**Combating GBV in Morocco**

1. **Objective and relevance (the world around us)**

This project addresses the problem of Gender-Based Violence (GBV) harming women and girls in Morocco. GBV is the most notable human rights violation globally,[[1]](#footnote-1) deeply rooted in and the most extreme expression of unequal gendered power dynamics. GBV cuts across boundaries of class, culture, religion, age and sexual orientation. All genders experience GBV but most victims are women and girls. Across a lifetime, 1 in 3 women worldwide are subjected to physical or sexual violence by an intimate partner or sexual violence by a non-partner. A number that has remained unchanged over the past decade and with increasing rates during the covid-19 pandemic.[[2]](#footnote-2) GBV is a major obstacle for the achievement of gender justice, posing a serious threat to democratic development and public health, and is a critical barrier to achieving sustainable development and peace: If women and girls are not safe, they cannot be full citizens and participate in the development of society.

GBV in Morocco harms 57%[[3]](#footnote-3) of the female population. The corona pandemic increased levels of GBV during lockdown as well as the unpaid care burden, harming women. Women were also disproportionately affected by the crisis in socio-economic terms and continue to be so, due to their overrepresentation in the informal sector, without access to social security. On top of this, the state-provided protection mechanisms towards women survivors and victims of GBV (WVGBV) are of a very poor quality, and the few state-run shelters that do exist lack a gender sensitive and rights-based approach, which can lead to double victimisation of the women seeking protection. Alongside these tendencies, LDDF-Injad and other feminist organisaitons experience decreasing funding opportunities for protection of WVGBV, despite the increasing focus on combating GBV in the international (donor) community.

The intervention will draw on LDDF-Injad’s vast expertise in providing quality services for WVGBV within the areas of prevention, protection, and prosecution mechanisms through their shelter and two counselling centres in the Casablanca-Settat region. The project will also include LDDF-Injad’s network of 26 civil society organisations (CSOs), that provide counselling and protection for WVGBV and carry out advocacy for women's right to a life free from violence and discrimination. The Women’s Council Denmark (WCD) will provide expertise from Danish shelters’ working approaches and legal practises as well as international legal frameworks, best practises, fundraising and advocate for feminsit funding.

**Development objective:** Contribute to strengthening the access of women and girl’s victims and survivors of gender-based violence (WVGBV) to their rights and to a life free from violence

**Immediate objectives:**

1. Two counselling centres and one women’s shelter in the Casablanca-Settat region are best practice models, providing quality services for WVGBV within the areas of prevention, protection and prosecution mechanisms and following a rights-based and systemic approach so that beneficiaries can fully enjoy their rights.
2. LDDF-Injad and their network of Women’s CSOs have been strengthened to advocate for the implementation of Law 103-13 specifically focusing on an integrated model of care for WVGBV on local and regional levels in the Casablanca-Settat region.
3. LDDF-Injad have strengthened their collaboration and influence with relevant duty bearers in charge of providing an integrated model of care for WVGBV in the Casablanca-Settat region.

The project will operate in 3 complementary levels: **1)** LDDF-Injad will provide protection and counselling services for WVGBV, especially those in precarious socio-economic situations, to be able to break the cycle of violence. This protection mechanism is carried out by one shelter called Tilila and two counselling centres in the Casablanca-Settat region run by LDDf-Injad. These three entities will also function as documentation sites and best practice models that showcase how to provide protection for WVGBV. **2)** The project will strengthen a network of 26 women’s CSOs in the Casablanca-Settat region. They will be equipped with the means to strengthen, unify, and professionalise their advocacy work to combat GBV and promote the implementation of the Moroccan law against GBV (Law 103-13, which will be elaborated below), specifically focusing on ensuring an integrated model of care for WVGBV. And they will acquire working methods and tools related to enhancing the socio-economic care for WVGBV. **3)** LDDF-Injad will strengthen its partnerships and influence with relevant state, regional and local actors in the care of WVGBV. The primary focus will be to ensure an integrated model of care with a chain of accessible quality services respecting the dignity of WVGBV. As well as to promote women’s economic independence and socio-economic rights.

