



Prevalence of Gender-based violence amongst Key Populations in South Sudan.

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Prevalence of Gender-based violence amongst Key Populations in South Sudan—Report.

Situation Overview

All over the world, sex workers experience extraordinarily high rates of violence. Even where there are high rates of violence against women, sex workers experience a higher burden.

Gender-based violence (GBV) is one of the most critical threats to the protection and wellbeing of women and children in South Sudan (UNICEF, 2019). There is no national baseline statistics across the Country to understand the prevalence and full magnitude of the problem posed by violence against women and girls in South Sudan. However, one recent study indicate that some 65 per cent of women and girls have experienced physical and/or sexual violence in their lifetime, and some 51 per cent have suffered intimate partner violence (IPV). Some 33 per cent of women have experienced sexual violence from a non-partner, primarily during attacks or raids. The majority of girls and women experience sexual violence for the first time under the age of 18 [Georgetown University, 2017].

Gender-based violence (GBV) threatens the overall well-being of South Sudan's population, particularly for key populations (FSWs) who remain vulnerable to all forms of GBV/VAW due to the nature of their work, conflicts and the operating environment .

Yo' Care South Sudan, through the support of the USAID's funded Advancing HIV and AIDS Epidemic Control (AHEC) Activity in South Sudan has recorded **15,314** incidents of sexual violence against female sex workers between January to December 2021, with sexual violence/exploitation higher followed by physical assault.

Based on these documented incidents, the prevalence of GBV/VAW was estimated to be around 22% of all screened Female Sex Workers though there are concerns numbers may be much higher if a nation-wide prevalence studies are conducted. This study was limited to Juba (Munuki Block), Bor, Rumbek and Wau where Yo' Care is currently implementing the AHEC Activity.

Key words: Gender-based violence/violence against women, key populations, screening and prevention, family planning services, South Sudan.



Yo' Care Response for KP

- ◆ 69,458 FSWs reached with screened and tested for STIs;
- ◆ 15,314 FSWs provided with STI management, FP commodities, PEP, counseling and legal services.

Situation of KP (FSWs)

- 4896 (32%) of FSWs experienced/reported sexual violence;
- 4078 (27%) of FSWs experienced/reported emotional abuse;
- 3839 (25%) of FSWs experienced/reported physical assaults;
- 2579 (17%) of FSWs experienced/reported economic abuse.

About the AHEC Activity in South Sudan

Yo' Care South Sudan is a consortium partner for the AHEC Activity currently working in 4 states to provide psychosocial support, medical care, and case management to Key populations and priority population including survivors of GBV. The AHEC Activity is a -year funded program implemented by IntraHealth International as the Prime as well as Yo' Care South Sudan and Health Link South Sudan as sub-partners. Yo' Care South Sudan implement the KP Program in selected states/towns (Juba, Bor, Rumbek and Wau).

The purpose of the USAID/Advancing HIV & AIDS Epidemic Control (AHEC) Activity is to decrease morbidity and mortality among South Sudanese by increasing prevention, care, treatment, and retention services for at-risk men, women, children, and key populations (KP); and to improve South Sudan's journey to self-reliance by strengthening the capacity of local partners to prepare them for the receipt of future prime funding.

Yo' Care South Sudan will continue to implement a set of interventions that will increase HIV prevention, care, treatment, and retention services for female sex workers (FSW) and Priority Populations (PP), mainly the clients of FSWs. Activities will continue to

reach FSWs and PPs at the identified hotspots through mapping and micro planning processes and will use the HIV service cascade framework to structure its peer education and outreach services that will enable FSWs and PPs access comprehensive HIV services in the community and health facilities.

In 2022, based on overall performance in 2021, will focus it's KP activities in Rumbek, Wau and Bor while transition Juba to Intra-Health, with the expectation that Yo' Care will sustain the current achievements made in Rumbek, Bor and Wau sites and rapidly scale coverage of peer education, GBV and outreach services for KPs and PPs.

Yo' Care South Sudan, AHEC Team reached a total of 69,458 female sex workers in Juba (Munuki Block), Bor South (Jonlei State), Rumbek Centre (Lakes State) and Wau (WBGs) in 2021 with GBV prevention (including awareness raising and social norms transformation), response services including individualized case management, psychosocial support, skills building courses, access to women and girls friendly services, risk mitigation information and referrals for other specialized services supported by other partners such as UNICEF, ICRC and UNFPA.

“15,314 FSWs provided with STI management, FP commodities, PEP, counseling and legal services”.

