Analyzing The Effectiveness of Empowerment Policy for Gender Based Violence Survivors: A Case Study of Lusaka District (*Paper ID: CFP/4678/2023*)

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Abstract - Overtime Gender Based Violence has become an umbrella term for any harm that is perpetuated against a person's will on the basis of unequal relations between women and men as well as through abuse of power. This study aimed at analyzing the effectiveness of empowerment policy for gender-based violence survivors and was informed by the following objectives: to analyze the effectiveness of empowerment policy in cushioning the impact of GBV; to examine the nature of empowerment given to survivors of gender-based violence and; to analyze the impact of gender-based violence on GBV survivors. The study adopted a descriptive case study research design where a mixed method was adopted as a way of collecting qualitative and quantitative data from participants. A sample size of 100 respondents was chosen which comprised of GBV survivors, members of the community, police officers and staff from social welfare. The study revealed that the empowerment policy is effective in cushioning the impact of GBV, this because the type of empowerment extended to GBV survivors sustain them and their families. The findings further revealed that the empowerment given is sustainable as it can be seen from those who have benefited before. Gender-based violence survivors are given different empowerment to help them cushion the impact which comes with being a 2nd Author: Mr. Siwila Davy Department of Social Sciences School of Business & Humanities Information and Communications University/ Zambia Research and Development Center Lusaka, Zambia advisor2.icu@gmail.com

victim of GBV. With regards the type of empowerment given to GBV victims, the study revealed that GBV survivors are empowered through the following means: providing them with employment, offering trainings in entrepreneurship, emotional and spiritual counselling, legal support during court sessions, providing shelter to the survivors, provision of food and education to those survivors who still have a chance to get educated. Furthermore, the study revealed that GBV leads to death as seen from reports emoting from different parts of the country where GBV causes death of the victim, it increases the chances of one being depressed, being disables and breaking of families among others. Finally, the study recommends that; Promoting harmonious, egalitarian and violencefree relationships between women and men as part of economic empowerment initiatives in order to better support the economic participation of women, as well as that of their male partners, family members and communities, on the basis of a systematic analysis of needs and context.

Keywords: Analyze, effectiveness, empowerment, policy, gender based violence, survivors

1.0 INTRODUCTION

1.1 BACKGROUND

The term Gender Based Violence (GBV) evolved from the term Violence Against Women (VAW). The UN Declaration on Elimination of Violence against Women (1993) defines violence against women as "any act of gender based violence which results in or is likely to result in physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or are arbitrarily deprivation of liberty, whether occurring in public or private life." Since Gender Based Violence almost always has greater negative impact on women and girls, it is often used interchangeably with the term Violence against Women. However, men also can be victims of GBV (Chambo, 2012).

Over time Gender Based Violence has become an umbrella term for any harm that is perpetuated against a person's will on the basis of unequal relations between women and men as well as through abuse of power. In this Policy, GBV shall be taken to refer to physical, sexual, economic or psychological violations which are subjected to individuals and/or a group of persons based on social expectations of men and women. The Policy shall focus on the following forms of Gender Violence; Physical violence which Based includes; battering and beating. Sexual violence which includes; rape, child sexual abuse, defilement and incest, sexual assaults, sexual harassment, forced prostitution and trafficking in persons. Harmful traditional practices such as Female Genital Mutilation, early and forced marriages and dowry related violence. Economic violence such as denial of assets and economic livelihoods (Kangwa, 2021). Emotional and psychological violence such as verbal abuse, humiliation and confinement. GBV reinforces inequalities between men and women, girls and

boys and compromises the health, dignity and security of those affected (Jones, 2016).

The Anti-GBV Act was the first piece of legislation that defined GBV in Zambia: "Any physical, mental, social or economic abuse against a person because of that person's gender, and includes (a) violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to the person, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life; and (b) actual or threatened physical, mental, social or economic abuse that occurs in a domestic relationship.

It provides for the protection of GBV survivors and established the Anti-GBV Committee and Anti-GBV Fund. Importantly, Section 2(2) of this law states that the provisions of this law shall prevail if there are any inconsistencies with the provisions of another written law except for the Constitution. This law also allows any person or institution with information about GBV to report the matter to the police in the district where the offender or victim reside, where the incident of GBV occurred, where the victim is temporarily staying, or where it is convenient for the person filing the complaint. The Anti-GBV Committee established under this Act is nonfunctional, the Anti-GBV Fund has not been set up, and scaling up of GBV protective shelters by relevant ministries has not been adequately addressed (Edwards, 2012).