An integrated model of care is a model where all relevant institutions in charge of assisting WVGBV coordinate and collaborate, so that no woman is left out or misinformed about her rights. Such a model requires coordination with CSOs and public service providers, so that all institutions are aware of what services to refer WVGBV to, depending on their individual needs. It involves institutions such as specialised Cells of support for WVGBV at the level of courts, hospitals, and the police as well as the sectors-joint committees at national, regional, and local levels established to counter GBV, as mentioned in law 103-13. Also, institutions and initiatives in charge of providing social security, such as “l'Entraide Nationale” (a national welfare institution, providing services and support for marginalised citizens) and job promoting initiatives are relevant in an integrated model of care, as they provide the key to sustainable protection of WVGBV, in the shape of economic independence. Last, since many women’s CSOs are key players in service provision and protection of WVGBV, there is also a need to ensure their inclusion and influence on the development of an integrated model of care. One of the most important factors to ensuring an effective integrated model of care is the adoption of a gender sensitive approach to the work of all entities in the care chain, to not reproduce unequal gendered power structures, which cause double victimisation. This is particularly the area of expertise of womens CSOs such as LDDF-Injad and the participating network in this project. This project focuses on the Casablanca-Settat region, where LDDF-Injad already have built a network and relations with duty bearers and other CSOs.

* **Describe the context of the intervention:**

The past 20 years, Morocco has taken several steps to bring the country in line with international gender equality standards. The revision of the Constitution in 2011 introduced several rights, including gender equality, parity, and the fight against all forms of discrimination. A new family law from 2004 enhancing women’s rights and a partial lift of reservations on CEDAW[[4]](#footnote-4) in 2011. More recent reforms include the 2017 adoption of the law on domestic workers (many of whom are women), and the 2018 adoption of Law 103-13 on GBV. Despite these legal improvements, several provisions continue to block for gender equality and the implementation of the laws is lagging behind, making realities on the ground less promising. Morocco ranks 143 out of 153 countries in the Global Gender Gap Index. Only 21 % of women are (formally) working, twice as many are illiterate (41,9%), 46,9% work in the agricultural sector, yet only 1% of women own agricultural land. The 2017 Universal Periodic Review of Morocco saw that 61 out of 244 recommendations addressed gender equality issues. Several them were rejected, including on equal inheritance, banning of polygamy and of child marriage, and LGBTIQ+ rights on the grounds that too quick changes of the family law would threaten the social fabric.

**Women’s economic and political rights and inclusion**

The Moroccan economy has performed relatively well in the past two decades. Economic and social strides have been made in poverty reduction, access to education and health care. However, these positive developments did not benefit all geographical areas and population groups, as there are important regional and gender disparities as well as large wealth and income inequality. While the growth rates in Morocco had already been losing momentum prior to the covid-19 pandemic, the latter has pushed the Moroccan economy into recession. The unemployment rate increased from 9.2% in 2019 to 11.9% in 2020 and has disproportionately affected women and youth. In terms of participation of women and minorities in the political arena, there are no limitations in the law. In the 2016 elections, a record number of women were elected. However, these numbers were not matched by high-level positions such as government ministers. As regards the distribution of economic resources, Moroccan women have a very low labour market participation (21% formally working) and men are favoured in the law on inheritance. The pandemic has decreased women's economic participation further, due to their overrepresentation in informal and service sectors and without access to social security. Aware of the economic challenges, the Moroccan government is seeking to address them through a number of national development plans. The King has recently established a commission to identify a new development model pointing to employment generation as a top priority, which this project will make use of by advocating for WVGBV’s economic rights.

**GBV**

The results of the 2019 national survey by the Moroccan High Commission for Planning (HCP) show that among women aged 15 to 74, 57% have experienced at least one act of violence in the 12 months preceding the survey. The prevalence of GBV is 58% in urban areas and 55% in rural areas. Domestic violence, which includes violence in the marriage and in the family, reaches the rate of 52%. The rate of GBV has risen during the pandemic. A report carried out by LDDF-INJAD in 2020 showed that GBV increased during the lockdown by 31.6% compared to the same period of 2019, bearing in mind that the state of health emergency did not allow all women and girls to report the violence. Lockdowns and measures limiting people’s movement created a situation where women and girls found themselves even more under the control of their aggressors, and they had little or no opportunity to get help. On top of this, LDDF-Injad and their network of women's rights CSOs, have experienced a decrease in locally focused funding opportunities for protection of WVGBV. This is a testament to centralisation of funding to NGOs in the global north: Only 1 % of global aid for women’s rights benefits locally based feminist organisations in th global sluth[[5]](#footnote-5), and combined with a general decrease in funding for women’s rights, due to an increasing focus on corona and climate efforts by donors.