Results from 2021 GBV interventions—Types of GBV/VAG reported

There were 69,458 KP reached in 2021 with various medical and GBV services in 4 locations. Out of this 15,314 reported GBV/VAG incidents as highlighted below;

- ◆ 32% of the FSWs Reported experiencing Sexual Violence (Force to have sex or do something sexual they didn't want to do such as sex without a condom);
- ◆ 27% Reported Emotional Abuse (threatened, verbally, abused, humiliated, made to feel afraid);
- ◆ 25% Reported Physical Assaults (Hit, punched, kicked, cut, or otherwise physically hurt), and
- ◆ 17% Reported Economical Abuse (Not being paid money due to disagreement, being robbed, blackmailed, or force to pay money to avoid arrest)

Table 1: Prevalence of GBV/VAW Among KP by Types of GBV incident reported

2021 Month	FSWs	# of GBV/VAW	# of Emotional	# of Economical	Physical Assault	# of Sexual
Jan 21	1890	678	149	102	156	271
Feb 21	897	579	110	122	156	191
Mar 21	1352	867	208	61	251	341
Apr 21	8760	673	155	87	195	236
May 21	1920	1572	462	148	294	668
Jun 21	9037	2231	583	452	894	302
Jul 21	18962	5130	1669	874	949	1638
Aug 21	987	870	282	200	218	452
Sep 21	8130	612	89	198	211	114
Oct 21	9123	698	147	105	273	173
Nov 21	1090	711	224	79	190	218
Dec 21	7310	693	198	152	52	291
Total	69458	15314	4078	2579	3839	4896



Yo' Care Bor KPPO (I) during a radio awareness in Dec 2021, Bor, South Sudan

Prevalence of GBV By Age

As can be seen in Table 2 below, the prevalence of GBV incidents is higher among female sex workers aged 30—34 (22%; n = 3,457) followed by FSWs aged 25—29 (21%; n = 3211).

Most of the female sex workers in these ages brackets are still sexual active, are likely to be out of home or parental controls and are more likely to engage in risky behaviors such as drinking which may compromise their ability to negotiate for safer sex or be in safe places, hence increasing their vulnerability for abused by their clients or non-clients.

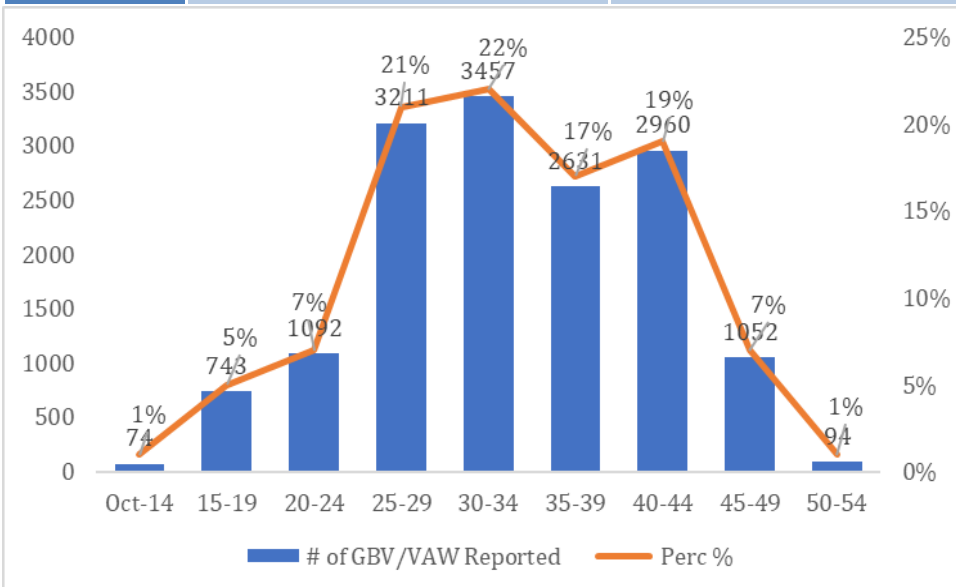
Similarly, the GBV incidents are rare among the extreme of ages for key population aged 10—14 (1%; n = 74) and those aged 50—54 (1%; n = 94).

The low incidents among these extreme of ages is attributed to the fact these groups are not many in the commercial sex works and are also more likely to be in safe places.

Yo' Care South Sudan, AHEC Team reached a total of 69,458 female sex workers in Juba (Munuki Block), Bor South (Jonlei State), Rumbek Centre (Lakes State) and Wau (WBGs) in 2021 with GBV prevention (including awareness raising and social norms transformation), response services including individualized case management, psychosocial support, skills building courses, access to women and girls friendly services, risk mitigation information and referrals for other specialized services supported by other partners such as UNICEF, ICRC and UNFPA.

