
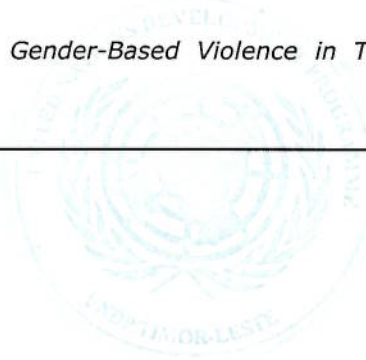




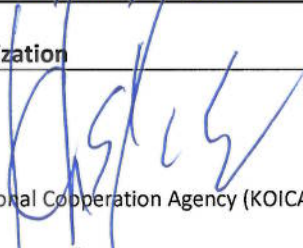





| STANDARD JOINT PROGRAMME DOCUMENT | |
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| Country: Timor-Leste | |
| Programme Title: <i>Hamutuk ba Igualdade (Together for Equality: Preventing and Responding to Gender-Based Violence in Timor-Leste)</i> | |
| Joint Programme Outcome(s): <ol style="list-style-type: none"> 1. Transformed attitudes, behaviours and social norms promoted at individual and inter-personal levels to prevent GBV 1. Improved access to essential public services (health, justice and social services) for women and girls, among other survivors of violence, informed by evidence-based responses to GBV. 2. Enhanced legislation and policy environment for eliminating violence against women and girls and other forms of gender discrimination, is in place and translated into action | |
| Linked to UNSCDF 2021-2025 Result 5: <i>By 2025, the people of Timor-Leste, especially the most excluded are empowered to claim their rights, including freedom from violence, through accessible and accountable and gender responsive governance systems, institutions and services at national and subnational levels</i> | |
| Programme Duration: 48 Months Anticipated start/end dates: <u>23 November 2020- 22 November 2024</u> Fund Management Option(s): <u>Pass-through</u> Administrative Agent: <u>UN Women</u> | Total estimated budget*: <u>\$ 7,718,892</u> Out of which: 1. Funded Budget: <u>\$ 7,718,892</u> 2. Unfunded budget: NA * Total estimated budget includes both programme costs and indirect support costs |
| Sources of funded budget: \$ 7,718,892 | |
| Government: NA | |
| UN Org (UN Women): \$ 200,000 | |
| UN Org (UNDP): \$ 200,000 | |
| UN Org (UNFPA): \$ 200,000 | |
| UN Org (IOM): \$ 78,739 | |
| Donor (KOICA): \$ 7,040,153 | |
| NGO | |
| Names and signatures of (sub) national counterparts and participating UN organizations Adequate signature space should be provided in order to accommodate name (person), title (head), organization name/seal of all participating UN organizations and national coordinating authorities, as well as date of signature. This joint programme document should be signed by the relevant national coordinating authorities. By signing this joint programme document, all signatories – national coordinating authorities and UN organizations - assume full responsibility to achieve results identified with each of them as shown in Table 1 and detailed in annual work plans. | |
| UN organizations | National Coordinating Authorities |
| Sunita Caminha Signature United Nations Entity for Gender Equality and the Empowerment of Women (UN Women) Timor-Leste Date & Seal <u>23/11/20</u> | Maria José da Fonseca Monteiro de Jesus Signature State Secretariat for Equality and Inclusion Date & Seal <u>23/11/20</u> |

Together for Equality: Preventing and Responding to Gender-Based Violence in Timor-Leste, November 2020

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| <p>Munkhtuya Altangerel</p> <p><i>Signature</i> </p> <p>United Nations Development Programme Timor-Leste</p> <p><i>Date & Seal</i> 23/11/2020</p> |  |
| <p>Ronny Lindstrom</p> <p><i>Signature</i> </p> <p>United Nations Population Fund (UNFPA) Timor-Leste</p> <p><i>Date & Seal</i> 23 Nov 2020</p> |  |
| <p>Cecilia McIntosh</p> <p><i>Signature</i> </p> <p>International Organization for Migration (IOM) Timor-Leste</p> <p><i>Date & Seal</i> 23/11/2020</p> |  |
| <p>Funding Organization</p> | |
| <p>Sikhyon Kim</p> <p><i>Signature</i> </p> <p>Korea International Cooperation Agency (KOICA) Timor-Leste</p> <p><i>Date & Seal</i> 23/11/20</p> |  |

Project Proposal

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| Project Title | <i>Hamutuk ba Igualdade (Together for Equality: Preventing and Responding to Gender-Based Violence in Timor-Leste)</i> |
| Organization | UN Women (Timor-Leste), with UNFPA, UNDP and IOM Sunita Caminha, UN Women Timor-Leste Head of Office, E-mail: sunita.caminha@unwomen.org Tel (o): +670-3312189; Mobile (o): +670-781-03396 |
| Date of Submission | 16 November 2020 |

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| Target Country | Timor-Leste |
| Project Location | National, with activities targeted in 4 municipalities: Baucau, Covalima, Dili and the Special Administrative Region of Oecusse-Ambeno |
| Beneficiaries | <p>This project will benefit the entire population of the Democratic Republic of Timor-Leste by addressing widespread gender-based violence that has high costs to individuals, families, communities and the State health, justice, security, and social services systems that respond to the abuse. The target group will include girls, boys (10 years and older), women and men, across ages. There will be particular focus on the groups that face multiple forms of discrimination, are more vulnerable to sexual harassment and violence in public, as well as other forms of gender-based violence and experience barriers in accessing services due to their marginalization.</p> <p>The direct beneficiaries will be adolescent girls and boys, young women and men, both in and out of school (targeting ages 10-25), representing 36% of the population, as well as persons with disabilities (representing at least 3% of the population as of 2016), members of the lesbian, gay, bisexual, transgender and intersex communities, survivors of gender-based violence, noting that at least one third of women have experienced some form of intimate partner violence, as well as female and male civil servants, with each group engaged in targeted project activities. The project will especially target those living in disaster-prone communities.</p> <p>Direct Beneficiaries: Estimate 200,000 (to be refined upon inception); indirect beneficiaries will reach the total population: 1,167,242 people as of 2015 data, comprising 588,561 men and 578,681 women.</p> |
| Project Period | <i>November 2020 – November 2024 (48 months)</i> <i>(Start-up Date: 23 November 2020)</i> |
| Goal and Objectives | <p>The Project Goal: Women and girls in Timor-Leste are empowered to enjoy their right to live free of sexual harassment and other forms of violence against women and girls in public and private spaces and can access quality essential services. This project aligns with Timor-Leste's commitment to the Sustainable Development Goals, notably Goal 3 on Health, Goal 4 on Education, Goal 5 on gender equality and Goal 16 on peaceful societies. The project also contributes to the country's National Action Plan on Gender Based Violence (2017-2021) and Strategic Development Plan vision to be "<i>a gender-fair society where human dignity and women's rights are valued, protected and promoted by the laws and culture</i>" by 2030. Toward this end, the Project Objectives aim to:</p> <ol style="list-style-type: none"> 1. Prevent gender-based violence, in particular sexual harassment and other forms of violence against women and girls, before it happens or before it re-occurs. 2. Empower survivors of gender-based violence, especially women and girls, to recover and rebuild their lives through improved access to multi-sectoral services and public spaces. 3. Enforce implementation, monitoring and adequate resourcing of legislation and policies that address violence against women and girls (VAWG) in public spaces, in the context of disaster risk reduction and promote gender equality more broadly. |

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| | <p>The project links to the existing United Nations Development Assistance Framework (UNDAF 2015-2020), and in particular Outcome 1 on benefits to disadvantaged groups and Outcome 4 on improved service delivery¹ and forthcoming UN Strategic Development Cooperation Framework (UNSDCF 2021-2025) Result area 5 on Governance².</p> |
| <p>Justification for Intervention</p> | <p>Gender-based violence (GBV) is widely recognized as one of the most pervasive human rights concerns in Timor-Leste³, with almost 2 of every 3 Timorese women (15-49 years) reporting having experienced intimate partner violence in their lifetime⁴. Although both men and women experience GBV, women and girls face abuse the most, given the unequal power relationships between men and women within the household, in communities and across society. As such, this project will focus on addressing violence experienced by women and girls in public and private spaces as the largest population group affected by GBV.</p> <p>Gender-based violence occurs in many forms and across the life cycle. In addition to being a fundamental violation of human rights, it has enormous health, social and economic costs. These costs begin with the severe physical, mental and emotional consequences that not only impact individuals that experience abuse, but also those who witness abuse, most often children. This translates into lost productivity in the workforce, high costs to families and public services, reducing the overall well-being of entire countries and their economies, lasting for generations.⁵ Sexual harassment and other forms of sexual violence in public spaces further marginalize women and girls from enjoying their rights in public spaces.</p> <p>Timor-Leste is one of the countries in the Asia Pacific region highly prone to severe natural disasters, such as drought, flooding, landslides, tropical cyclones and tsunamis. Yet, the country's national- and district-level capacities remain insufficient to adequately respond to such disasters, especially in rural areas. Furthermore, evidence shows that GBV is exacerbated in natural disasters, as there is frequently a weakening of community and institutional protection mechanisms, disruption of services and community life, destruction of infrastructure, separation of families and displacement, and limited access to GBV services. Therefore, preparing national counterparts to adequately prevent, mitigate and safely respond to the needs of potential survivors in the aftermath of natural disasters is a key priority.</p> <p>Addressing GBV is fundamental to achieving the 2030 Sustainable Development Goals (SDGs) on Health (Goal 3), Education (Goal 4), Gender Equality (Goal 5)⁶, Sustainable Cities (Goal 11), Peace and Justice (Goal 16), among others. Dedicated investment in Goal 5 by addressing the underlying social norms and gender discrimination that perpetuates violence and ensuring a multisectoral response to violence against women is in place is the only way to meet the SDG targets by 2030.</p> <p>Since the promulgation of the 2010 Law against Domestic Violence (LADV), there have</p> |

¹ See UNDAF 2015-2019 Outcome 1: By the 2020, people of Timor-Leste, especially the most disadvantaged groups benefit from inclusive and responsive quality health, education and other social services and are more resilient to disasters and the impacts of climate change and Outcome 4: By 2020, state institutions are more responsive, inclusive, accountable and decentralized for improved service delivery and realization of rights, particularly of the most excluded groups

² The UNSDCF 2021-2025 was signed on 15 May 2020 covering 6 results areas, with one including elimination of gender-based violence, as follows: "By 2025, the people of Timor-Leste, especially the most excluded are empowered to claim their rights, including freedom from violence, through accessible and accountable and gender responsive governance systems, institutions and services at national and subnational levels."

³ Secretary of State for Equality and Inclusion, NAP-GBV 2017-2021 (<http://asiapacific.unwomen.org/en/digital-library/publications/2017/10/national-action-plan-on-gender-based-violence-2017-2021>).

⁴ The Asia Foundation. 2016. Understanding Violence against Women and Children in Timor-Leste: Findings from the Nabilan Baseline Study: Summary Report. The Asia Foundation: Dili.