Despite these harsh conditions for WVGBV and Moroccan women’s CSOs as well as the low quality of state provided protection mechanisms there are windows of opportunity, which the project will embark on: ***1) Law 103-13 on violence against women:*** Morocco adopted this law in 2018, which is known as law 103-13. The law has received a fair amount of criticism from women’s- and human rights organisations, including LDDF-Injad, due to its limitations and weaknesses[[6]](#footnote-6). Despite these weaknesses, it is highly unlikely that the law will be amended anytime soon. Therefore, LDDF-Injad works for a proper implementation of those parts of the law that can have a positive influence on the lives of WVGBV. For example, the law provides an opportunity to influence local, regional, and national duty bearers in charge of supporting WVGBV. Such as the specialised Cells of support for WVGBV at the level of courts, hospitals and the police and sectors-joint committees at national, regional, and local levels, in charge of ensuring an integrated model of care for WVGBV. The law also points to protection measures such as shelters and social care institutions, which is LDDF-Injad’s area of expertise. ***2) Momentum in public debate:*** The increasing levels of GBV during lock-down in Morocco combined with LDDF-Injad and other women's CSOs’ awareness raising about this, has caused a shift in the public debate about GBV affecting women. For instance, several media houses have covered the gendered aspects of violence, and politicians have spoken out about this publicly, such as the minister of justice in Morocco. And in 2020, the Moroccan government launched a plan to eliminate GBV by 2030, which is probably not going to materialise, however it is a testament to a shift in public and political will to address the problem. ***3) Increased focus on socio-economic rights of women:*** There has also been an increasing focus on the importance of socio-economic rights of women and state driven initiatives to enhance women’s economic participation lately, such as the INTILAKA program, offering support and financing for private sector projects, with priority given to those lead by young people and women. The INDH (national initiative for human development), which finances women's economic project initiatives and the ANAPEC (national agency for the promotion of jobs and skills), which offers training and support to women entrepreneurs. And Morocco has also in recent years seen the relaxation of legal texts relating to the creation of cooperatives - a common business form for women. These are important steps on the road towards gender equality, and should be integrated into the model of care, to provide economic opportunities to WVGBV, so they can provide for themselves in a life away from the perpetrator.

**Fragility**

When GBV is not properly recognised and addressed as the human rights violation it is, by giving women access to exercise their rights, the context will always be fragile, and even war-like WVGBV. Therefore, PTSD is a common trait amongst the target group. Therefore, for the target group of this intervention the context is fragile. The violence they face for the most part happens in their homes - a place that should offer protection and peace but doesn’t. Furthermore, due to patriarchal structures and norms within the law and the support functions such as the police, doctors, and legal system, WVGBV are often met with further barriers to justice and double victimisation. They are recommended to go back home and solve the problem behind closed doors. In that sense, not recognising GBV as a human rights violation is a silent war on women. We therefore argue that this project operates in a fragile context: WVGBV need immediate ***protection*** such as shelters and counselling services, which this project offers in the first component. This is also the costliest part of this project because protection and shelter are more expensive than workshops, advocacy and capacity building activities. Also, there is need to build ***resilience*** to ensure the long term and sustainable protection of WVGBV, this is what this project’s second objective focuses on: support to ensure strong women’s rights CSOs as well as the proper implementation of law 103-13, specifically focusing on an integrated model of care for WVGBV. This requires close collaboration between relevant duty bearers, service providers and CSOs. Last, the project focuses on ***preventing*** GBV by ensuring that the problem is properly addressed by relevant state, regional and local duty bearers and second, by ensuring women’s economic inclusion in society and their socio-economic rights, which will ensure their sustainable independence from their aggressors. This is the focus of the third component in the project.

* **Describe how this intervention will strengthen civil society organising**

This intervention will make use of the knowledge and capacities within LDDF-Injad, women’s rights CSOs, the Tillila shelter and two counselling centres to inform and advocate for an integrated model of care for WVGBV in the Casablanca-Settat region. They represent and speak on behalf of women and girls in their respective communities and advocate for better protection mechanisms by the state, based on evidence and documentation from the shelter and counselling centres. They advocate for protection mechanisms that allow women to regain self-esteem, self-confidence and power over their body and life, and to be economically empowered, which is a necessary condition to break the cycle of violence. This will contribute to social justice through women’s and girl’s access to rights, decision-making, and resources. LDDF-Injad will also strengthen their existing partnerships with state/regional actors in the care of WVGBV. In particular with care cells at the level of courts, hospitals and the police, and sectors-joint committees at national, regional and local levels, in charge of ensuring an integrated model of care for WVGBV.