Table 2: Prevalence of GBV/VAW Among KP by Age:

Age	# of GBV/VAW Reported	Perc %
10-14	74	1%
15-19	743	5%
20-24	1092	7%
25-29	3211	21%
30-34	3457	22%
35-39	2631	17%
40-44	2960	19%
45-49	1052	7%
50-54	94	1%

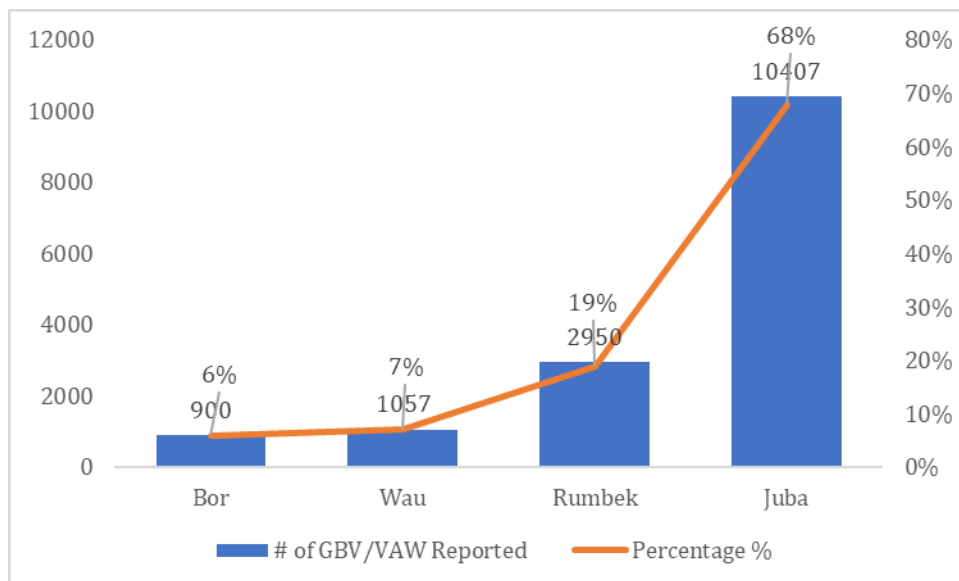


GBV prevalence reported by Location

Table 3 as well as the graph below shows the prevalence of GBV/VAW amongst FSWs reported by locations. Juba in Central Equatoria State reported the highest prevalence of GBV among the FSWs at 68% (n= 10,407) of the 15,314 who reported/experienced GBV incidents, followed by Rumbek Centre in Lakes State at 19% (n=2,950), Wau in Western Bhar El Ghazal at 7% (n=1,057) and Bor South in Jonglei State with 6% (n=900). Its important to note that Juba reported the highest prevalence of GBV incidents due to fact that Yo' Care KP activities started early in January 2021, unlike Rumbek, Wau and Bor where activities and collection of GBV data commented in September 2021. This gave Juba the highest portion with the greater Percentage of GBV amongst FSWs.

Table 3: Prevalence of GBV incidents by Locations

LOCATION	# of GBV/VAW Reported	Percentage %
Bor	900	6%
Wau	1057	7%
Rumbek	2950	19%
Juba	10407	68%



DISCUSSION, ANALYSIS AND INTERPRETATION OF RESULTS

The results obtained in this report indicate that gender-based violence/ violence against women (at 22%) is widely prevalence among key population (female sex workers) in Juba, Bor, Rumbek and Wau, compared to some 65 per cent of women and girls at national level for South Sudan who reported having experienced physical and/or sexual violence in their lifetime in 2017, according to a global GBV report by The Global Women’s Institute and the International Rescue Committee titled *No Safe Place: A Lifetime of Violence for Conflict-affected Women and Girls in South Sudan*. Washington DC and London: The George Washington University and the International Rescue Committee, 2017 .

These results follow similar trends when compared to neighboring Uganda which has a GBV prevalence at 82% (Schwitters, 2017) and Kenya at 87% (Roberts et al., 2018) among female sex workers. There is currently no peer-reviewed research could be found on sex work and violence in South Sudan and as such it’s difficult to compare national level trends and statistics with those of the neighboring Countries. Under South Sudan’s Penal Code, 2008 selling and buying sex is illegal.

In 2021 under the AHEC Programme, Yo’ Care through the support of its prime partner, Intrahealth, trained health care workers to proactively screen for violence among FSWs. They were trained on sex and gender, harmful gender norms, and the connection between violence and HIV. Through on-job mentoring, our peer leaders, social workers, counselors, and nurses further developed skills for screening individuals from key populations, including sex workers, for violence and providing first-line support to key population victims, including linking them to health, psychosocial, and legal services.