⁵ See for example, <http://www.endvawnow.org/en/articles/301-consequences-and-costs-.html>

⁶ Eliminating all forms of violence against all women and girls in the public and private spheres is a specific SDG Target 5.2

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| <p>been two National Action Plans on Gender-Based Violence (NAP GBV) approved in Timor-Leste (NAP GBV 2012-2016 and NAP GBV 2017-2021), which were developed to support implementation of the LADV. There is increased awareness of domestic violence (the most common form of GBV) as a public crime and an increasing number of cases of domestic violence are being brought before the formal justice system⁷. Since 2014, visibility of sexual harassment as a widespread form of gender-based violence has grown, alongside increasing efforts by government and civil society to address it.</p> <p>However, domestic violence and wider social tolerance for all forms of gender-based violence is a serious issue for the young nation of Timor-Leste. This is exacerbated by women's economic dependence, gender-bias in marriage, stereotyped gender roles, as well as cultural and social beliefs that put women at a lower status than men⁸. To date, there has been limited investment in addressing the problem, with that less than 2% of the State Budget allocated to gender equality commitments between 2015-2017, and only a part of that directed at addressing GBV.⁹ Efforts from different actors are often short-term, fragmented and insufficient to cover the scale of the problem. This patriarchal context, together with the country's economic and disaster-risk profile, reaffirms that more needs to be done to prevent violence from taking place and to facilitate support for survivors through quality essential multi-sectoral services.</p> <p>Global evidence affirms that gender-based violence can be prevented and its harms reduced.¹⁰ This requires context-specific, dedicated and sustained investment in preventing violence before it begins, working with young girls and boys, their families and the wider society to promote transformative norms on gender equality and respectful relationships, strengthening comprehensive services for survivors of gender-based violence and ensuring adequate resourcing, monitoring and coordinated actions on the issue.</p> <p>Toward this end, the UN system, which has supported Timor-Leste since the country's Referendum in 1999 through its transition to independence and in State building, is well-positioned to accompany and assist the country to overcome violence against women and girls (VAWG) toward eradicating all forms of gender-based violence. The UN has documented expertise in preventing and responding to violence against women and girls, works in partnership with Government and civil society to deliver comprehensive and nationally-owned assistance that can be sustained over time.</p> <p>In consultation with key stakeholders, the UN has identified three key focus areas that are inter-linked and that can benefit from the expertise of specific United Nations agencies. The areas identified need urgent attention to have an impact on prevalence of GBV are prevention, response, and implementation of existing commitments, considering the context of disaster preparedness across areas. The components are connected through the existing referral system, which needs to be strengthened. The focus areas are clearly aligned to the National Action Plan on Gender Based Violence that was approved by the Council of Ministers in 2017. Although approved, this NAP has not been fully implemented. The State Secretary of Equality and Inclusion (SEII) has requested support from the United Nations to assist relevant line ministries in their response to the NAP GBV.</p> <p>To respond to this request, the UN family has organized itself around our existing partnerships. UN Women, which is the coordinating agency for the joint project, will also lead activities on implementation, budgeting, monitoring and coordination of legislation,</p> |
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⁷ Judicial System Monitoring Programme. 2013. Law against Domestic Violence: Obstacles to Implementation Three Years On. JSMP. Dili.

⁸ National Statistics Directorate (NSD) [Timor-Leste], Ministry of Finance [Timor-Leste], and ICF Macro. 2010. Timor-Leste Demographic and Health Survey 2009-10. Dili, Timor-Leste: NSD [Timor-Leste] and ICF Macro.

⁹ See UN Women analysis of the State Budget 2015-2017.

¹⁰ Joint UN Prevention Framework.

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| | <p>with a particular focus on the problem of sexual harassment in public spaces and its links to domestic violence, as well as deepening and expanding investment in primary prevention, working closely with SEH, MoYES and relevant CSO partners. UNFPA will build on its relationship with the Ministry of Health for health sector response; UNDP will work with the Ministry of Justice, Public Defender’s Office, Office of Prosecutor-General, and National Police and IOM will work with the Ministry of Interior and Ministry of Social Solidarity and Inclusion to build capacity of relevant stakeholders to mainstream safe and ethical GBV prevention, mitigation and response into disaster response and post-disaster recovery interventions. All of these partnerships will benefit from the lessons learned and best practices that UN agencies have had in Timor-Leste and in other parts of the region as well as from existing partnerships with civil society organizations with experience working on GBV. The convening role of the UN system and its wide range of partnerships will also ensure development partner coordination on GBV and the avoidance of overlap, duplication and activities that have been shown not to work in the past. This will further complement the EU-UN Spotlight Initiative, working in municipalities not covered under the Spotlight Initiative and addressing issues of sexual violence in public spaces as well as in the context of natural disasters.</p> <p>The project leverages the UN’s expertise globally and in Timor-Leste, and unique position as a human-rights based intergovernmental body. The foundation is UN Women’s (and previously UNIFEM’s) leadership on gender equality, violence against women, safe cities and safe markets/ universities, and coordination mandate, alongside the expertise of sister agencies (UNDP in expanding access of GBV victims to justice and governance institutions, UNFPA establishing many CSO response services and building the capacity of health sector responses to GBV and IOM investment in gender-responsive preparedness and systems to reduce the risk of GBV in communities at risk of natural disasters).</p> <p>The proposed approach supports the Government of Timor-Leste to prevent GBV and improve essential health, justice and social sector responses to women and children who have experienced violence (in public and private spaces), coordinating actions and monitoring results, in line with the targets in the NAP GBV (2017-2021) and the SDGs. The project is tailored to the context of the country, building on the successful experiences of the UN’s nearly 20 years of programming in the country with attention to the Sustainable Development Goal principle of Leaving No One Behind (LNOB). Through the four-year investment, the UN system can support localization of global standards and more systematic approaches for prevention and provision of essential services to survivors of violence to break the cycle of violence against women and girls in Timor-Leste.</p> |
| <p>Expected Outcomes and Indicators</p> | <p>Project Outcomes:</p> <ol style="list-style-type: none"> 1. Transformed attitudes, behaviours and social norms promoted at individual and inter-personal levels to prevent GBV 2. Improved access to essential public services (health, justice and social services) for women and girls, among other survivors of violence, informed by evidence-based responses to GBV. 3. Enhanced legislation and policy environment for eliminating VAWG and other forms of gender discrimination, is in place and translated into action |
| <p>Expected Outputs and Indicators</p> | <ol style="list-style-type: none"> 1. Outcome: Transformed attitudes, behaviours and social norms promoted at individual and inter-personal levels to prevent GBV <ol style="list-style-type: none"> 1.1. Increased knowledge and skills in students, youth, teachers and parents to promote respectful relationships, based on gender equitable norms 1.2. Enhanced economic empowerment opportunities for women who face multiple forms of discrimination 1.3. Increased access to support for survivors of GBV, persons with disabilities, members of the LGBTI community, among other marginalized groups |

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| | <p>2. Outcome: Improved access to essential public services (health, justice and social services) for women and girls, among other survivors of violence, informed by evidence-base responses to GBV</p> <p>2.1. Strengthened capacity of health workers/providers to provide coordinated responses to gender-based violence.</p> <p>2.2. Enhanced capacity of the justice and law enforcement institutions to provide survivor-centred access to justice for women, including survivors of gender-based violence</p> <p>3. Outcome: Enhanced legislation and policy environment for eliminating violence against women and girls and other forms of gender discrimination, is in place and translated into action</p> <p>3.1. Mobilized community members, local authorities and media in support of gender equality and safety in public spaces</p> <p>3.2. Public institutions have strengthened capacities for planning, implementing and reporting on VAWG in public and private spaces</p> <p>3.3. Strengthened civil society capacity to analyze and advocate for Government funding for addressing sexual violence in public spaces and GBV-related policies</p> |
| <p>Activities</p> | <p>Outcome 1: Transformed attitudes, behaviours and social norms</p> <p>Output 1.1: Increased knowledge and skills in students, youth, teachers and parents to promote respectful relationships, based on gender equitable norms</p> <p>1.1.1. Develop material and roll-out classroom and extra-curricular programmes with pre-secondary students, parents and educators to change harmful attitudes and social norms and prevent sexual harassment and school-related GBV in Baucau, Covalima and RAEOA.</p> <p>1.1.2. Conduct a gender analysis of national sports associations and design GBV and sport group sessions to prevent young athletes from sexual harassment and promote their roles as advocates for equitable gender roles and positive masculinities.</p> <p>1.1.3. Develop tools, materials and provide technical support to the National University of Timor-Leste for its "Safe Campus" initiative to prevent sexual violence on campus</p> <p>1.1.4. Support Scouts in the targeted municipalities and National Scouts Association to roll-out the "Voices against Violence" curriculum to promote respectful relationships using peer-education and advocacy.</p> <p>1.1.5. Support comprehensive sexuality and reproductive health education in youth-centres and schools include a provision of Comprehensive Sexuality Education (CSE) and utilize existing extra-curricular materials to promote gender-equitable attitudes, greater equality of power in intimate relationships and reduce the incidence of GBV.</p> <p>Output 1.2: Enhanced economic empowerment opportunities for women who face multiple forms of discrimination</p> <p>1.2.1. Provide women informal workers with economic and social empowerment through financial literacy and entrepreneurship training, income generation activities, combined with group education sessions for women and their partners on gender norms, power and communication.</p> <p>1.2.2. Support comprehensive resilience building against emerging emergencies (COVID-19) for vulnerable groups, conduct awareness raising and build the capacity of 30 women's groups and women leaders to participate in DRR decision-making structures; develop GBV integrated CBDRM plans, and identify CBDRM resilient and sustainable livelihood projects that contribute to enhancing women's economic empowerment.</p> |

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| | <p>Output 1.3. Increased access to support for survivors of GBV, persons with disabilities, members of the LGBTI community, among other marginalized groups</p> <p>1.3.1. Support civil society to conduct outreach and training for survivors to access peer-support and self-care skills, reduce stigma and encourage help-seeking, using mobile technology and other innovative platforms.</p> <p>1.3.2. Conduct analysis of cases of sexual violence in public (including workplaces and educational institutions), and support development of recommendations</p> <p>Outcome 2: Essential Health and Justice Services</p> <p>Output 2.1. Strengthened capacity of health workers'/providers' to provide coordinated responses to gender-based violence.</p> <p>2.1.1. To conduct awareness raising and understanding of GBV through evidence-based advocacy among senior policy-makers and within health system, about its nature, health and other consequences, risks and causal factors through in country workshops.</p> <p>2.1.2. To conduct community awareness workshops about availability of and need for timely access to health-care services through health facilities/In partnership with national NGO (with well-established community based group) support MoH to conduct outreach activity on health impact of GBV and available services</p> <p>2.1.3. Enhance the participation of health care providers in the existing referral network through hosting referral meetings to support strengthening coordination within health system and with other sectors for a strong multisectoral response to GBV.</p> <p>2.1.4. Provide Technical assistance to MoH through placement of a National coordinator and 4 regional coordinators.</p> <p>2.1.5. Strengthen ability of health care providers to respond to GBV through review and update of national guideline for health service providers on identification, management and referral of victims/survivors of GBV and be more inclusive.</p> <p>2.1.6. Develop supervision tools including HMIS reporting format (while ensuring anonymity and confidentiality) and train and support supervision to health facilities on the utilisation and reporting.</p> <p>2.1.7. Establish Medico Legal committee to provide expertise and knowledge in relation Health sector involvement to legal process related to GBV cases.</p> <p>2.1.8. Establish within prioritized health facilities (in Dili and project focus municipalities) spaces to provide LIVES and other components of essential health service package as required ensuring confidentiality and privacy.</p> <p>2.1.9. In coordination with existing tertiary educational institutions, through development of teaching aid materials to integrate content about the identification of, and response to and referral of GBV in pre-service curriculum building on WHO guidelines and tools.</p> <p>Output 2.2: Enhanced capacity of the justice and law enforcement institutions to provide survivor-centred access to justice for women, including survivors of gender-based violence.</p> <p>2.2.1. Provide technical assistance to the PDO and CSOs' in-house lawyers to enhance their knowledge, skills, and systems to handle GBV cases</p> <p>2.2.2. Provide legal outreach and consultations on GBV and existing systems, institutions and procedures in place through PDO's Access to Justice Clinics in the Dili, Baucau, Suai, and Oecusse Judicial Districts</p> <p>2.2.3. Provide technical assistance to the PNTL and Office of Prosecutor-General in developing the institutional capacity in the GBV case management and protocols</p> <p>2.2.4. Conduct monitoring on GBV cases in trials in the permanent and mobile courts and support advocacy</p> <p>Outcome 3: Enhanced legislation and policy environment for eliminating violence</p> |
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| | <p>against women and girls and other forms of gender discrimination, is in place and translated into action</p> <p>Output 3.1. Mobilized community members, local authorities and media in support of gender equality and safety in public spaces.</p> <p>3.1.1. Support traditional, religious leaders, persons with disabilities and LGBTI persons to become advocates for safe public spaces through dialogue and awareness-raising sessions organized by civil society.</p> <p>3.1.2. Build national capacity for multi-sectoral joint rapid response and crisis management through SOP development and providing training for first responders to identify needs of vulnerable groups, mitigate risks of GBV during disaster response and safely respond to disclosure of GBV incidents.</p> <p>3.1.3. Map and assess evacuation centres and routes in communities with a high risk of displacement, promoting participation of community members, including women, men, boys and girls in the set-up of evacuation centers.</p> <p>3.1.4. Develop guidelines and train media personnel on gender-sensitive reporting of sexual violence in public spaces (including places of work)</p> <p>3.1.5. Support media monitoring on gender issues, including in the context of sexual violence in public spaces and natural disasters/ pandemics (with journalism students and civil society).</p> <p>Output 3.2. Public institutions have strengthened capacities for planning, implementing and reporting on VAWG in public and private spaces</p> <p>3.2.1. Strengthen capacity of SEII personnel and municipal focal points on gender budget analysis and conduct mapping of investments in gender equality and women's empowerment.</p> <p>3.2.2. Design ToT and roll-out training for Municipal Gender Working Groups on conducting annual gender budget assessments and allocating investments for safe public spaces</p> <p>3.2.3. Conduct workshops for members of NAP GBV Inter-ministerial Coordination Mechanism for better tracking and reporting on E'VAW progress (topics on the RESPECT Prevention Framework, Essential Services Package, monitoring, sexual harassment and reporting mechanisms.</p> <p>3.2.4. Provide technical support and training to Government stakeholders (MSSI, MOI, SEII, PNTL) on protection, GBV core concepts and principles, risk identification, GBV mitigation measures, PSEA, AAP, Code of Conduct, available support, and referral pathways.</p> <p>3.2.5. Provide technical support to the National Disaster Operating Center (NDOC) to ensure sex-age and disability-disaggregated data (SADDD) is collected to generate evidence and inform disaster response systems.</p> <p>Output 3.3: Strengthened civil society capacity to analyze and advocate for Government funding for addressing sexual violence in public spaces and GBV-related policies</p> <p>3.3.1. Provide technical assistance and guidance for civil society to jointly track progress and report on efforts to address sexual violence in public spaces, in line with government gender equality commitments, including NAP GBV, CEDAW and UNSCR 1325</p> <p>3.3.2. Conduct training with CSOs in targeted municipalities to conduct safety audits and determine costs of recommendations related to creating safe public spaces.</p> <p>3.3.3. Conduct training on evidence-based advocacy and support joint advocacy initiatives, including survivors of violence, to facilitate investment in the NAP GBV and safe public spaces.</p> |
| Cross-cutting | Addressing gender-based violence requires a multi-sectoral approach. Although violence |