* **What climate- and environmental conditions do the partnership and/or the intervention need to respond to? And how have the partners responded to it?**

Women and girls in the global south are disproportionately impacted by the effects of climate change. They are more often poor, have less access to finance and information, and more frequently have domestic responsibilities, limiting their mobility. Women’s unequal participation in decision-making processes, especially regarding climate solutions, reinforce these inequalities and prevent women from fully contributing to addressing the climate crisis through policymaking.[[7]](#footnote-7) GBV is both a symptom of- and reinforcing unequal power structures that hinder women from taking part in decision making. Therefore, combating GBV contributes to dismantling these power structures, to ensure inclusive and people driven responses to the climate- ecological- and biodiversity crisis.

**The partnership/collaborators (our starting point)**

WCD and LDDF-Injad have been partners since 2013, and are currently implementing a project financed by DAPP, which focuses on combating GBV through outreach, advocacy and gender-education targeting youth. The project applied for, is an important complementary project, which focuses on sustainable protection of WVGBV. LDDF-INJAD is an important sparring partner for WCD in relation to their knowledge about GBV in an international context, and LDDF-INJAD has been involved in workshops and events at WCD's annual debate festival Talk Town. WCD has facilitated networks and contacts between LDDF-INJAD and other relevant Danish CSOs such as Danner and Landsorganisationen af Kvindekrisecentre. It is a partnership that continues to develop, since it is based on the work on a common cause; the fight for gender equality and against discrimination and GBV.

**The Women’s Council Denmark (WCD)**

Advocacy for women’s rights is at the core of WCD’s work, as well as coordinating and servicing the 48 member-organisations in dealing with the Danish government, Parliament, and international organisations such as the UN. The overall objective of WCD’s work is to strengthen women’s rights and influence in society, economic equality and combating GBV. WCD is a member of the European Women’s Lobby and hosts the Danish Observatory on GBV -a multisectoral unit gathering experiences and giving recommendations to decision-makers about GBV. WCD also produces shadow reports for international conventions and frameworks, such as CEDAW, UPR, SDGs and the Istanbul Convention. WCD has worked in North Africa for the past 10 years and has extensive experience from the region. WCD currently has projects in Morocco and in Egypt funded by DAPP and has previously worked with gender- and sexual education in Egypt funded by CISU. WCD has a large network among national and international actors working on GBV, e.g., as an active member of the European Observatory on Violence Against Women. WCD hosts the annual debate festival Talk Town[[8]](#footnote-8) where LDDF-INJAD and our other international partners have participated.

**LDDF-INJAD** is a network organisation composed of 10 counselling centres spread over 7 regions of Morocco, two of which are in Mohammedia and Casablanca, and a women’s shelter called Tilila also based in the Casablanca-Settat region. ***The Tilila shelter*** is the only shelter in the region, and the first shelter in Morocco specialised in receiving WVGBV using a right’s based and gender sensitive approach. Tilila has accommodated WVGBV since 2006 and it has 3 employees; two permanent staff that take care of the everyday routines in the shelter and one social worker in charge of assisting and supporting the women. The shelter has capacity to accommodate 8 women and 10 children for around two months. The Shelter provides psychological support for women and children as well as legal and social support. The shelter is currently encountering funding shortages, since their main donors ended their support in 2021 and it has been difficult to obtain new support from donors, due to corona and a general lack of funding for feminist organisations. This intervention will allow the shelter to re-stabilize its services, as a best practice model providing quality services to WVGBV. ***The two counselling centres*** called “Centres d’écoutes” specialise in counselling, legal assistance, referral, and accompaniment of WVGBV seeking protection. They have 1-2 persons employed each and make use of legal aid from known lawyers in their network, when needed. LDDF-INJAD has accumulated significant experience and expertise for more than 15 years in the care, documentation and protection of victims and survivors of GBV. They have a practical guide for the staff at the counselling centres and Tilila which constitutes a reference for work in counselling centres and shelters.