1.2 Statement of the Problem

There is no society in the world untouched by gender-based violence. It occurs in every country, irrespective of age, ethnicity, culture or religion. Evidence shows that gender-based violence remains one of the world's most widespread, persistent and devastating human rights violations. More than 150 countries including Zambia have adopted laws on gender-based and domestic violence. However, often the weak enforcement of these laws is limiting women and girls' access to safety and justice, and achievement of their full potential. Additional efforts are needed to adequately prevent and respond to violence against women and girls, protect the survivors and end the culture of impunity. An estimated 736 million women in the world aged 15 and over almost every third have been subjected to intimate partner violence, non-partner sexual violence, or both at least once in their life (Mubanga, 2019).

In a study done by World Bank Group (2022) Of all women (single, ever married, divorced) aged 15-49, 36 percent have experienced physical violence since age 15. Women in rural areas are more likely to have experienced physical violence than women in urban areas (37 percent and 34 percent respectively), and the percent of women who have ever experienced physical violence is highest among divorced, separated, or widowed women at 52 percent.24 In 2021, 10,049 cases of physical violence were reported to the Zambia police VSU by women and girls, making up 77.9 percent of total reported cases of physical violence in Zambia. While the Anti-GBV Act provides for GBV prevention and response mechanisms, this law has not been fully implemented.

1.3 Objectives

- i. To analyze the effectiveness of empowerment policy in cushioning the impact of GBV
- ii. To examine the nature of empowerment given to survivors of gender-based violence
- iii. To analyze the impact of gender-based violence on GBV survivors

1.4 Research questions

- i. How effective is the empowerment policy in mitigating the impact of GBV?
- ii. What is the nature of empowerment given to survivors of gender-based violence?
- iii. What are the impacts of gender-based violence on GBV survivors?

1.5 Conceptual Framework

This model was developed by a multi-sectoral, multi-country network of partners working to strengthen responses to violence against women, supported by the Sexual Violence Research Initiative (SVRI), the Population Council, the Swedish-Norwegian Regional HIV and AIDS Team for Africa and US President's Emergency Plan for AIDS Relief (PEPFAR). Since 2006, the network has been developing a comprehensive approach to preventing and responding to violence against women, especially sexual violence, in select African countries. The model includes health. criminal justice, and psychosocial services required by victims/survivors, and works to strengthen the among linkages these sectors. Seventeen organizations in nine countries (Kenya, South Africa, Zambia, Rwanda, Uganda, Malawi, Zimbabwe, Senegal and Ethiopia) are currently involved in the comprehensive implementing model. Partners also working are on initiatives to strengthen national programmes on sexual and domestic violence and to enhance prevention strategies. Lessons learned are being documented so that policy frameworks, implementation guidelines and other resources can be shared with others seeking to strengthen programmes in the region

ISSN: 3471-7102, ISBN: 978-9982-70-318-5

Figure 1 conceptual framework

Health

Pregnancy testing and EC HIV diagnostic testing and counseling and PEP Prophylaxis for STIs

Vaccination for Hepatitis B and tetanus

Evaluation and treatment of injuries, forensic examination and documentation Trauma counseling

Referrals to/from police and social support sectors

Police/Justice

Statement-taking and documentation Criminal investigation Collection of forensic evidence and maintaining the chain of evidence Ensuring the safety of the survivor Prosecution/adjudication of the perpetrator Witness preparation and court support Referrals to/from health and social support sectors

Social Support

Needs assessment for psychosocial services

Referral to short-term or long-term psychosocial support services

Provision of safe housing, relocation services, if required

Reintegration into family/household, if required

Long-term psychosocial counseling and rehabilitation

Referrals to/from police and health sectors

Community awareness-raising and stigma reduction

Source (UN, 2006)

2.0. Literature Review

USAID affirms that the empowerment of women is central to the realization of gender equality. Here and throughout this policy, this includes women and girls in all their diversity as well as women and girls of every age, caste, disability, race or ethnic origin, religion, or belief. Women and girls across the globe are disproportionately affected by restrictive gender norms and other structural barriers and yet, nations, communities, and families are more secure and prosperous when all women can participate equally in all aspects of life and with the ability and agency to achieve their full potential. The full participation and leadership of women and girls in families, communities, economies, and civic and political domains results in processes and institutions that are more resilient and effective. Moreover, increasing women's and girls' education, access to resources, and freedom from violence enables them to meet their own aspirations and improves the health, well-being, and economic potential of the next generation (USAID, 2019).