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| <p>Issues Consideration:</p> | <p>is a critical public health and security issue, many of the risk factors and determinants of violence lie outside the health and security system, requiring a holistic, integrated and coordinated approach to prevention and response across different sectors, professional disciplines, involving governmental, private and non-governmental institutions. As with the centrality of gender equality for the SDGs, achieving gender equality requires making progress in health (SDG 3) and justice (SDG 16), among other areas. For example, to successfully address GBV, the health system will interact and coordinate its own response with a number of other sectors, including police and justice, social services (such as shelter and child protection), education, labour and employment, etc. The project will contribute to filling the existing gap in multisectoral violence prevention efforts by facilitating national guidelines and networks. At the same time, it will enable multi-sectoral collaboration and coordination to address the risk factors of violence and promote quality service delivery, as well as facilitate the access of survivors/victims of violence to multisectoral services, with attention to health and justice, including through strong referral mechanisms; and generate evidence of what works through testing and evaluation of the intervention.</p> <p>Attention to intersectionality and cross-cutting issues will be prioritized, for example, by addressing sexual harassment in connection to other forms of gender-based violence, engaging specific groups in activities and ensuring project activities are inclusive and accessible. This will include partnerships with communities in rural areas, young women and men, persons with a disability, and members of the lesbian, gay, bisexual, transgender and intersex community and conducting activities for audiences with varying levels of literacy and starting with needs assessments, accessibility checks and making an effort to reduce the environmental impact of project activities. Additionally, this will also include addressing the increased vulnerability of women and girls in disasters, placing particular emphasis on the exponential increase in GBV during and after disasters.</p> |
| <p>Arrangement:</p> | <ul style="list-style-type: none"> • Managed by UN Women • Implemented by UN Women, UNFPA, UNDP and IOM • Cooperating with: Secretary of State for Equality and Inclusion, Ministry of Health, Ministry of Education Youth and Sports, Ministry of Interior- Secretary of State for Civil Protection, Ministry of Justice, Ministry of Social Solidarity and Inclusion and relevant line ministries, justice/rule of law institutions, and civil society organizations as identified in the NAP GBV. |
| <p>Implementation Structure:</p> | <p>The project will be implemented by Direct Implementation Modality (DIM) by the UN Women Timor-Leste Country Office, as the Chair of the inter-agency Gender Theme Group and in coordination with the Secretary of State for Equality and Inclusion, together with UNFPA, UNDP and IOM, among other partners with support from UN Women's Regional Office in Bangkok and UN Women Headquarters in New York. In this regard, UN Women as Administrative Agent will be accountable for effective and impartial fiduciary management and financial reporting as well as be responsible as Convening Agent for coordination of programmatic activities and narrative reporting.</p> <p>UN Women will recruit an International Programme Specialist on Ending Violence against Women for overall coordination and guidance on the project, alongside a National Monitoring and Evaluation Officer for managing the project monitoring, evaluation and reporting, and a Programme Analyst, Programme Assistant, and Driver to support project activities and operations. A percentage of time for other relevant staff is also budgeted to ensure overall results. In addition to UN Women, the three organizations participating (UNDP, UNFPA and IOM) will work through their own organizational structures, but coordinating project team members within the shared UN Compound will facilitate inter-agency coordination and cross-linkages. Within the project Outcomes, each agency will be responsible for the specific outputs and activities identified below.</p> <p>For UNFPA this means that full responsibility for implementation rests with the Country Office which has full decentralized authority, with technical support from the Regional</p> |

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| | <p>Office in Bangkok and from its Technical Division in New York.</p> <p>For UNDP that would mean full responsibility for implementation rests with the Country Office in Timor-Leste, more specifically within the Governance Programme, and the Justice Project. The implementation will be supported technically by the UNDP Regional Office in Bangkok and the Crisis Bureau in New York.</p> <p>For IOM full responsibility for implementation rests with the Country Office with technical support from the Regional Office in Bangkok and technical divisions at Head Offices in New York and Geneva.</p> <p>The Project will establish a Joint Steering Committee, which will be chaired by the UN Resident Coordinator and the State Secretary for Equality and Inclusion, and report to the existing Inter-Ministerial NAP GBV Commission once a year for advisory guidance and coordination with key Government partners. In addition to presenting progress to the NAP GBV Commission, the Joint Steering Committee will meet once a year to approve the project workplan, review any budget revisions, and discuss project progress and challenges. Steering Committee membership will include a KOICA representative, the four participating UN agencies (UN Women, UNFPA, UNDP and IOM) as well as representatives from participating State institutions who are also members of the NAP GBV Commission (MoEYS, MoH, MOI- Civil Protection, MOJ, PDO, OPG, PNTL), as well as representatives from the 3 municipal authorities (Baucau, Covalima and Special Administrative Region of Oecusse-Ambeno) and civil society representatives (utilizing the existing National Civil Society Reference Group established under the EU-UN Spotlight Initiative). This will enhance the operation of the NAP GBV Commission as well as ensure synergies with the EU-UN Spotlight Initiative.</p> |
| Project Budget | <ul style="list-style-type: none"> • Total Cost: 7.7 million USD (Request to KOICA: 7.04 Million Cost-sharing Other Sources: UN Women: 200,000, UNDP: 200,000; UNFPA:200,000, IOM 78,739) • Planned budget 2020: USD 510,923; 2021: USD 2,016,871, 2022: USD 2,260,057, 2023: USD 1,392,981, 2024: USD 859,321 (disbursement schedule in annex) |
| Plan for Monitoring and Evaluation | <p>The Project will establish a monitoring and evaluation framework at inception, coordinated by a UN Women Monitoring and Evaluation Officer, using existing UN Women and sister UN agency frameworks. This will involve validating proposed indicators as part of the baseline to align with national-level monitoring, including existing national GBV commitments and the SDG indicators where relevant. Baseline measures will help validate targets and interim milestones with key stakeholders. The Project will develop and use standardized tools for collecting and analysing the data for monitoring progress; conduct annual reviews with KOICA experts and an independent mid-term and final formative evaluation to ensure results are achieved, in line with the joint UN Evaluation Group <u>Guidance</u>. Monitoring efforts will utilize case studies, reviews of developed guidelines, policies and protocols; development and adaptation of sex- and age-specific performance and accountability measures to assess progress in addressing gender-based violence (GBV) across activities implemented by UN agencies and institutional partners. The project will also be monitored quarterly through the UN Project Team and provide updates to the UN Country Team via the UN Gender Theme Group, which is chaired by UN Women and co-chaired by UNFPA.</p> <p>The Risks of the project are low given the political will to address GBV and high costs of violence against women and girls, as recognized in Timor-Leste's 2019 SDG Voluntary National Review and in the context of COVID-19. As greater attention to the issue has emerged, challenges relate to the length of time required for individual attitudinal changes to shift actual behaviours and the limited State Budget resource allocations for the issue. These risks will be mitigated through sustained collaboration and partnership with the relevant government partners, sound capacity development approaches which are needs-based, incremental and institutionalized and development of a project risk mitigation plan, which will be updated quarterly. Explicit attention to coordination is also planned, to</p> |

Together for Equality: Preventing and Responding to Gender-Based Violence in Timor-Leste, November 2020

| | |
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| | ensure alignment across the investments in ending violence against women and girls (from Government as well as the EU-UN Spotlight Initiative and the DFAT-funded Nabilan Programme, among other funds for the issue). In this regard, the project concept has been designed and revised to ensure investments support complementary municipalities and expand attention to under-resourced issues, such as sexual harassment other forms of GBV in public spaces and in the context of disaster risk reduction and response. |
| Plan for Reporting to KOICA | Annual narrative reports and financial reports will be provided to KOICA using a standard Joint UN reporting format, which incorporates KOICA-specific requirements. In-person project briefings and joint visits to project sites will be arranged periodically through the project lifetime, including as part of the annual reviews. |

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1. Situation Analysis

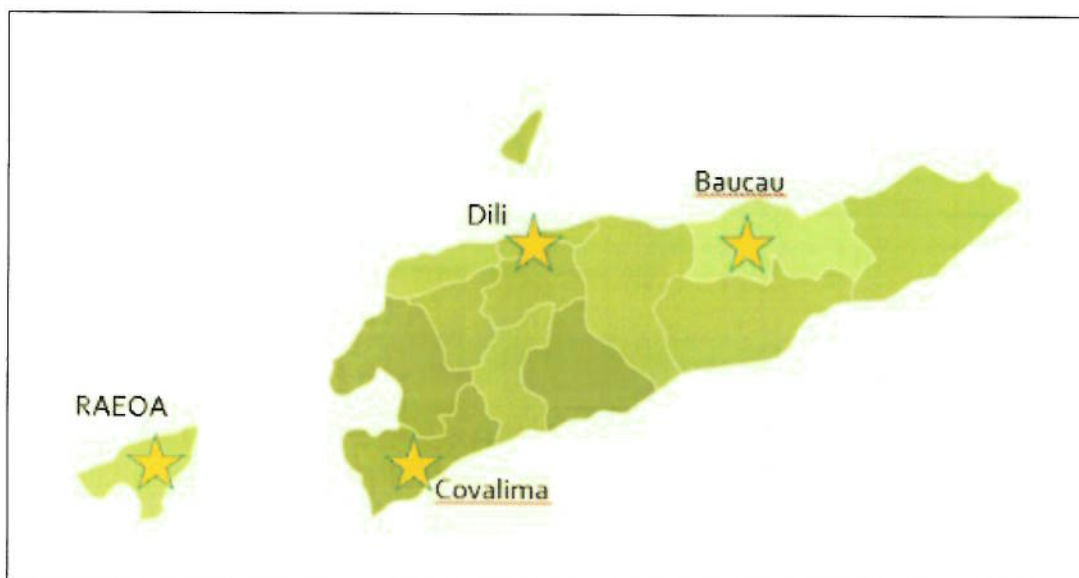
1.1. Context of the Project

Gender-Based Violence (GBV) remains one of the most pervasive human rights concerns in Timor-Leste¹¹, with almost 2 of every 3 Timorese women (15-49 years) reporting having experienced intimate partner violence in their lifetime¹². Although both men and women experience GBV; women are more often the target, given the unequal power relationships between men and women within the household and in communities and across society. Tolerance of GBV is high, with more than 3 of four women and men believing a man is justified in physically beating his wife, illustrating the critical need for investments in prevention alongside supporting survivors of violence. Attention to the widespread problem of sexual violence in public spaces is also increasing, offering an important entry point to address violence against women and girls in all spaces, and also, in the context of disaster risk reduction. Violence against women and girls is recognized as a priority issue and urgent, given the high cost of inaction. It is fundamental to achieving the 2030 Sustainable Development Goals on Health (Goal 3), Gender Equality (Goal 5)¹³, Peace and Justice (Goal 16), among others, but there remains insufficient resourcing invested in the issue.