LDDF-INJAD engages in partnerships with different actors and stakeholders in the chain of care for victims of GBV at the regional and national level. In all regions of Morocco where LDDF-INJAD’s counselling centres are located, LDDF-INJAD has partnerships and coordinate with the actors of the chain of care for victims of GBV; the Cells of support for WVGBV at the level of the courts, the police and the hospitals and the reception structures under the national mutual aid as well as various actors from the civil society. Due to this experience, LDDF-INJAD has an intervention strategy based on an integral support model and a rights-based approach, involving all the actors in the care chain for victims and survivors of GBV. LDDF-INJAD has a socio-juridical form, data processing software, and a database for collecting and producing statistical data on GBV. LDDF-INJAD has developed working tools to offer quality services to women, to capitalise on the experience and to strengthen the advocacy for women's rights to be realised in society. They also have produced and distributed a policy paper for their proposition of an integrated model of care for WVGBV which has been shared and debated with the involved women’s rights CSOs in this intervention. As well as a policy paper on the accommodation of women victims of violence at the regional level and a field survey to identify the care centres in the same region. LDDF-INJAD also has extensive experience in the production of annual reports on GBV, in which it presents data from the cases of violence received each year at their shelter and counselling centres. The report is used as an advocacy tool and is presented at the International Day for the Elimination of Violence against Women the 25th of November each year. The period of lockdown and health emergency created a momentum for LDDF-INJAD to mobilise around the fight against GBV through targeting of the media, the state and other actors for the care of WVGBV. LDDF-INJAD has engaged in setting up a national hotline to help WVGBV during the lockdown and carried out online campaigns to promote gender equality in the household during the lockdown to make women’s unpaid care work recognised.[[9]](#footnote-9)

***Network of Women’s CSOs:*** LDDF-INJAD coordinates a network of women’s CSOs composed of 26 organisations called Femmes Solidaires. They are spread throughout the Moroccan territory and carry out work in the support and accompaniment of WVGBV. Approximately 8 members of the network are based in the Casablanca-Settat region. LDDF-INJAD has significant experiences in capacity building both internally and externally for the benefit of the member organisations of Femmes Solidaires, particularly in the partnership with the WCD with funds from the DAPP. During the past four years, LDDF-Injad's efforts with Femmes Solidaires have been focused on collecting data on GBV for evidence-based advocacy. They do important work of support to WVGBV, but they currently need to strengthen their skills in socio-economic care and coordinated advocacy work at local and regional levels.

***Roles and responsibilities***

The director of WCD has the overall responsibility of the project, including finances and reporting. The project manager at WCD is responsible for the management of the project, including coordination with LDDF-INJAD, communication about the project and elaboration of project documents, budgets, and reports. The finance officer at WCD is responsible for the financial administration of the project, including transfer of grants to LDDF-INJAD, travel reimbursements and audit of all projects and activities at WCD. **WCD payroll costs:** Besides administering the project and communicating with CISU, WCD will be a sparring partner throughout the project and draw on international expertise on how to address GBV. The director and project manager at WCD have extensive knowledge on the Istanbul Convention, CEDAW and ILOC190, shelter and counselling practises as well as collective advocacy and networking activities. This knowledge will inform our advice to LDDF-Injad at monthly meetings. Furthermore, WCD will also assist LDDF-Injad in raising funds for their work by researching gender funding mechanisms as well as advocating the Danish MFA to ensure better access to feminist funding. Last, WCD will coordinate the development of an event at Talk Town 2022 about GBV, feminist funding and/or feminist foreign policy in collaboration with LDDF-Injad.

LDDF-INJAD’s project coordinator will implement the project strategy and ensure that the project’s activities are implemented according to plan. She will be responsible for developing biannual reports and provide needed feedback and she will follow the project's tasks on a daily basis. The finance officer at LDDF-INJAD is responsible for the financial administration of the project, including payments, account handling, recording of transactions in the internal financial system, and preparing financial reports.