According to World Bank Group (2019) addressing the restrictions faced by women-

Paper-ID: CFP/4678/2023

owned and -led formal and informal businesses and tackling the gender norms and power imbalances in household-level decision-making can improve the growth potential and profitability of their businesses. Likewise, evidence suggests that applying transformative interventions that engage men and boys, affect gender roles and norms, and address gender-based discrimination in policies and practices in agriculture can yield gender equality outcomes alongside increased food security and economic well-being for both women and men. Empowering women and engaging men in childcare can improve diets. hygiene, and use of nutrition services, contributing to a well-nourished population. As women's incomes rise and they have greater control over expenditures, child nutrition improves through better diets and health care. Women's empowerment, specifically their involvement with agricultural production and income decisions, is positively correlated with exclusive breastfeeding of children younger than six months (one of the most effective ways to ensure a minimum adequate diet), positively affecting child health and survival. Workplace support for breastfeeding is necessary when facilitating off-farm employment for women (CARE, 2021).

Fires (2014) stressed that police officers are often the first responders to GBV. Police are vital actors in addressing GBV, as they are often the necessary link between victimization and bringing allegations forward to the judicial system. Up-todate training for police officers, which is both culturally and gender-sensitive, is essential to ensuring proper interactions with survivors/victims and the children of and survivors/victims. accurate unbiased reporting, and the completion of fulsome investigations regarding allegations of GBV. Police should employ a service and protection/response culture, putting the needs of survivors/victims and the community first. An action that could help is establishing units comprising policies officers who are specifically trained to prevent and respond to GBV cases. Such units could also form partnerships with other key social services providers in order to foster more prompt and holistic interventions during GBV cases. From 2009 to 2013, this practice was used in Calgary, Canada where a Domestic Conflict Response Team was established, which consisted of a partnership between the police service and different community agencies.

In Africa. Gender-based violence undermines the health, dignity, security and autonomy of its victims, yet it remains shrouded in a culture of silence. Victims of violence can suffer sexual and reproductive health consequences, including forced unwanted pregnancies. and unsafe abortions, traumatic fistula, sexually transmitted infections including HIV, and even death. UNFPA is one of the UN's lead agencies working to further gender equality and women's empowerment, and to address the physical and emotional consequences of gender-based violence. UNFPA's programmes psychosocial offer assistance, medical treatment and rape kits to survivors, and promote the right of all women and girls to live free of violence and abuse. GBV is wide spread in Uganda and it affects all people irrespective of their social, economic and political status. It occurs in families, communities, workplaces and institutions. For example, the Uganda Demographic and Health Survey (UDHS) 2011 indicate that 56% of women aged between 15 and 49 years in Uganda have experienced physical violence at some point in life, 28% of women in the same age group have experienced sexual violence, compared to 9% of men. GBV is critical, it has devastating effects and high prevalence of social problems such as social exclusion, psychological distress mental and anxiety disorders, spread of HIV and STD

The International Journal of Multi-Disciplinary Research ISSN: 3471-7102, ISBN: 978-9982-70-318-5

infections, unwanted pregnancies and the trauma experienced by victims, it has a direct negative impact on the dignity of victims and productivity in general (World Bank Group, 2015).

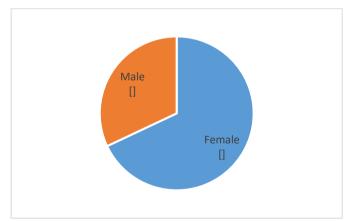
3.0 RESEARCH METHODOLOGY

The research design used in this research was a descriptive case study and a sample size of 100 participants was chosen which included 80 GBV survivors, 10 police officers under victim support unit and 10 staff from the department of social work under the Ministry of Community Development and Social Services (MCDSS).

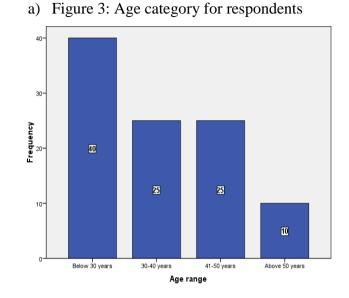
The participants were picked purposively and data was collected using questionnaires and interview guide. The data was analyzed using Statistical Package for Social Scientists (SPSS) version 20.