Considering the high youth population in Timor-Leste, there is an unprecedented opportunity to break the cycle of GBV through dedicated investment in evidence-based approaches to prevention and response. In the context of the recent COVID-19 pandemic and increases in violence against women and children worldwide, it is even more urgent to make strategic investments in preventing violence before it begins and expanding access to quality essential services to survivors of gender-based violence. Within this context, the Joint UN effort can contribute to accelerating efforts for gender equality to bring about transformative change.

The partner agencies in this proposal will draw on national experiences and their technical expertise in country, as well as access to expertise regionally and globally. The UN organizations will leverage their close relations with government institutions to ensure that the individual components of the project are incorporated into government structures and workplans, thereby ensuring sustainability. Furthermore, the partner agencies will draw on their long-standing relationships with civil society organizations, to ensure that lessons learned and best practices from the Timor-Leste perspective are incorporated into the project, maximizing impact and mitigating any risk of duplication.

1.1.1. Map of Timor-Leste and project sites



¹¹ Secretary of State for the Support and Socio-Economic Promotion of Women, NAP-GBV 2017-2021 (December 2016 draft).

¹² The Asia Foundation. 2016. Understanding Violence against Women and Children in Timor-Leste: Findings from the Nabilan Baseline Study: Summary Report. The Asia Foundation: Dili.

¹³ Eliminating all forms of violence against all women and girls in the public and private spheres is SDG Target 5.2

1.1.2. Country context

Timor-Leste is one of the youngest nations in the region, with more than one third of the population (36%) between the formative ages of 10 to 25. Despite steady declines in fertility rates, households in Timor-Leste have an average of 5.3 members, with forty-one percent of the household population under age 15 (according to the 2016 Timor-Leste Demographic and Health Survey Key Findings). Overall, 18% of households are headed by women.

It is important to consider fertility rates in Timor-Leste, noting that currently, women in Timor-Leste have an average of 4.2 children. Fertility has declined dramatically over the last 13 years, from 7.8 children per women in 2003 to 4.2 children. Fertility is higher in rural areas (4.6 children per woman) than in urban areas (3.5 children per woman) and it varies by municipality, from a low of 3.6 children per woman in Dili to a high of 5.7 children per woman in Ainaro. Fertility decreases as a woman's level of education increases. Women with no education have an average of 4.8 children, compared to 3.3 children among women with more than secondary education. Fertility also decreases as household wealth increases. Women in the poorest households have on average 1.8 children more than women in the richest households (5.2 versus 3.4).

More than 1 in 5 (22%) women and 19% of men age 15-49 have no education. Fifteen percent of women and 18% of men have some primary education, while 52% of women and 51% of men have some secondary education. Eleven percent of women and 12% of men have more than secondary education. Three-quarters (75%) of women and 82% of men are literate¹⁴.

The table indicates the Urban Population and Household Type by Sex and Municipality

Table 1.b Urban population and household type by sex and Municipality

| Municipality | Population | | | |
|--------------------|----------------|----------------|----------------|---------------|
| | Total | Male | Female | Sex Ratio |
| (1) | (2) | (3) | (4) | (5) |
| TIMOR-LESTE | 349,208 | 179,565 | 169,643 | 105.85 |
| AILEU | 2,592 | 1,344 | 1,248 | 107.69 |
| AINARO | 6,250 | 3,197 | 3,053 | 104.72 |
| BAUCAU | 17,357 | 8,660 | 8,697 | 99.57 |
| BOBONARO | 12,787 | 6,443 | 6,344 | 101.56 |
| COVALIMA | 9,130 | 4,611 | 4,519 | 102.04 |
| DILI | 244,584 | 126,823 | 117,761 | 107.70 |
| ERMERA | 8,850 | 4,414 | 4,436 | 99.50 |
| LAUTEM | 12,471 | 6,074 | 6,397 | 94.95 |
| LIQUIÇA | 5,201 | 2,535 | 2,616 | 98.81 |
| MANATUTO | 3,703 | 1,921 | 1,782 | 107.80 |
| MANUFAHI | 7,332 | 3,749 | 3,583 | 104.63 |
| SARI OF OECUSSE | 12,421 | 6,459 | 5,962 | 108.34 |
| VIQUEQUE | 6,530 | 3,285 | 3,245 | 101.23 |

These findings are from the 2015 Census Timor-Leste and provide a foundation of the general population in Timor-Leste and the Municipalities. As shown, the urban population of Timor-Leste is **349,208** and differentiate by Municipality and sex. Based on this evidence, the following municipalities have significant differences between males and females:

DILI : MALE: 126,823 FEMALE: 117,761
LAUTEM: MALE: 6,074 FEMALE: 6,397
MANATUTO: MALE: 1,921 FEMALE: 1,782
MANUFAHI: MALE: 3,749 FEMALE: 3,583
SARI OF OECUSSE: MALE: 6,459 FEMALE: 5,962

The table also shows that there are more males in Dili, Manufahi and SAR of Oecusse than there are females.

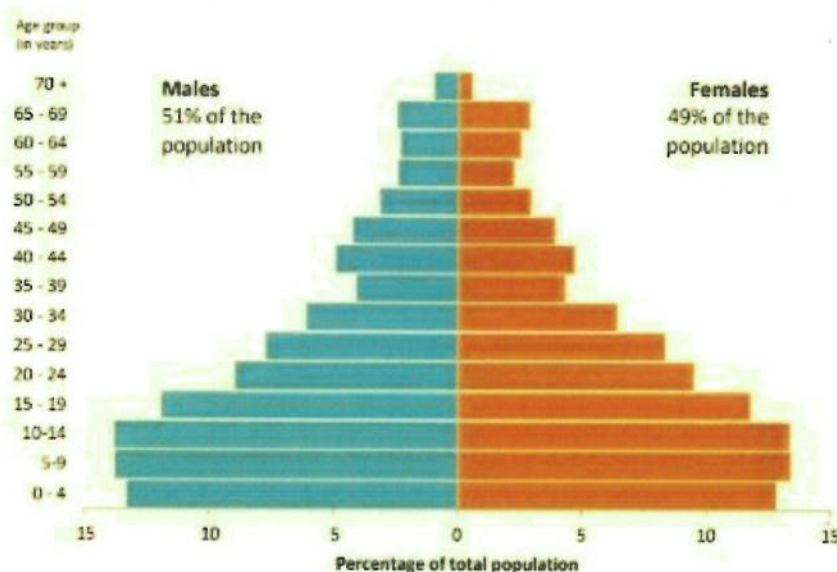
Timor-Leste has a relatively young population with more people concentrated in the younger age groups. The median age in Timor-Leste is 19.6 years. Half the population is below this age and half above.

Based on the 2015 Timor-Leste Census, the following pyramid illustrates the relative size and age distribution of women and men, girls and boys in Timor-Leste. The wide bars at the base of the pyramid show how skewed the population is towards children and young people as a result of having large families. A young population places a burden on people of working age to provide for children and young people, as well as on the State to provide necessary education and health services that children require and employment opportunities for youth as they

¹⁴ 2016 DHS key findings

transition to adulthood.

In addition to its demographic position, Timor-Leste, as a small island, is at risk of natural disasters, which exacerbate pre-existing vulnerabilities and patterns of discrimination. Due to its geographic location, Timor-Leste is exposed to droughts, typhoons, sea level rise, earthquakes and tsunamis, all of which pose significant threat to the social and economic development of the country and the lives of its citizens. In addition, the combination of heavy monsoon



rains and steep topography makes many parts of the country prone to the impacts of flooding, landslides and shifting riverbeds. Timor-Leste’s Risk Profile conducted by NDOC in 2016 reports that the main risk prevalent in Timor-Leste on an ongoing historical basis is flood/flash flood and associated events (landslides and slippage). Although the most serious event currently in the longer term is El Nino/Drought, which is estimated to affected 220,000 men, women and children.

Gender inequality remains a noticeable issue at both the community and government levels, due to entrenched gender norms. Common forms of discrimination women face include: lack of protections from sexual exploitation and abuse, unequal access to social assistance, discrimination in accessing basic services and aid provision, inequitable access to property restitution, and violence. The limited awareness of those responding to disasters that GBV increases following natural disasters is not recognized, leaving survivors of GBV with even fewer options to seek support. Pregnant or lactating women and adolescent girls, who constitute an average of 18-20% of the female population, are particularly more vulnerable to disasters because of their limited physical mobility and their increased needs for food and water and for access to reproductive health care and safe birthing facilities. Protection from gender-based violence in the context of natural disasters, including through early programme prevention and response, can reduce morbidity and mortality.

Within this context, Timor-Leste, since independence was declared in 2002, has made significant strides to promote gender equality in its legal and policy frameworks, such as in its Constitution, in ratification of CEDAW and its Optional Protocol, in adoption of laws and policies on violence against women, economic empowerment of rural women, promoting women’s participation and leadership, and gender-responsive planning and budgeting, a specific target on gender equality in the 2011-2030 Strategic Development Plan, and three National Action Plans: on Gender-Based Violence (GBV), on Gender and the Private Sector, and on Women, Peace and Security, among other areas. However, despite this progress, there remain significant barriers to gender equality that limit efforts to sustainably develop Timor-Leste’s economy and the State. The country is a signatory to the Sendai Framework for Disaster Risk Reduction 2015-2030, according to which a gender perspective should be integrated in all policies and practices and the response should be gender equitable. Timor-Leste has also made a strong commitment to the Sustainable Development Goals (SDGs) and recognize gender equality as a cross-cutting issue in the country’s Roadmap on SDGs.