1. **Target groups, objectives, and expected results (our intervention)**

Primary target group:

***250 WVGBV:*** The primary target group of the intervention are the WVGBV that benefit from the Tilila shelter and/or the two counselling centres managed by LDDF-INJAD. These women are often victims of double violence; violence from their partners, but also violence linked to their situation of economic precariousness and poverty which hinders them from finding alternatives to the violence. According to the LDDF-INJAD’s annual report in 2018, more than 70% of the cases of married women are financially dependent on their husbands and their families in general. 33% of these women are illiterate. 63% of them are young, between 18 and 38 years old. They will benefit from the counselling and accommodation services based on a rights-based approach (activities 1-2). This will allow them to feel confident enough to break the silence and begin the difficult journey out of the cycle of violence.

***30 professionals from Women’s rights CSOs:*** These are the team of professionals employed at Tilila (3) and the two counselling centres (3), as well as members of the network of women’s CSOs (8-26) and/or from other CSOs in LDDF-INJAD’s network in the Casablanca-Settat region (approximately 10). They have different backgrounds, such as counsellors, social workers, legal assistants, psychologists, project managers and policy/advocacy advisors. They will benefit from coordination meetings and workshops to improve their working methods and coordinate documentation and advocacy (activities 3, 4 and 5). These CSOs do important work of support and accompaniment of WVGBV, but they currently need to strengthen their skills in socio-economic care and coordinated advocacy work at local and regional levels. This intervention, therefore, will focus on strengthening their capacity on the Socio-economic care of WVGBV with an intersectional gender approach and advocacy techniques.

***20-30 people representing state actors and CSOs involved in an integrated model of care*** (e.g. representatives of the commissions and care units at the level of the courts of the Casablanca-Settat region and at the level of the police and health services; national mutual aid representatives; representatives of the regional council of Casablanca -Settat and of the municipality of Mohammadia and the town hall of Casablanca; representative of ANAPEC, INDH and l’Entraide Nationale. They will participate in a seminar about on the care and socio-economic empowerment of WVGBV in the region of Casablanca-Settat on the international campaign “16 Days of activism to fight violence against women” (activity 6). They will also be reached through follow up meetings with LDDF-Injad and/or members of the network of women's CSOs (activity 7).

Secondary target group: Are the relatives and close friends of women and girls supported by the shelter, counseling centers and the network of womens CSOs that will be more aware of gender-based violence and discrimination and will raise awareness in their community and encourage other women to refuse and report violence. The children of women victims of violence are also indirect beneficiaries, because strengthening their mothers and denouncing violence allows them to live free from violence.

* **Describe the objectives and expected results.**

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| **Development objective:** Contribute to strengthening the access of women and girl’s victims and survivors of gender-based violence (WVGBV) to their rights and a life free from violence |
| **Objectives** | **Expected results** | **Activities** |
| **1)** Two counselling centres and one women’s shelter in the Casablanca-Settat region are best practice models, providing quality services for WVGBV within the areas of prevention, protection and prosecution mechanisms and following a rights-based and systemic approach so that beneficiaries can fully enjoy their rights. | **R1-IO1:** 250 WVGBV are protected and accompanied and regain their confidence and self-esteem.**R2-IO1:** The Tilila shelter is a reference and best practice model for the protection of WVGBV.**R3-IO1:** The 2 counselling centres provide unified prevention, protection, and prosecution services based on a rights-based approach. | **Activity 1**:Protection and care services for WVGBV offered by Tilila shelter.**Activity 2**: Organisation of permanent counselling and legal orientation for WVGBV within the 2 counselling centres**Activity 3: 4x** Follow-up workshops and analysis of practises for the team of professionals at counselling centres and Tilila. |
| **2)** LDDF-Injad and their network of Women’s CSOs have been strengthened to advocate for the implementation of Law 103-13 specifically focusing on an integrated model of care for WVGBV on local and regional levels in the Casablanca-Settat region. | **R1-IO2:** The 2 counselling centres and Tilila provide LDDF-Injad and the network of women’s CSOs with evidence-based knowledge of gaps in the law 103-13 and in the current care model for WVGBV.**R2-IO2:** A unified understanding amongst LDDF-Injad and network of women’s CSOs, on how to ensure an integrated model of care for WVGBV at regional and local levels.**R3-IO2:** Network of women’s CSOs have access to data, resources, awareness-raising, and advocacy tools in the fight against GBV and discrimination.**R4-IO2:** LDDF-INJAD's and their network of women’s CSOs are strengthened in terms of care and socio-economic rights and inclusion of WVGBV | **Activity 4:** Meeting for sharing and upgrading (1 day) for the team of professionals at counselling centres and Tilila and LDDF-INJAD as well as representatives from women’s CSOs**Activity 5:** 2x2-day thematic and technical trainings for women’s CSO’s and LDDF Injad on Socio-economic inclusion of WVGBV and advocacy techniques |
| **3)** LDDF-Injad have strengthened their collaboration and influence with relevant duty bearers in charge of providing an integrated model of care for WVGBV in the Casablanca-Settat region. | **R1 IO3:** LDDF-Injad advises Cells of support for WVGBV and sector joint committees at local, regional, and national level on how to ensure an integrated model of care.**R2 IO3:** LDDF-Injad advises key duty bearers to adopt a gendered approach to social security and labour market participation initiatives. | **Activity 6:** Seminar on the care and socio-economic empowerment of WVGBV (half-day)**Activity 7:** Follow up meetings with relevant duty bearers in charge of social service provision and in providing an integrated model of care for WVGBV |

