

Ending GBV in South Sudan

This special issue of the South Sudan Medical Journal is mainly devoted to addressing the problem of gender-based violence especially as it affects women and girls. Gender-based violence (GBV) is defined as violence committed against a person because of their sex or gender. It is forcing another person to do something against their will through violence, coercion, threats, deception, cultural expectations, or economic means.^[1] GBV disproportionately affects girls and women. The global statistics indicate that 1 in 3 of women worldwide have been subjected to either physical and/or sexual intimate partner violence or non-partner sexual violence in their lifetime.^[1]

A recent study in South Sudan, conducted by The Sudd Institute, shows that substantial proportions of women in South Sudan experience GBV either in form of physical (34.0%) or sexual (13.5%) violence in their lifetime.^[2] Intimate Partner Violence is at 49.6%, the second highest in the region.^[2] Similarly, the study documented a high prevalence of child marriage (34.6%) nationally.^[2] These numbers are concerning as it indicates that not enough is being done to prevent and address GBV in South Sudan. The situation may be even worse with the large numbers of women and girls returning from Sudan. As a signatory to the Maputo Protocol^[3] that seeks to end all forms of gender inequality, this is unacceptable.

GBV is detrimental to women's mental, physical, sexual, and reproductive health.^[4] It can lead to depression, post-traumatic stress, anxiety disorders, and suicide attempts.^[4] Physical injuries and fatal outcomes like homicide can also result from GBV.^[4] It can also lead to unintended pregnancy, abortion and its complications, obstetric fistula, miscarriage, and increased risk of STIs.^[3] GBV has great social and economic costs for countries as it can lead to women being isolated, unable to work and lacking participation in society.^[4]

According to a 2021 report, discriminatory social norms, a weak legal system, and power inequalities are among the core drivers of GBV in South Sudan.^[5] Its findings revealed that GBV victims have very minimal or no access to justice and healthcare, which is associated with factors such as lack of resources, customary practices, lack of capacity of legal and health actors, and lack of knowledge of their own rights by victims.^[5]

Prevention of GBV and its effects on survivors, requires a multidisciplinary approach that ensures policies are put in place and reforms of policy and legislation are done, to ensure protection for GBV survivors.^[5] Justice and legal redress should be enforced. Dissemination of information and awareness to the target communities to enable them to understand their rights and seek redress is necessary.^[5] Continued advocacy to change social norms and practices that promote GBV and ensure accountability is essential.^[5]

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Healthcare and rehabilitation services for the survivors must be prioritized by strengthening health systems' capacity to integrate GBV services at primary health service points and ensure survivor and person-centred GBV services.^[6] Coaching, mentorship, and job aids should be offered to health workers at all levels of the health system, to ensure survivor-centred care across sexual and reproductive health and rights services.^[6] Sensitization of health care workers on GBV and handling of GBV cases should also be done.^[6]

The Ministry of Health, UN agencies, NGOs and other partners have focused on multisectoral approaches to reducing GBV, including coordinated interventions to ensure timely and safe respectful services to survivors.^[7] These include women's empowerment, and building the capacity of health, psychosocial and legal sectors to handle GBV cases. It also means making protection against GBV central to humanitarian policy and operation and building the capacity of the civil society.^[7]

Healthcare workers must not take a back seat to GBV prevention and management as many of its consequences have both direct and indirect effects on health, with transgenerational impact. As healthcare workers, we must be an integral part of the fight to end this affront to Human Rights.

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