4.0 RESULTS/FINDINGS 4.1 Presentation of Findings

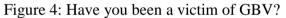
Figure 2. Gender for participants

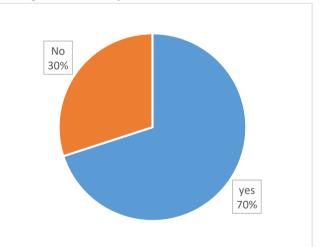


The figure above shows that data collected from respondents comprised 68% females and 32% males. The information presented shows that majority of respondents were females.



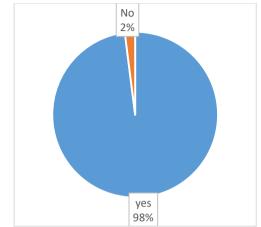
Data gathered from respondents shows that 40% participants of respondents were below 30 years, 25% were aged between 30-40 years, 24% were aged between 41-50 years and 11% were above 50 years.





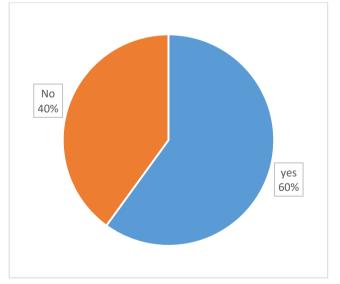
With regards to participants having been victims of GBV, 70% indicated that they have been victims before while 30% said they haven't been victims of GBV.

Figure 5: Has any of your relatives been a victim of GBV?

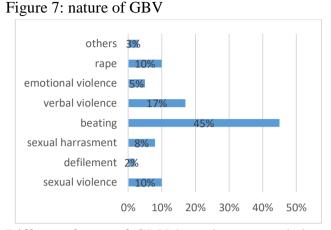


When asked about having family members who have been victims of GBV, 98% affirmed that they have relatives who have been victims of GBV while 2% denied. This shows that most people experience GBV but few ones share their experience with families.

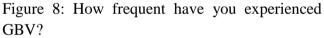
Figure 6: Reporting the GBV case to the police

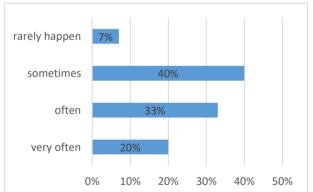


Most of the GBV cases are not reported to the victim support Unit due to various reasons and when asked about reporting cases to the police, 60% stated that they have reported the GBV cases to the police while 40% did not report as shown in the above figure.

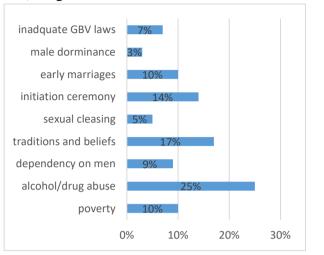


Different forms of GBV have been recorded and among the common ones experienced by respondents include Sexual violence as indicated by 10%, sexual harassment as said by 8%, those who experienced beating were the majority representing 45%, 2% said they have experienced defilement while 17% said verbal violence and 5% mentioned emotional violence. Other forms of GBV are rape experienced by 10% while 3% indicated that they experience other forms of violence.





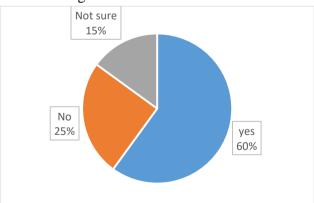
When asked about how often the GBV cases are experienced, 20% indicated that they occur very often, 33% said often while 40% said GBV cases are experienced sometimes while 7% said they rarely occur. This response shows that most GBV cases are rarely reported to the police as well as to the family members.



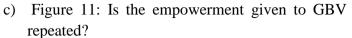
b) Figure 9: Causes of GBV

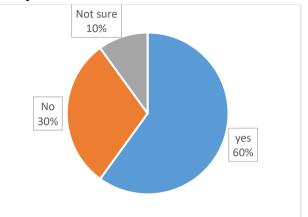
Concerning the causes of GBV, 10% said poverty, 25% indicated that alcohol/drug abuse, 9% indicated that economic dependency on men causes GBV, 17% said traditional and beliefs, 5% stated that sexual cleansing is among the causes, 14% indicated that initiation ceremonies, 10% said early marriages cause GBV while 3% said it is as result of male dominance and the rest 7% said inadequate GBV laws

Figure 10: Are you aware of any empowerment from the government?



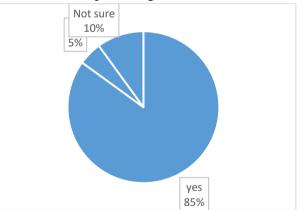
When asked if the GBV victims are aware of the government empowerment given to GBV survivors, 60% indicated that they are aware while 25% said they are not aware and the rest 15% indicated that they were not sure about the availability of the empowerment.





