/ https://www.youtube.com/watch?v=oipUGsYDNzY&pp=ygUNdW5pY2VmIHphbWJpYQ%3D%3D
	https://m.facebook.com/story.php?story_fbid=pfbid02kBYdH1N 7XcAApPLPTBk5pFwK7ckmRhAgQoBjPec49F4viyP1edeFHdK2255 4a8vZl&id=100064552035358&mibextid=Nif5oz

	https://drive.google.com/drive/folders/1wP5scRcBz6ctJLCLOFGIcAzNbjRONc4S?usp=sharing https://drive.google.com/file/d/1JkLaB6c7dDY-HUmJzUunOm4BxVnics8Y/view?usp=sharing
Anti GBV Act proposed amendments developed by the Zambia Law Development Commission, Gender Division and Partners.	https://youtu.be/S3h3vBgd-go?si=aLWCq2NPcA8SUJiB
One-Stop-Centers made Child Friendly in Zambia Visitsus of Counter abused Politicar receive housepools advised to believe for appear to Author (2005). Visitsus of Counter abused Politicar receive housepools advised to believe for appear to Author (2005). Visitsus of Counter abused Politicar receive housepools advised to believe for appear to Author (2005). Visitsus of Counter abused Politicar receive housepools advised to the politicar abused to the poli	https://www.unicef.org/zambia/stories/one-stop-centers-made-child-friendly-zambia
White new finds to generate and supplies the process of several and supplies the several and several and supplies the several and s	https://twitter.com/unicefzambia/status/164677857779318784 1?s=20 https://www.instagram.com/p/CrAifbEt3aT/?utm_source=ig_we b_copy_link https://m.facebook.com/story.php?story_fbid=pfbid02obyqqFic NnkvBNAyfMWev4YK9e78xHJ9aX27m4FPaFCAVgS2277SVUgXiP 4FN4Xal&id=100064552035358&mibextid=Nif5oz
Women's Economic Empowerment Savings Group	https://www.undp.org/zambia/gender-equality-and-womens-empowerment -

Unicel Zambia 9 Unicel Zambia 9 Unicel Zambia 9 Unicel Zambia 9 Unicel Zambia 10 Unicel Zambia 10	https://www.instagram.com/p/CkQC5zRM7pr/?utm_source=ig_web_copy_link
	https://twitter.com/unicefzambia/status/158590783229709516 9?s=20
ZNBC: Launch of ICT Hubs	Tech Hubs to be established in Itezhi-Tezhi, Chisamba, Chongwe ~ (znbc.co.zm)
Launch of Chinsali Hospital -based One Stop Center.	https://www.youtube.com/watch?v=dxvrJBzCK0Y at 21.38 minute (ZANIS News)