Despite these commitments, women’s accumulated skills, experiences and capabilities are not often quite adequately identified, recognized and promoted, and their voices in addressing violence are underutilized. For example, although women in rural areas are most vulnerable to violence following a disaster, they are largely marginalized in the development of DRR policy and decision-making processes. While Timor-Leste is known for a high representation of women in the national Parliament, holding a share of 40% on the 65 parliamentary seats, the female parliamentarians are an untapped source of influence. Women’s share in decision-making roles at the highest levels of Government is 21%, and at the local level challenges remain in increasing women’s participation in politics:

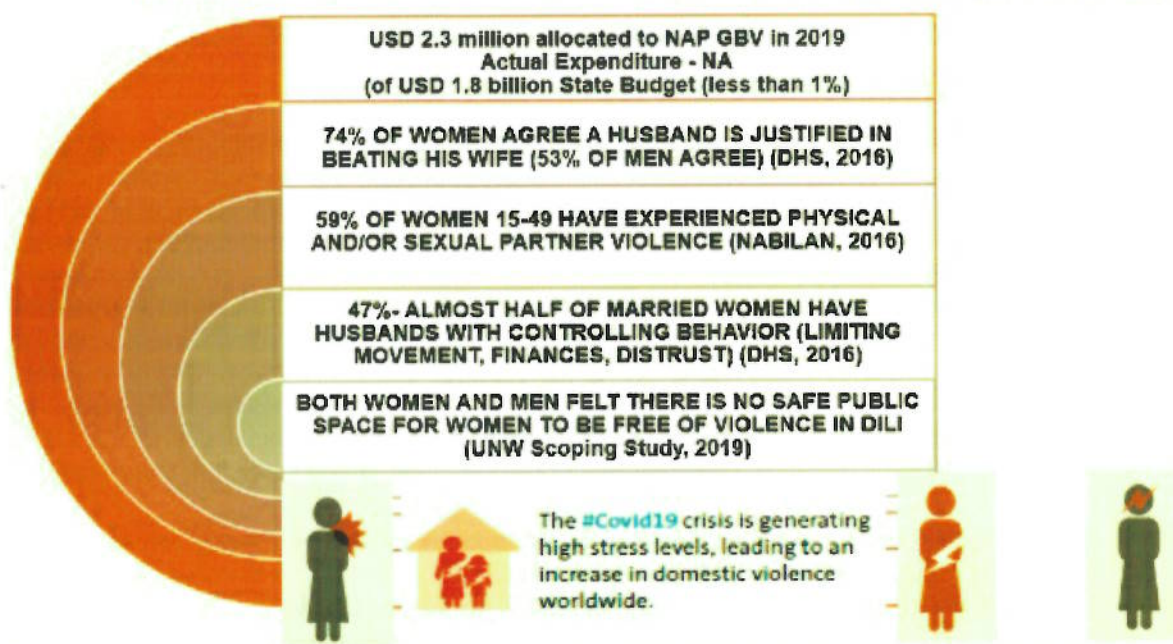
they comprise 28% of suco (village) council members, and only 5% of the suco and aldeia chiefs. This pattern is reproduced as well at the household level, where men often have greater influence as decision-makers.

The project aims to strengthen the capacities of individuals, within communities and within the State institutions, alongside an enabling legislative environment to not only prevent GBV from occurring in the first place, but reduce its harms through survivor-centred access to essential health and justice services, including in the context of preparing GBV systems to act before, during and after disasters. Partnerships across sectors, with particular attention to justice, health and education sectors will be engaged for their strategic impact. The women’s machinery also plays an important role in this regard as well as partnerships and coordination with civil society, including the media.

1.1.3. Overview of the current situation

Gender-based Violence (GBV) remains pervasive and highly tolerated in Timor-Leste. The latest Demographic and Health Survey conducted in 2015-2016 found that the proportion of women who have suffered different forms of partner violence during the last 12 months is quite high, with emotional violence is the most prevalent form of current partner violence, impacting 44% of women in the last 12 months, followed by economic violence^{viii} (37%). Physical partner violence affects 36% of women, and 31% of them experience sexual violence. During their lifetime, the Nabilan study dedicated to look at violence against women, found that almost three in five (59%) women aged 15-49 who had ever been in a relationship experienced physical and/or sexual partner violence at some point in their lives. This widespread problem is exacerbated due to the high tolerance of violence, with more than 80% of women and men believing violence against women is justified in some circumstances. According to the 2016 DHS, 29% of women age 15-49 experienced physical violence within the 12 months preceding the survey. 4% of women age 15-49 experienced sexual violence within the 12 months preceding the survey. Almost half (47%) of all ever-married women report their husbands exhibit at least 1 of the 5 controlling behaviours. A third (33%) of all ever-married women experienced spousal physical violence within the 12 months preceding the survey. Almost one in five (17%) of ever-married women who had experienced spousal physical or sexual violence in the 12 months preceding the survey were injured as a result. Only a fifth (20%) of women who have ever experienced physical or sexual violence sought help.

VIOLENCE AGAINST WOMEN IN TIMOR-LESTE IS WIDESPREAD, BUT CAN BE PREVENTED



Physical and sexual violence do not always occur in isolation; rather, women may experience a combination of different forms of violence. Thirty percent of women age 15-49 have experienced physical violence, but not sexual violence, and 3% of women report having experienced both physical and sexual violence from their current husband. Two percent of women age 15-49 experienced sexual violence before the age of 18.

All forms of violence against their wives become more common as a frequency of husband's drinking or getting drunk increases. The husbands' own level of education displays clearer pattern with prevalence of spousal violence than does the educational difference between husbands and wives. Prevalence of women's experiences of spousal physical or sexual violence declines as educational level of husbands increases.

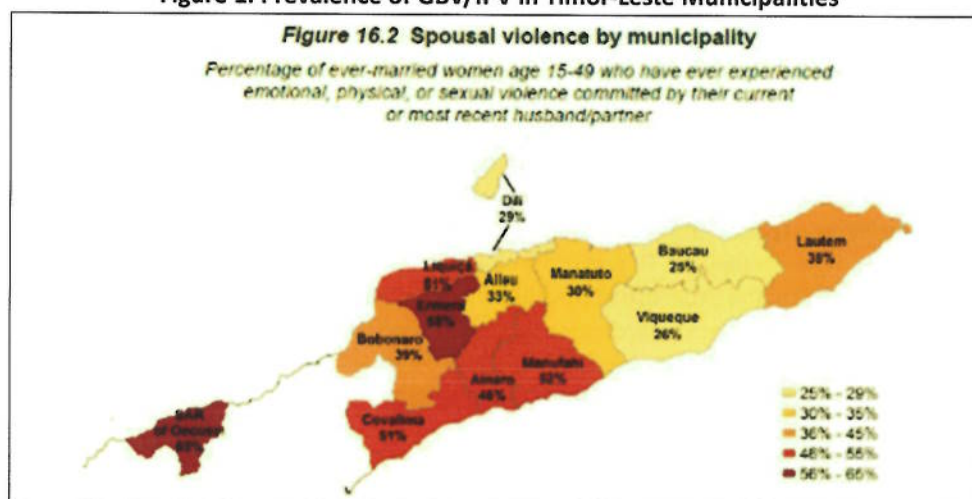
All forms of spousal violence increase in prevalence as the number of reasons for which women report wife beating is justified increases. While experience of violence is not limited to women who report their fathers beat their mothers, prevalence is higher among women who report their fathers beat their mothers compared with women who report their fathers did not beat their mothers. Prevalence of ever-married women having experienced spousal physical or sexual violence within the 12 months preceding the survey are similar to levels experienced ever in lifetime.

Gender-based violence in public spaces is equally recognized as widespread, with both women and men across age groups noting that there was no public space in Dili where women and girls could move free from the threat of sexual harassment.¹⁵ However, there is limited data available on such violence and as such, there has been limited investments and attention to addressing sexual violence in public spaces. As indicated in the study, women and men

The lack of respectful and healthy relationships contributes to both intimate partner violence and sexual violence in public spaces. For example, as the number of marital control behaviors displayed by husbands increases, so does the percent of women who initiate violence against their husbands, peaking at 16% within the preceding 12 months. Women are also more likely to have initiated physical violence against their husbands if they reported their husbands get drunk very often, 17% have initiated physical violence within the last 12 months compared with 2% of women who report their husbands do not drink

The DHS survey also showed a marked variation of prevalence among the different municipalities in Timor-Leste: 25% in Baucau of ever married have ever experienced violence by their husband/partner compared to 65% in SAR of Oecusse (see Figure 1).

Figure 1. Prevalence of GBV/IPV in Timor-Leste Municipalities



(DHS, 2016)

¹⁵ UN Women Timor-Leste (2019). Safe Dili Scoping Study. <https://asiapacific.unwomen.org/en/digital-library/publications/2019/03/safe-cities-scoping-study>

Considering this context, the National Action Plan on Gender-Based Violence (2017-2021) sets out a comprehensive framework for the prevention and response to gender-based violence, comprising four pillars focused on prevention of violence before it takes place, providing a comprehensive health and social support to survivors, facilitating access to justice and supporting effective monitoring, coordination and evaluation.

The Penal Code of 2009 and the newly enacted Law Against Domestic Violence (LADV) in 2010 made domestic violence a public crime and included physical, sexual, psychological, and economic violence as the forms of violence. Not only the victims but also anyone aware of the violence could report the case to the police, which is then obliged to file a claim with the Office of the Public Prosecutor within five days, and once registered the case cannot be voluntarily withdrawn. The state acknowledges that the violence is against the public value and interests, not just limited within the private arena. On the other hand, a dualist legal system is institutionalized by the Constitutional Law (Section 2), reflecting the prevalence of the informal justice system among the population. The patriarchal and hierarchical social structure gives greater power to the elderly, mostly men, as spiritual leaders in the family and community. A community-based support system in the units of *suco* (village) or *aldeia* (hamlet), is well developed with the customary dispute resolution mechanism in place. In addition, locally elected authorities, *suco* chief and *suco* council members, were given the competence to promote the resolution of conflicts that arise in the respective community (Law No. 9/2016). These local authorities, therefore, conduct arbitration or mediation. Although they are encouraged to 'resolve' only civil cases, the criminal cases including GBV cases, unless viewed as a 'serious case', are often addressed by the *suco* leaders.

In addition to domestic violence, the problem of sexual harassment has become increasingly recognized as a widespread problem, as identified by UN Women's Scoping Study of Safe Cities (conducted in Dili) and Gendered Marketplace Assessment conducted with TOMAK (conducted in Baucau and Bobonaro)¹⁶. While the Government, through the Civil Service Commission, adopted Guidelines on Addressing Sexual Harassment with Civil Servants in 2017, there remain gaps in the enforcement of laws and policies related to sexual harassment and violence in public spaces and an overall underinvestment on the issue.

1.2. General Information on Organization

UN Women, UNFPA and UNDP are all parts of the United Nations Development system. The three organizations share the same Executive Board which approves each organization's Strategic Plans. The three organizations (together with UNICEF) have developed a common chapter to their Strategic Plans to ensure strong coordination and collaboration. IOM has a closer status with the United Nations and is actively part of the UNCT in Timor-Leste.

Furthermore, the Executive Board approves the agency-specific Country Programmes derived from the UN System-wide UN Development Assistance Framework (now the UN Strategic Development Cooperation Framework - UNSDCF) for each country ensuring that the country level work is clearly linked to the global strategic plans.

UN Women, as the Chair of the UN Gender Theme Group under the Resident Coordinator system will use this forum to ensure coordination between organizations with support of its co-chair, UNFPA. This mechanism will monitor implementation of joint programmes on gender equality (the Joint KOICA GBV Project and the EU-UN Spotlight Initiative) and facilitate capacity development opportunities to the joint project teams, as well as inter-agency support to activities where relevant. This platform will make it possible for the project to exchange knowledge, lessons learned and draw on the expertise of the full UN system, not only the partner agencies. The UN Theme Group on Gender is a part of the Resident Coordinator system of the UN which ensures that the full UN family can track progress on the project. Furthermore, the UN GTG, can also be expanded when necessary to be the convener or larger stakeholder consultations with development partners and CSOs.

Under the UNSDCF 2021-2025, the UN family will contribute to six strategic results, including one dedicated to Governance. This aims to support "the people of Timor-Leste, especially the most excluded, are empowered to claim their rights, including freedom from violence, through accessible and accountable and gender responsive governance systems, institutions and services at national and subnational levels". This project directly supports the

¹⁶ http://tomak.org/wp-content/uploads/2019/02/Gendered-marketplace-assessment_Eng.pdf

Governance Result, which will be coordinated through an inter-agency results group chaired by UNDP and co-chaired by UN Women. In this regard, the project directly contributes to the UN's contributions to Timor-Leste under its new Cooperation Framework signed with the Government in May 2020.