* **What is the strategy of the intervention?**

The intervention will contribute to strengthening the access of WVGBV to their rights and a life free from violence by operating in3 complementary levels: 1) Strategic service delivery, in the shape of counselling, shelter and protection of WVGBV, 2) Capacity strengthening of network of women’s CSOs and 3) advocacy for implementation of law 103-13 with a specific focus on an integrated model of care and WVGBV’s economic participation and socio-economic rights. The components will be described below:

**1. Strategic service delivery:** The project will provide protection, counselling, and shelter for WVGBV by Tilila and two counselling centres in the Casablanca-Settat region run by LDDF-Injad (Activity 1-2). The target group is WVGBV and their children, especially those in precarious socio-economic situations who find themselves alone and without support or financial resources. Tilila and the two counselling centres will also function as best practice models that showcase how to provide quality services for WVGBV (activity 3). And they will be important documentation sites of gaps in law 103-13 and in the social service provision as they have direct contact with the women affected (activities 3 and 4). Thereby, these services provide evidence, best practice, and documentation to be used in the other components of the intervention.

**2. Capacity strengthening of network of women’s CSOs:** The network will be equipped with the means to strengthen, unify, and professionalise their work in the fight against GBV in coordination with LDDF-Injad, Tilila and the two counselling centres (activity 3 and 4). The intervention will also strengthen their strategies in regional and local advocacy for quality services for WVGBV through an integrated model of care with a chain of accessible quality services respecting the dignity of women and girls. A care that also allows women to regain self-esteem, self-confidence and power over their body and life, and to be economically empowered, which is a necessary condition to break the cycle of violence (activity 5).

**3. Advocacy:** LDDF-Injad will strengthen its partnerships and influence with relevant state actors in the care of WVGBV. Focus will be on the specialised Cells of support for WVGBV at the level of courts, hospitals and the police, and the sectors-joint committees at national, regional, and local levels that are specifically mentioned in the law 103-13 to support WVGBV[[10]](#footnote-10). LDDF-Injad already has contacts within some courts and specialised Cells of support in the region, and they have also participated in advisory meetings at the national sector-joint committee. They will embark on these achievements within this project and promote their policy paper on an integrated model of care as well as their documentation from Tilila and the two counselling centres (activity 6 and 7). They will also focus on duty bearers outside of the 103-13 legal framework - particularly those in charge of women’s economic participation and socio-economic services, such as the INTILAKA, INDH, ANAPEC and l’Entraide Nationale (Activity 6 and 7). The focus will be to ensure an integrated model of care with a chain of accessible quality services respecting the dignity of women and girls. This work will draw on documentation, best practises, and knowledge from Tilila and the two counselling centres run by LDDF-INJAD (level 1) and on knowledge sharing by the network of women’s CSO’s in the region (level 2).

* **What are the plans for systematising experiences along the way and at the end of the intervention?**

The activities in the project are interrelated through practice- and evidence-based documentation, which is compiled and systematised along the way. LDDF-Injad and the network of CSOs already produce annual documentation reports based on their encounters with their users (WVGBV), and they will continue to do so. For example, the TiIlila shelter and the two counselling centres document the cases they encounter, the needs of the women and the gaps in the current model of care and law 103-13. This information feeds into the training and capacity building of women’s rights CSO’s so they can use it in their individual and collective work in their respective communities. The documentation from Tilila and the counselling centres will also feed into the advocacy work towards relevant duty bearers, for instance at the seminar and follow up meetings, where it will be presented as part of evidence-based advocacy for an integrated model of care, socio-economic care as well as a gendered approach to social service provision.