Regarding the empowerment given to GBV survivors being repeated, 60% said the empowerment is repeated sometimes while 30% said it is once off kind of empowerment and the rest 10% were not sure whether the empowerment is repeated or not.

Figure 12: Do the staff make follow ups on the GBV victims after empowering them?



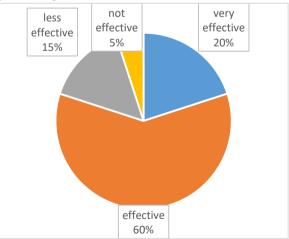
With regards to staff making a follow up once the empowerment is given, 85% said they do make follow ups to see the progress while 5% indicated that no follow ups are made and the rest 10% said they were not sure if they make follow ups.

Table 1: Nature of empowerment is available forGBV survivors

Variables	Percentage
provide employment to some	12%
survivors	
emotional and spiritual	17%
counselling	
provide shelter to the survivors	10%
provision of food	20%
provision of education to those	13%
survivors who still have a	
chance to get educated	
emotional and spiritual	8%
support.	

With regards to the type of empowerments given to GBV victims, 20% said they provide employment to some survivors, 12% indicated that they offer trainings in entrepreneurship, 17% said emotional and spiritual counselling, 10% indicated that they provide shelter to the survivors, 20% indicated that provision of food while 13% mentioned provision of education to those survivors who still have a chance to get educated and the rest 8% mentioned emotional and spiritual support.

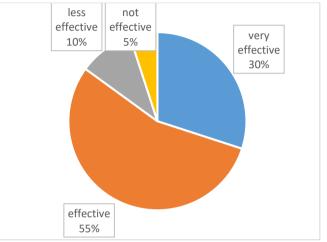
Figure 13: Effectiveness of the policy in empowering GBV survivors



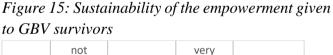
Regarding the effectiveness of the empowerment policy in enhancing financial inclusion for GBV survivors, 60% said the policy is effective, 20% said it is very effective while 15% said it is less effective

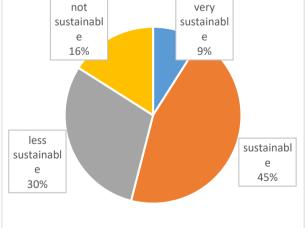
and the rest 5% said it is not effective. This finding confirms that the policy is effective the only challenge is implementation of policy.

Figure 14: Effectiveness of the empowerment policy in cushioning the impact of GBV



With regards to the effectiveness of the empowerment policy in cushioning the impact of GBV, 55% said the policy is effective, 30% said it is very effective while 10% said it is less effective and the rest 5% said it is not effective. This finding confirms that the policy is effective in cushioning the impact of GBV.





On the sustainability of the empowerment given to GBV survivors, 45% said the empowerment is sustainable, 30% said it is less sustainable 9% said

it is very sustainable and the rest 16% said it is not sustainable.

Variables	Percentage
self-isolation	12%
leads to depression	15%
it promotes suicide	9%
broken homes/families	18%
it leads to disability	18%
Leads to death of the victim	20%

Table 2: Impact of GBV on victims

GBV has great impact on victims and survivors among the common noticeable ones are: selfisolation as indicated by 12% of total participants, 15% said it leads to depression, 9% indicated that it promotes suicide, 18% mentioned having broken homes/families while 18% said it leads to disability and the rest 28% mentioned death.

Table 3: Challenges	associated with GBV
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Variables	Percentage
most cases of GBV are not reported	20%
to the police	
inadquate laws prevent some	10%
victms from pursuing the case to	
the later	
traditions and beliefs have	25%
influenced the way GBV cases are	
handled	
some staff demand for money to	12%
pursue the GBV case	
interventions from family	13%
members discourage the victim to	
seek justice	
corruption has been on of the	20%
obtastacles for GBV related crimes	

A number of challenges are faced by both officers and GBV victims, 20% said most cases of GBV are not reported to the police, 10% indicated that inadquate laws prevent some victims from pursuing the case to the later, 25%

said traditions and beliefs have influenced the way GBV cases are handled, 12% indicated that some staff demand for money to pursue the GBV case while 13% said interventions from family members discourage the victim to seek justice and the rest representing 20% said corruption has been one of the obtastacles for GBV related crimes.