Violence prevention and response services are integrated into existing HIV prevention, care and treatment services cascade. During January-December 2021, 69,458 female sex workers were screened for violence by Yo' Care healthcare workers during voluntary health testing services (HTS) outreach. Of those reached and screened, 15,314 (22%) reported sexual violence.

In turn, 32% (n=4896) of the FSWs reported experiencing Sexual Violence (Force to have sex or do something sexual they didn't want to do such as sex without a condom); 27% (n=4078) of the FSWs reported emotional abuse (threatened, verbally, abused, humiliated, made to feel afraid); 25% (n= 3839) reported physical assaults (Hit, punched, kicked, cut, or otherwise physically hurt),

and 17% (n= 2579) of FSWs reported economical abuse (Not being paid money due to disagreement, being robbed, blackmailed, or force to pay money to avoid arrest)

Further, the study demonstrates a correlation between incidents of GBV with age where the prevalence of GBV incidents is higher among female sex workers aged 30—34 (22%; n = 3,457) followed by FSWs aged 25—29 (21%; n = 3211). This could be attributed to risky social and sexual behavior among these age groups—such as drinking and multiple sexual partners.

The majority of sex workers also reported having experienced violence in their lives, and the majority have experienced more than one violation. Most FSWs also reported being stigmatization, marginalized, oppressed, dehumanized and criminalized ,and have never receive help when they need it, from the police, health care workers and others tasked with assisting them.

“The majority of sex workers also reported having experienced violence in their lives, and the majority have experienced more than one violation”.

CONCLUSION AND RECOMMENDATION.

Based on these GBV findings, it can be concluded that gender-based violence/violence against women and girls is widely rampant among key populations, particularly female sex workers and South Sudan as whole compared to neighboring Countries of Sudan, Kenya and Uganda.

Therefore, South Sudan government and its partners should double efforts to establish GBV prevention mechanism at community and in rural areas so that adequate protection outcomes for women and girls can be realized for the population.

GBV awareness and sensitization for both general population and key population should be carried out routinely – by communities, local government and other development partners. We also recommend that further research can be done to established reliable statistics to understand the full scale of the GBV problem in the Country and appropriate intervention service for vulnerable groups can be adopted.

RECOMMENDATIONS:

To THE RSS:

- ◆ Evaluate the broader set of legislation regarding women's rights and change legislation to criminalize GBV;
- ◆ Build institutional capacity of the formal legal system by training local leaders, prosecutors, judges, and security services on statutory law, and training women police and judges.

To the UN/NGOs operating in South Sudan:

- ◆ Maintain support for programs to address all forms of GBVs/VAW and provide public education that includes men and boys;
- ◆ Conduct public outreach to inform communities about the GBV services and how to access them;
- ◆ Prioritize psychosocial support programs for survivors of GBV/VAW.

To Communities;

- ◆ Proactively Report incidents and,
- ◆ Support GBV interventions in their area.

Priorities in 2022

Yo' Care South Sudan

Established in December 2009, Yo' Care South Sudan is a not-for-profit, non-political, Non-Government Organization (NGO) based in Juba, South Sudan. The organization is run by South Sudanese medical, healthcare, and nutritional professionals to create, develop, and provide comprehensive and integrated basic healthcare, nutrition, and WASH (Water, Hygiene and Sanitation) services to the South Sudanese public. It currently works in CE, Lakes State, Jonglei State, WBSG and Unity State with support implementing health, nutrition and WASH projects supported by HCSS, USAID, IHI amongst, others.

Yo' Care South Sudan will continue to work in close partnership with donors, clusters and sub clusters, UN agencies and international and national organizations, including women led organizations, to ensure better attention to GBV related concerns.

Investing in capacity of our Field KPPOs and Peer Leaders: By investing in our field staff, Yo' Care aims to both improve the quality of services and contribute to longer-term, more sustainable solutions to GBV in South Sudan.

Integrated GBV Interventions into Health, WASH and Nutrition Programmes: Yo' Care South Sudan will continue to plan and integrate GBV intervention in all our programme. Specific GBV indicators will be developed for each project/program and tracked. Social Workers will form part of our core team to screen, detect and respond to identified/reported GBV incidents. Our Social Workers/GBV Officers will join assessment missions conducted by Protection or GBV clusters to better understand the needs on the ground, to inform advocacy and future programming as well as to support our team to effectively mitigate GBV, among our clients.

Addressing HIV/AIDS: Our core expertise is currently in the HIV/AIDS programming. We will continue to develop and hone our skills, knowledge and capacities including in research to better generate high quality data for decision making—by us and other stakeholders.

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