WCD will be sparring partner to LDDF-Injad throughout the project and will assist in monitoring the progress. LDDF-Injad prepares biannual reports, and we will have monthly status meetings on Zoom. We have also planned for a monitoring visit to Morocco, where WCD will participate in activity 6 and collectively reflect on the results reached to date and assist in fundraising for future projects and collaboration.

1. **Intervention-related information work in Denmark**

***Purpose:*** The information work in Denmark will feed into the international program at WCD’s annual festival Talk Town in May 2022. The festival is a debate festival about gender and feminism hosted by WCD and the Talk Town organisation.[[11]](#footnote-11) We have introduced an international program to complement the Danish focused program, which will have talks about feminist currents from the global south and developed in collaboration with Danish NGO’s as well as women’s rights- and feminist CSOs from countries such as Kenya, South Africa, Egypt as well as Morocco. The budget will be used for salaries in Denmark to coordinate these actors and ensure representation from the global south ***Target Group:*** We expect the audience to be around 2500 persons as well as an online audience of around 10.000 persons from Denmark and abroad, and we also include students from Roskilde Festival Højskole and Vallekilde højskole in the execution and planning of the festival. This target group can be described as relatively young, curious, and politically aware. Some identify as feminist’s others are curious to learn more about it. ***Means of communication:*** We primarily use our online channels to advertise for the festival (Facebook, Instagram, Twitter) and we will also use these as channels to stream online events - of which many are within the international program. We also plan to produce posters and press releases to advertise the festival.

1. <https://eige.europa.eu/gender-based-violence/what-is-gender-based-violence> [↑](#footnote-ref-1)
2. <https://www.who.int/news/item/09-03-2021-devastatingly-pervasive-1-in-3-women-globally-experience-violence> [↑](#footnote-ref-2)
3. <https://www.hcp.ma/Communique-du-Haut-Commissariat-au-Plan-a-l-occasion-de-la-campagne-nationale-et-internationale-de-mobilisation-pour-l_a2411.html> [↑](#footnote-ref-3)
4. Convention on the Elimination of All Forms of Discrimination against Women [↑](#footnote-ref-4)
5. <https://www.theguardian.com/global-development/2019/jul/02/gender-equality-support-1bn-boost-how-to-spend-it> [↑](#footnote-ref-5)
6. The law does not include all kinds of GBV, such as marital rape, which upholds a harmful divide between crimes in the public and in private - with the latter being viewed as less or not criminal. It also fails to ensure the provision of proper protection of WVGBV though state financed shelters as well as appropriate response mechanisms such as, investigation, and prosecution mechanisms. [↑](#footnote-ref-6)
7. [Climate\_FromWordToAction-final.pdf (actalliance.org)](https://actalliance.org/wp-content/uploads/2021/11/Climate_FromWordToAction-final.pdf) [↑](#footnote-ref-7)
8. [Talk Town // Ligestilling, køn og feminisme](https://www.talktown.dk/) [↑](#footnote-ref-8)
9. [Corona-krisen understreger værdien af ligestillingsarbejdet i MENA - DAPP](https://www.dapp.dk/ligestilling/corona-krisen-understreger-vaerdien-af-ligestillingsarbejdet-i-mena/) [↑](#footnote-ref-9)
10. Article 9: To support women victims of violence, cells and sectors-joint committees shall be established in accordance with the provisions of this part. Article 10: Cells of support for women victims of violence shall be established within courts of first instance, courts of appeal, central and decentralised services of the sectors in charge of justice, health, youth and women, the General Directorate of National Security and within the High Command of Royal Gendarmerie; Such cells shall provide services for women victims of violence such as reception, listening, support, orientation and accompaniment; The established cells inside courts of appeal or courts of first instance shall consist of a deputy crown prosecutor, a judge in charge of juvenile affairs and a social assistant, in addition to the administration representatives; <https://www.moroccoworldnews.com/2018/04/244641/unenglish-translation-of-moroccos-law-103-13-on-elimination-of-violence-against-women> [↑](#footnote-ref-10)
11. [Talk Town // Ligestilling, køn og feminisme](https://www.talktown.dk/) [↑](#footnote-ref-11)