1.2.1. Overview of organization Headquarters (strategic plan, program, expertise, operations, etc.)

UN Women

UN Women is the UN organization dedicated to gender equality and the empowerment of women. A global champion for women and girls, UN Women was established to accelerate progress on meeting their needs worldwide.

UN Women supports UN Member States as they set global standards for achieving gender equality, and works with governments and civil society to design laws, policies, programmes and services needed to ensure that the standards are effectively implemented and truly benefit women and girls worldwide. It works globally to make the vision of the Sustainable Development Goals a reality for women and girls and stands behind women's equal participation in all aspects of life, focusing on four strategic priorities:

- Women lead, participate in and benefit equally from governance systems
- Women have income security, decent work and economic autonomy
- All women and girls live a life free from all forms of violence
- Women and girls contribute to and have greater influence in building sustainable peace and resilience, and benefit equally from the prevention of natural disasters and conflicts and humanitarian action

UN Women also coordinates and promotes the UN system's work in advancing gender equality, and in all deliberations and agreements linked to the 2030 Agenda. The entity works to position gender equality as fundamental to the Sustainable Development Goals, and a more inclusive world. Operating in 32 countries in Asia and the Pacific region and over 90 across the world, UN Women Timor-Leste focuses on ensuring gender equality and rights-based approach for ending violence against women, advancing women's economic empowerment, ensuring women's participation in peace and security and effective implementation of global norms and standards on gender equality and women's empowerment.

UN Women has been in Timor-Leste since 2001 (previously as UNIFEM) and has contributed to the national legal and policy framework addressing gender-based violence, provided direct support to civil society organizations driving the advocacy behind the legislation (Rede Feto, Fokupers, Asia Pacific Support Collective Timor-Leste, Aloia Foundation, etc.), while providing consistent technical assistance to the women's machinery (now Secretary of State for Equality and Inclusion), since its establishment as an office under the Office of the Prime Minister. This has included direct support to the development of the two National Action Plans on Gender-Based Violence (2012-2016, 2017-2021) as well as mentoring and accompaniment for monitoring, evaluating and costing the Plans. UN Women, with its coordination mandate, also supported SEII to establish the Gender Equality Coordination Group in 2016, which meets twice a year to address gaps in multi-stakeholder coordination of gender equality issues, including around GBV. The Office has supported line ministries to understand their commitments and increase engagement on the issue (with Ministry of Social Solidarity and Inclusion in Costing the NAP GBV 2015-2017, Ministry of Interior in its leadership of the NAP on Security Council Resolution 1325 on Women, Peace and Security, with Statistics on the Gender and SDG Brief, 2017-2018, and with the National Police, in supporting its first Gender Strategy). UN Women has produced a variety of studies and analysis with national partners on the situation of VAWG, contributed to capacity development of national stakeholders on evidence based programming to end VAWG and has designed programming on using a whole-school approach to prevention of violence (with Association of Men against Violence, Aloia Foundation 2014-2016, with Ministry of Education 2018-2019), arts-based advocacy (Laloran Festival- 2015), work with media (Search for Common Ground HerStories- 2015). UN Women facilitates platforms for marginalized groups to gain visibility (violence against LGBTI and domestic workers) and opens new efforts (e.g. on sexual harassment with the Civil Service Commission and national CSOs). UN Women's experiences, history of expertise in Timor-Leste and across the world and collaborative approach enable it to contribute to meaningful and lasting change for gender equality and women's rights to live free of violence.

UNFPA

UNFPA is the United Nations sexual and reproductive health agency. UNFPA works in more than 15 countries and territories that are home to the vast majority of the world's people. Its mission: to ensure that every pregnancy is wanted, every childbirth is safe and every young person's potential is fulfilled.

UNFPA Supports countries through:

- Reproductive health care for women and youth in more than 150 countries – which are home to more than 80 per cent of the world's population
- The health of pregnant women, especially the 1 million who face life-threatening complications each month
- Reliable access to modern contraceptives sufficient to benefit 20 million women a year
- Training of thousands of health workers to help ensure at least 90 per cent of all childbirths are supervised by skilled attendants
- Prevention of gender-based violence, which affects 1 in 3 women
- Abandonment of female genital mutilation, which harms 3 million girls annually
- Prevention of teen pregnancies, complications of which are the leading cause of death for girls 15-19 years old
- Efforts to end child marriage
- Delivery of safe birth supplies, dignity kits and other life-saving materials to survivors of conflict and natural disaster
- Censuses, data collection and analyses, which are essential for development planning

The work of UNFPA is based on the premise that all human beings are entitled to equal rights and protections. UNFPA focuses on women and young people because these are groups whose ability to exercise their right to sexual and reproductive health is often compromised. In Timor-Leste, UNFPA supports government to address GBV, supporting the country to promulgate the Law Against Domestic Violence, the establishment of referral networks and related SOPs, the National Action Plans on GBV (2012-2016 and 2017-2021), and to improve the capacity of health services to respond to GBV. In terms of past activities that link up with the current proposal, UNFPA was the key contributor to the government in the development of the GBV National Action Plan in the health sector. Hence, it is the organization best placed to support GBV response through the Ministry of Health (MoH). Apart from supporting the development of the GBV NAP, UNFPA has supported MoH developed national guidelines for the health sector response to GBV, approved in late 2018 and is currently being disseminated. Thus, the organization has the greatest familiarity with the guidelines in the country and has access to the expertise needed to support the capacity building necessary and the roll out of the GBV NAP for the health sector. The current proposal relies on a functioning referral system and UNFPA was the key partner in working with the Ministry of Social Solidarity and Inclusion to develop sets of Standard Operational Procedures including on Referral pathways to support victims. The referral guidance has since been revised with support from the Asia Foundation. Links with CSOs to ensure that lessons learned and best practices are recognized in the future work on GBV is of great importance. Historically, UNFPA has supported civil society organizations as sub recipients of our Implementing Partners such as ALFELA, FOKUPERS, CASA VIDA, Uma Mahon Salele and PRADET. Apart from financing, this has included capacity building, supporting the start-up of organizations and ensuring their access to international best practices through support for training and participation in international meetings and conferences. Hence, UNFPA has the links to be able to draw on lessons learned and best practices from civil society while also working closely with the formal government institutions necessary for mainstreaming the work on GBV into programmes of work to ensure long term sustainability of the health sector response.

United Nations Development Programme (UNDP)

UNDP is committed to human development, providing supports to development processes often in conflict-affected settings over the last fifty years. UNDP offices are currently operative in more than 170 countries in the world. With its broad mandate, UNDP can employ multi-faceted and context-tailored approaches to a range of areas that hinder human development. The programme areas in which UNDP is specialised in cover all levels of development such as governance, peacebuilding, poverty reduction, climate change, gender equality, and crisis response. Since 2015, UNDP supports governments to achieve Sustainable Development Goals (SDGs) through policy assistance and implementation.

Together for Equality: Preventing and Responding to Gender-Based Violence in Timor-Leste, November 2020

The 'UNDP Strategic Plan' outlines overarching vision and outcomes that help harmonise its global efforts, basing its work on the principles of universality, equality and leaving no one behind. The 'Strategic Plan 2018-2021' sets out the direction for a UNDP that helps countries achieve the 2030 Agenda for Sustainable Development. By 2021, we want to catalyze tangible progress on:

- Eradicating poverty in all its forms and dimensions, and keeping people out of poverty;
- Accelerating structural transformations for sustainable development, especially through innovative solutions that have multiplier effects across the Sustainable Development Goals;
- Building resilience to crisis and shocks, in order to safeguard development gains.

The Strategic Plan describes how UNDP will better adapt to the range of country contexts in which we work, framed through:

- The three broad development settings to which our approach responds;
- A series of signature solutions which define the core work of UNDP;
- The two platforms through which we will deliver our work:
 - Country Support Platforms for the Sustainable Development Goals;
 - A global development advisory and implementation services platform;
- An improved business model to underpin our efforts

In 2018, UNDP developed its Third Gender Equality Strategy 2018 – 2021, directly contributing to SDG 5, but also a vital component of achieving progress across all the other sustainable development goals, considering that gender equality reaches 36 targets and 54 indicators across all SDGs. Taking into account the broad mandate of UNDP, the Gender Equality Strategy sets a tone for how UNDP will elevate and integrate gender equality across all of our work.

In particular, it outlines four priorities which are called to attention under UNDP Signature Solution 6 and address fundamental structural barriers to gender equality. They are:

- Removing structural barriers to women's economic empowerment, including women's disproportionate burden of unpaid work;
- Preventing and responding to gender-based violence;
- Promoting women's participation and leadership in all forms of decision making; and
- Strengthening gender-responsive strategies in crises (conflicts and disaster) prevention, preparedness and recovery

Specifically, in Timor-Leste, as part of SDG 5, UNDP supports national partners to develop and implement the required legal and policy frameworks to combat sexual and gender-based violence since the beginning of the country's existence in 2002. UNDP's contribution to gender equality in Timor-Leste in the past includes improving access to justice for survivors of gender-based violence, ending impunity for perpetrators and providing survivors with multi-sectoral support and services. The work in the field of gender equality, economic empowerment and democratic governance has been focused on service delivery and capacity building of the justice institutions, the national police, national prisons, Electoral Management Bodies, inclusive processes for the municipal governments, empowering women entrepreneurs, etc. UNDP in Timor-Leste has work on increasing political representation of women in National Parliament and civic education and support of women civil society organizations MOFFE and CAUCUS in strengthening political representation of women. UNDP has provided support to the justice system since 2003 in different phases and in cooperation with different institutions and civil society organizations throughout the years. Gender Based Violence is a critical component, as for instance, in the UNDP's Justice Project, one component focuses on "improved access to justice and dispute resolution mechanisms for all with a focus on women and more vulnerable populations", with two targets explicitly mentioning GBV¹⁷. Efforts in addressing GBV have generated positive results, for example, as of October 2018, out of all cases resolved through the mobile courts supported by UNDP, 58% were related to GBV. The "PNTL Strengthening Governance and Service Delivery" project has also targeted GBV by providing capacity building to PNTL staff, especially the Vulnerable Persons' Unit (VPU), on incident report

¹⁷ Justice System Programme (Phase IV), Quarterly Progress Report, Q2 2018.

and referral coordination to systematically record the cases of GBV in Baucau in coordination with referral network¹⁸, as well as community engagement workshops focusing on strengthening the GBV referral network for community leaders in Baucau City, Baguia and Quelicai¹⁹.

Moreover, the partners in this work include state actors, public institutions, women's groups, civil society organizations and movements, and traditional, community and religious leaders. As changing attitudes and ending harmful practices is integral to ending gender-based violence, UNDP also supports awareness-raising and behavior change campaigns, including through community-based conversations, meaningful engagement with men and boys, and working with the private sector and public institutions.

International Organization for Migration (IOM)

IOM is the leading United Nations Agency in the field of migration and works closely with governmental, intergovernmental and non-governmental partners to ensure the orderly and humane management of migration. IOM also works to promote international cooperation on migration issues, identify practical solutions to migration problems and to provide humanitarian assistance to migrants in need, including refugees and internally displaced people.

With 172 member states and offices in over 100 countries, IOM is dedicated to promoting humane and orderly migration for the benefit of all. It does so by providing services and advice to governments and migrants to:

- Assist in meeting the growing operational challenges of migration management.
- Advance understanding of migration issues.
- Encourage social and economic development through migration.
- Uphold the human dignity and well-being of migrants.

IOM activities are cross-cutting and include the promotion of international migration law, policy debate and guidance, protection of migrants' rights and migration health. IOM also addresses the gender dimension of migration, with a focus on understanding how gender relates to different types of migration; responding to how gender influences access to social services, economic growth, and migrant capacities, risks and vulnerabilities (particularly those associated with GBV and sexual exploitation); and, ensuring diversity and inclusion in programming and partnership with governments, and other humanitarian and development actors. Through its Gender Equality Policy, IOM reaffirms its commitment to ensuring that gender is mainstreamed throughout all of its projects, policies and activities.