Table 4: Means of enhancing the empowerment policy

there is need to sensitize the general	30%
public especially in rural areas on	
issues of GBV	
there is need to increase funding	14%
towards GBV empwerment	
working with rural authorities	20%
providing life time skills to	25%
survivors	
enforcing GBV laws	11%
e	

A number of measures were proposed which may help enhance the effectiveness of the GBV empowerment policy, 30% of the respondents said there is need to sensitize the general public especially in rural areas on issues of GBV, 14% indicated that there is need to increase funding towards GBV empowerment, 20% said working with rural authorities would help while 25% indicated that providing life time skills to survivors and the rest 11% said enforcing GBV laws.

4.2 Discussion

The study revealed that the empowerment policy is effective in cushioning the impact of GBV, this is because the type of empowerment extended to GBV survivors sustain them and their families. The findings further revealed that the empowerment given is sustainable as it can be seen from those who have benefited before. In this study 55% of total participants said the policy is effective, 30% said it is very effective while 10% said it is less effective and the rest 5% said it is not effective. This finding confirms that the policy is effective in cushioning the impact of GBV. This shows that majority of the respondent confirmed that the policy is effective. These results were supported by other researchers. The study by Ellsberg et al., (2015) revealed that economic interventions for women- there is a rigorous body of evidence about how combining small group economic and social empowerment interventions for women are effective in reducing women's experience of GBV.

The study conducted by USAID (2020) when you empower someone, you help them feel more in control of their life, you literally give them power. Targeting individuals or groups of individuals based on their gender through any acts that result in, or are likely to result in, physical, sexual or psychological harm is what is known as genderbased violence.

Gender-based violence survivors are given different empowerment to help them cushion the impact which comes with being a victim of GBV. With regards the type of empowerments given to GBV victims, the study revealed that GBV survivors are empowered through the following means: providing them with employment, offering trainings in entrepreneurship, emotional and spiritual counselling, legal support during court sessions, providing shelter to the survivors, provision of food and education to those survivors who still have a chance to get educated.

The study by Ellsberg et al., (2015) revealed that in 2016, 86 cases were supported and those survivors are now provided with productive skills to stand on their own feet. Most importantly and beyond providing them with skills to be productive, one of the non-governmental organizations that provides legal aid services represented those 86 cases before different stages in court, which would have been impossible with the previous means of those survivors.

There are quite a number of factors that lead to GBV and these come with great impact on victims. Concerning the causes of GBV, 10% said poverty, 25% indicated that alcohol/drug abuse, 9% indicated that economic dependency on men causes GBV, 17% said traditional and beliefs, 5% stated that sexual cleansing is among the causes, 14% indicated that initiation ceremonies, 10% said early marriages cause GBV while 3% said it is as result of male dominance and the rest 7% said inadequate GBV laws. It is clear that various factors lead to GBV in homes as well as community.

The study revealed that GBV leads to death as seen from reports emoting from different parts of the country where GBV causes death of the victim, it increases the chances of one being depressed, being disables and breaking of families among others

According to Fries (2015) there is a strong connection between gender-based violence against women and a lack of equity in the economic, sociocultural and political spheres; as a consequence, initiatives in this field must be of an integrated nature, should include complementary incomegeneration. housing and vocational training programmes for women, should and be accompanied by the adoption of policy measures concerning health, recreation and social and political participation.

4.3 Conclusion

The study revealed that the empowerment policy is effective in cushioning the impact of GBV, this because the type of empowerment extended to GBV survivors sustain them and their families. The findings further revealed that the empowerment given is sustainable as it can be seen from those who have benefited before. Gender-based violence survivors are given different empowerments to help them cushion the impact which comes with being a victim of GBV. With regards the type of empowerments given to GBV victims, the study revealed that GBV survivors are empowered through the following means: providing them with employment, offering trainings in entrepreneurship, emotional and spiritual counselling, legal support during court sessions, providing shelter to the survivors, provision of food and education to those survivors who still have a chance to get educated. Finally, the study revealed that GBV leads to death as seen from reports emoting from different parts of the country where GBV causes death of the victim, it increases the chances of one being depressed, being disables and breaking of families among others.

5.0 Acknowledgment

Glory and honour be to the almighty God for His mercy and blessings in whom I place my trust and he made this research possible. Special appreciation goes to my supervisor Mr. Siwila Davy, though my words are not enough, allow me to simply say thank you for your great ideas that have nurtured this paper. Your relentless effort has led to the completion of this study. Being under your supervision was a rare opportunity. Many thanks goes to the Information and Communications University (ICU) staff who imparted Knowledge in me. To my Parents, thank you for your financial support, I will always be indebted to you.

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