1.2.2. Overview of County Office (CO) in Timor-Leste (structure, operations, activities, etc.)

UN Women has been present in Timor-Leste since 2001 (as UNIFEM), and as such, has operated throughout periods of crisis and transition. UN Women's goal in Timor-Leste is to promote the rights of women and ensure inclusion of women's participation and leadership as the country works towards safeguarding stability and promoting development. UN Women focuses on four priority areas: strengthening women's economic empowerment, ensuring women's participation and leadership in all aspects of peace and security processes, addressing violence against women and ensuring implementation of international gender equality norms and standards, with cross-cutting attention to ensuring national development planning and budgeting is gender-responsive. UN Women also coordinates and promotes the UN system's work in advancing gender equality, as Chair of the inter-agency Gender Thematic Group (together with UNFPA), which leads coordinated advocacy on GBV, among other issues, as well as

¹⁸ "UNDP assisted Baucau sub-district Vulnerable Person's Unit (VPU) Officers to make a case report of gender-based violence", December 20, 2018 (http://www.tl.undp.org/content/timor_lete/en/home/newscentre/articles/2018/undp-assisted-baucau-sub-district-vulnerable-persons-unit-vpu-.html).

¹⁹ "Baucau community leaders encouraged to work collaboratively with PNTL and service providers to support gender based violence survivors", October 7, 2018 (http://www.tl.undp.org/content/timor_lete/en/home/newscentre/articles/2018/baucau-community-leaders-encouraged-to-work-collaboratively-with.html)

Co-Chair of the Gender Coordination Group with SEI and since the COVID-19 pandemic, as Chair of the Gender and Protection Working Group, in collaboration with UNICEF.

The UN Women Timor-Leste Country Office team consists of 18 staff, including the Head of Office, Operations Manager, four national Programme Officers and one international Programme Specialist, a Communication Officer, a New Zealand Volunteer, Finance Associate, a Coordination Analyst, five project/administrative/executive assistants, and two drivers. The Timor-Leste Country Office is supported by UN Women's Regional Office for Asia and the Pacific, and close collaboration across the country offices ensures UN Women can access the organization's expertise and networks across the region. Additional staff will be recruited to manage implementation of the project.

UNFPA cooperation with Timor-Leste began with the provision of emergency reproductive health kits immediately following the crisis of September 1999. In 2003 UNFPA established its Country Office in Timor-Leste and began its 1st Country Programme (CP). Since 2003, UNFPA Timor-Leste has supported governmental and non-governmental organizations activities on addressing population issues and has strongly promoted reproductive rights and gender equality as key elements to achieve human rights and human dignity. UNFPA Timor-Leste Country Office is comprised of the Representative, Country Assistant Representative, International Operations Manager, Census Technical Specialist, Junior Professional Officer, four national programme officers, one M&E Officer, two programme associates, two programme assistants, four Admin and Finance staff, 1 KOICA Volunteer for Communication and one IUNV GBV Programme Specialist and five drivers. Additional staff will be brought on board to ensure implementation of its part of the project.

With the guidelines of the global Strategic Plan, the Gender Equality Strategy 2018 - 2021 and the UNDP Country Programme Action Plan (2015-2020) tailored for the country-specific situation, UNDP Timor-Leste provides technical assistance to the Government of Timor-Leste to achieve stability and sustainable development. UNDP Timor-Leste, led by the Resident Representative, has also transitioned and is currently comprised of two programmatic portfolios: Democratic Governance, and Sustainable Development and Resilience. The areas of Justice and Security are existing projects in the current portfolio of the Democratic Governance Programme, which also works with National Police of Timor-Leste, Anti-Corruption, Decentralization, National and Municipal Elections and Special Economic and Social Market Zone of Oecusse (ZEESM). On the Country Office level, within the Programmes there are two focal points for matters of horizontal level that deal with issues that tackle all programmes and projects UNDP runs. Namely, the Youth Focal Point and the Gender Focal Point have overview over the respective issues for whole UNDP. In addition to this, during 2018 - 2019, UNDP Timor-Leste undergoes the Gender Seal Corporate Certification Process, led by the Gender Focal Point. The process aims and increasing transformative gender equality results in the countries of intervention, but also within the UNDP structures internally. Moreover, the process is an enormous learning opportunity, and it does ensure and systematized the gender mainstreaming and analysis across all portfolios, projects and programmes of UNDP in Timor-Leste.

The current programmatic structure is a result of a restructuring the office went through in the beginning of 2017, to be able to respond more swiftly to fast changing environment of the funding climate and also to the needs of SDG implementation in the country. Those two programmes mentioned above are part of one SDG Acceleration Team, covering project management cycle, innovation, quality assurance and policy, currently consisting of 9 staff, including two Programme Analysts, two Programme Associates, KOICA Multilateral Cooperation Officer (KMCO), one Communication Analyst and two Communication Officers, and the Delivery Team of one Programme Analyst, one Programme Associate, and one Executive Assistant. The Operations Manager, on the other hand, leads the Finance Department of two staff, Human Resources department of three staff, the Procurement and General Administration of five staff, and Common Services Team (IT and Common Premises) of four staff. The Operations Department consists of 14 staff in total under the Operations Manager.

IOM has worked in Timor-Leste since September 1999. The IOM country office in Timor-Leste supports governmental and non-governmental organizations to develop coherent and well-coordinated migration programs and policies. In Timor-Leste, IOM leads programs in emergency and post-crisis migration management; primarily in response to natural disasters. IOM also works to strengthen the institutional capacity of the Timor-Leste government to address the intersection of migration, climate change and environmental degradation and builds community resilience to prepare for and respond to natural disasters. Furthermore, IOM provides support and technical assistance to both government and civil society on regulating migration dealing with emerging trends, such as human trafficking and migrant smuggling. These activities include working with the government to develop legal frameworks and

coordination mechanisms. IOM also leads public information campaigns about migration and provides direct assistance to migrants and internally-displaced people.

Gender has been a key component of IOM's work across the Pacific region, primarily through gender-responsive humanitarian action in the immediate aftermath of disasters with a focus on identifying durable solutions for affected communities. IOM programs address GBV prevention, mitigation and response in both development and humanitarian settings. IOM has been working closely with national authorities at borders to protect the human rights of migrant populations, as well as supporting policies and pathways for the economic empowerment of women, including efforts to empower women as agents of change in peace building and conflict. In 2018, IOM launched its institutional framework for addressing GBV in Crises (GBVIC)²⁰, which reinforced IOM's accountability to crisis-affected populations, partners, and donors by articulating and advocating for a robust and consistent approach to quality GBV interventions. The IOM GBVIC Framework's objective is to ensure that the safety, dignity, well-being and equitable access to services for all crisis-affected persons, especially women and girls, is prioritized, integrated and coordinated across all IOM operations.

IOM uses a Community-Based Planning (CBP) approach, a participatory Community Based Disaster Risk Management (CBDRM) planning process that includes all socio-economics groups. This approach ensures the needs, vulnerabilities, priorities and aspirations of the whole community – including those who are socially, politically and economically marginalized (such as woman, girls and youth) – are incorporated into suco-based disaster plans. The hypothesis of the CBP program in Timor-Leste is that natural disasters and forced population mobility erodes social cohesion within communities, with the residual effects of gender-based violence and the exclusion of women from participating in disaster preparedness and response. The CBP approach will empower women and girls to be able to analyze, discuss and confront the risks involved with disaster events and conflicts of the past to understand their (negative) impact on achieving positive development outcomes. Throughout the process, through skilled facilitation by IOM's disaster management experts, emphasis is placed on dialogue and risk identification by the most vulnerable socio-economic groups. IOM Timor-Leste is currently comprised of 25 staff members, including the Chief of Mission, 2 human resources and finance staff, 1 Procurement Officer, 3 Project Managers, 13 national project assistants, 1 Monitoring & Evaluation Officer, and 3 drivers.

1.2.3. Strategies and activities for responding to the problem

The project uses a holistic approach, which aims to strengthen national institutions, while transforming harmful norms that perpetuate GBV in both public and private spaces, but limit access to essential services for survivors. Through targeted partnerships, advocacy, engagement with the groups most affected by gender-based violence, capacity development that is institutionalized and leveraging each agency's expertise and international best practices in what works to end violence against women and girls, the project will have a wide-reaching impact across Timor-Leste.

The Project is also informed by previous joint UN programming on gender in Timor-Leste, namely, the MDG Spanish Fund Joint Program (JP) -Supporting Gender Equality and Women's Rights in Timor-Leste (2009 – 2012). The MDG-F Joint Programme²¹ made key recommendations through its evaluation²² and the evaluation of 24 joint gender programme around the world, which highlight the need for the UN to "*ensure a clear strategic rationale for joint gender programmes and firmly ground designs in development effectiveness efforts at country level*" and for the Government to "*ensure full ownership of and accountability for joint gender programmes, as part of wider strategizing and capacity development for gender.*"²³ Since the project's initial conceptualization, the EU-UN Spotlight Initiative was designed and initiated in Timor-Leste, which is focused on eliminating intimate partner violence and complements the approach identified in the Joint KOICA Project. Considering these experiences, the project activities are identified is below:

²⁰ https://publications.iom.int/system/files/pdf/iom_gbvic_framework.pdf

²¹ Implemented December 2008 – August 2012, by UN Women (lead agency), UNDP, UNICEF, IOM and UNFPA

²² MDG-F, Supporting Gender Equality and Women's Rights in Timor-Leste – Final Evaluation (August 2012).

²³ MDG-F, Joint Evaluation of Joint Programmes on Gender Equality in the United Nations System – Final Synthesis Report (November 2013), p.9-10

Outcome 1: Transformed attitudes, behaviours and social norms

Output 1.1: Increased knowledge and skills in students, youth, teachers and parents to promote respectful relationships, based on gender equitable norms

- 1.1.1 Develop material and roll-out classroom and extra-curricular programmes with pre-secondary students, parents and educators to change harmful attitudes and social norms and prevent sexual harassment and school-related GBV in Bauçau, Covalima and RAEOA.
- 1.1.2 Conduct a gender analysis of national sports associations and design GBV and sport group sessions to prevent young athletes from sexual harassment and promote their roles as advocates for equitable gender roles and positive masculinities.
- 1.1.3 Develop tools, materials and provide technical support to the National University of Timor-Leste for its "Safe Campus" initiative to prevent sexual violence on campus
- 1.1.4 Support Scouts in the targeted municipalities and National Scouts Association to roll-out the "Voices against Violence" Curriculum to promote respectful relationships using peer-education and advocacy.²⁴
- 1.1.5 Support comprehensive sexuality and reproductive health education in youth centres and schools include a provision of Comprehensive Sexuality Education (CSE) and utilize existing extra-curricular materials to promote gender-equitable attitudes, greater equality of power in intimate relationships and reduce the incidence of GBV.

Output 1.2: Enhanced economic empowerment opportunities for women who face multiple forms of discrimination

- 1.2.1 Provide women informal workers with economic and social empowerment through financial literacy and entrepreneurship training, income generation activities, combined with group education sessions for women and their partners on gender norms, power and communication.
- 1.2.2 Support comprehensive resilience building against emerging emergencies (COVID-19) for vulnerable groups, conduct awareness raising and build the capacity of 30 women's groups and women leaders to participate in DRR decision-making structures, develop GBV integrated CBDRM plans, and identify CBDRM resilient and sustainable livelihood projects that contribute to enhancing women's economic empowerment.

Output 1.3: Increased access to support for survivors of GBV, persons with disabilities, members of the LGBTI community, among other marginalized groups

- 1.3.1 Support civil society to conduct outreach and training for survivors to access peer-support and self-care skills, reduce stigma and encourage help-seeking²⁵, using mobile technology and other innovative platforms.
- 1.3.2 Conduct analysis of cases of sexual violence in public (including workplaces and educational institutions), and support development of recommendations

Outcome 2: Essential Health and Justice Services

Output 2.1: Strengthened capacity of health workers/providers' to provide coordinated responses to gender-based violence.

- 2.1.1. To conduct awareness raising and understanding of GBV through evidence-based advocacy among senior policy-makers and within health system, about its nature, health and other consequences, risks and causal factors through in-country workshops.
- 2.1.2 To conduct community awareness workshops about availability of and need for timely access to health-care

²⁴ The roll out of Voices against Violence will be given to male and female scouts who complete a series of activities to understand the root causes of violence in their communities, to educate and involve their peers and communities to prevent such violence, and to learn about where to access support if violence is experienced. It has a potential to reach the 11,000 National Scouts and will be adapted from "Voices against Violence" is a co-educational curriculum developed by the World Association of Girl Guides and Girl Scouts (WAGGGS) and UN Women, with inputs from young people. <http://www.unwomen.org/en/digital-library/publications/2013/10/voices-against-violence-curriculum>

²⁵ This supports NAP GBV Output 2.4 (Strengthened accessibility to adequate crisis information for survivors- Activity 8 – develop and disseminate community information/outreach on victim rights and services). This responds to the limited access to information among community members on the services available for survivors of violence since this information is not readily known across communities (who to go to and what services they can provide, considering help-seeking is so low).

- services through health facilities/In partnership with national NGO (with well-established community based group) support MoH to conduct outreach activity on health impact of GBV and available services
- 2.1.3 Enhance the participation of health care providers in the existing referral network through hosting referral meetings to support strengthening coordination within health system and with other sectors for a strong multisectoral response to GBV.
 - 2.1.4 Provide Technical assistance to MoH through placement of a National coordinator and 4 regional coordinators.
 - 2.1.5 Strengthen ability of health care providers to respond to GBV through review and update of national guideline for health service providers on identification, management and referral of victims/survivors of GBV and be more inclusive.
 - 2.1.6 Develop supervision tools including HMIS reporting format (while ensuring anonymity and confidentiality) and train and support supervision to health facilities on the utilisation and reporting.
 - 2.1.7 Establish Medico Legal committee to provide expertise and knowledge in relation Health sector involvement to legal process related to GBV cases.
 - 2.1.8 Establish within prioritized health facilities (in Dili and project focus municipalities) spaces to provide LIVES and other components of essential health service package as required ensuring confidentiality and privacy.
 - 2.1.9 In coordination with existing tertiary educational institutions, through development of teaching aid materials to integrate content about the identification of, and response to and referral of GBV in pre-service curriculum building on WHO guidelines and tools.

Output 2.2: Enhanced capacity of the justice and law enforcement institutions to provide survivor-centred access to justice for women, including survivors of gender-based violence

- 2.2.1 Provide technical assistance to the PDO and CSOs' in-house lawyers to enhance their knowledge, skills, and systems to handle GBV cases
- 2.2.2 Provide legal outreach and consultations on GBV and existing systems, institutions and procedures in place through PDO's Access to Justice Clinics in the Dili, Baucau, Suai, and Oecusse Judicial Districts
- 2.2.3 Provide technical assistance to the PNTL and Office of Prosecutor-General in developing the institutional capacity in the GBV case management and protocols
- 2.2.4 Conduct monitoring on GBV cases in trials in the permanent and mobile courts and support advocacy

Outcome 3: Enhanced legislation and policy environment for eliminating violence against women and girls and other forms of gender discrimination, is in place and translated into action

Output 3.1. Mobilized community members, local authorities and media in support of gender equality and safety in public spaces

- 3.1.1. Support traditional, religious leaders, persons with disabilities and LGBTI persons to become advocates for safe public spaces through dialogue and awareness-raising sessions organized by civil society.
- 3.1.2. Build national capacity for multi-sectoral joint rapid response and crisis management through SOP development and providing training for first responders to identify needs of vulnerable groups, mitigate risks of GBV during disaster response and safely respond to disclosure of GBV incidents.²⁶
- 3.1.3. Map and assess evacuation centres and routes in communities with a high risk of displacement, promoting participation of community members, including women, men, boys and girls in the set-up of evacuation centers.²⁷
- 3.1.4. Develop guidelines and train media personnel on gender-sensitive reporting of sexual violence in public spaces (including places of work)
- 3.1.5. Support media monitoring on gender issues, including in the context of sexual violence in public spaces and

²⁶ The training will focus on building the national response capacity and reducing GBV risk factors, as well as sexual exploitation and abuse (SEA) affecting women in disaster-prone communities. Based on the IOM GBV framework focused on addressing root causes of GBV, mitigating the risk of GBV in preparing and responding to disasters, and improving support for GBV survivors, the activity will ensure that first responders are aware of existing GBV referral pathways established during emergencies, including health services, case management services for GBV and Child Protection, as well as security, legal and psychosocial services.

²⁷ Ensuring that safe and appropriate Complaint and Feedback Mechanisms are established in each evacuation centre for identifying and responding to concerns and needs of vulnerable individuals/groups affected by disaster, and can be used as safe channels to respond to complaints, including sexual exploitation and abuse cases, for accountability of service-providers.

natural disasters/ pandemics (with journalism students and civil society).

Output 3.2. Public institutions have strengthened capacities for planning, implementing and reporting on VAWG in public and private spaces

- 3.2.1. Strengthen capacity of SEII personnel and municipal focal points on gender budget analysis and conduct mapping of investments in gender equality and women's empowerment.
- 3.2.2. Design ToT and roll-out training for Municipal Gender Working Groups on conducting annual gender budget assessments and allocating investments for safe public spaces.
- 3.2.3. Conduct workshops for members of NAP GBV Inter-ministerial Coordination Mechanism²⁸ for better tracking and reporting on ERAW progress (topics on the RESPECT Prevention Framework, Essential Service Package²⁹, monitoring, sexual harassment and reporting mechanisms.
- 3.2.4. Provide technical support and training to Government stakeholders (MSSI, MOI, SEII, PNTL) on protection, GBV core concepts and principles, risk identification, GBV mitigation measures, PSEA, AAP, Code of Conduct, available support, and referral pathways.³⁰
- 3.2.5. Provide technical support to the National Disaster Operating Center (NDOC) to ensure sex- age and disability-disaggregated data (SADDD) is collected to generate evidence and inform disaster response systems.³¹

Output 3.3: Strengthened civil society capacity to analyze and advocate for Government funding for addressing sexual violence in public spaces and GBV-related policies

- 3.3.1 Provide technical assistance and guidance for civil society to jointly track progress and report on efforts to address sexual violence in public spaces, in line with government gender equality commitments, including NAP GBV, CEDAW and UNSCR 1325
- 3.3.2 Conduct training with CSOs in targeted municipalities to conduct safety audits and determine costs of recommendations related to creating safe public spaces.
- 3.3.3 Conduct training on evidence-based advocacy and support joint advocacy initiatives, including survivors of violence, to facilitate investment in the NAP GBV and safe public spaces.

1.2.4. Organization's capacity on implementing the Project (expertise of personnel, previous experience relevant to the proposed project, etc.)

UN Women has been working in Timor-Leste for more than 16 years, with programming to empower women to have income security, decent work and autonomy, and to build sustainable peace and resilience through women's leadership and decision-making across sectors, including in the prevention of natural disasters and conflicts. These efforts support government plans and budgets that are gender responsive and create the conditions for women and girls to enjoy their right to live free of violence. UN Women also coordinates and promotes the UN system's joint work in advancing gender equality, facilitating knowledge exchange based on best practices and connecting

²⁸ Inter-ministerial Coordination refers to SEII's coordination between ministries, including those in the Inter-ministerial NAP GBV Commission, but also other state institutions, such as the Civil Service Commission (ie. to ensure GBV in induction, etc.).

²⁹ The United Nations Essential Services for Women and Girls Subject to Violence, a partnership by UN Women, UNFPA, WHO, UNDP and UNODC, aims to provide greater access to a coordinated set of essential and quality multi-sectoral services for all women and girls who have experienced gender-based violence. See: <http://www.unwomen.org/en/digital-library/publications/2015/12/essential-services-package-for-women-and-girls-subject-to-violence>

³⁰ Institutional and systems strengthening and capacity building to Government stakeholders to address the root causes of GBV and ensure all survivors of GBV access survivor-centred, and multisectoral services will include training on protection, GBV core concepts, risk identification and mitigation measures, child protection, addressing specific needs of persons with disabilities, PSEA, AAP and Code of Conduct. In addition to adapting referral pathways to ensure that multisectoral services are available to GBV survivors in Timor-Leste during disasters, including health-care services, psychosocial support, case management, safety and security options, legal support and access to justice, economic and social reintegration. This will be tested with the participation of the community, to ensure services will be appropriate to context.

³¹ This includes support to systematically collect and review Sex, Age and Disability Disaggregated Data (SADDD) on differential needs and access to assistance, as well as GBV risk information, such as breakdown by Age, Sex and Disability (SAD) accessibility and safety questions (lighting, distance to distribution site, locations of unsafe areas), services (health, including SRH), confirmation of referral mechanisms or lack of information, and specific communications channels needed for survivor support.

international gender equality commitments to the realities of diverse women and men across the country. These focus areas are key to accelerating diversification of the economy and equitable employment opportunities. UN Women's Strategic Note in Timor-Leste (2015-2020) is aligned with Timor-Leste's key development priorities, from national commitments including the country's Strategic Development Plan 2011-2030 as well as Roadmaps for the Public Finance Management Reform and the Sustainable Development Goals and the UNDAF. It directly supports sector specific plans and gender equality commitments related to National Action Plans for Gender-Based Violence (2017-2021), Security Council Resolution 1325 on Women, Peace and Security (2016-2020), advancing recommendations of the CEDAW Committee and for improving the lives of rural women as set out in the 2015 Maubisse Declaration.

Partnerships are the essence of UN Women's work. We collaborate with diverse civil society organizations and actors, key Government institutions at national and municipal levels, UN sister agencies, bilateral and multi-lateral institutions and the private sector, among others. With this approach, UN Women successfully implements projects dedicated to addressing GBV in Timor-Leste and across the world. In Timor-Leste, recent and current projects dedicated to GBV include:

- *EU-UN Spotlight Initiative to Eliminate Violence against Women and Girls in Timor-Leste* (2020-2022, EU funded)
- *Leveraging Technical Tools, Evidence and Community Engagement to Advance the Implementation of Laws and Provision of Services to Women Experiencing Violence in South-East Asia Phase I* (2013-2015, DFAT-funded)
- *Preventing and Addressing Violence against Women and Girls (VAWG) in Albania, Mexico and Timor-Leste- GLOBAL Programme* (2014-2016, EU-funded)
- *Strengthening Women Survivors of Violence in Timor-Leste* (Implemented by Asosiasaun Chega Ba Ita (2015-2017 - via UN Trust Fund to End Violence against Women)
- Joint UN (UN Women, WHO, UNFPA, UNICEF and Human Rights Advisor's Unit) *Empower for Change- Reducing violence and discrimination against women and children with disabilities in Timor-Leste* (2018-2020- Multi-donor Trust Fund on Partnerships for Rights of Persons with Disabilities)
- *School-based prevention of violence against women and girls* (2018-2020-DFAT and KOICA - via Regional Office for Asia Pacific- implemented in Timor-Leste and Viet Nam)

An international Programme Specialist will be hired for the Project as well as a National Monitoring and Evaluation Officer to support monitoring and reporting.

UNFPA is one of the leading partners with the government of Timor-Leste. The organization started its operations in the country soon after independence and has a long-standing partnership with the country. Furthermore, by working in collaboration with the government, UNFPA is well placed to ensure sustainability of its interventions as they can be mainstreamed into standard work. This approach also works for UNFPA partnerships with national NGOs. Internally to the UN, UNFPA chairs the Youth Results Group of the United Nations and is the co-Chair of the UN Theme Group on gender. This ensures coordination and avoidance of overlap and duplication. UNFPA is one of the leading agencies on gender equality and women empowerment. UNFPA globally leads the GBV cluster in humanitarian response.

UNFPA Timor-Leste supported government during the development of Law against Domestic Violence Law, the development and implementation of National Action Plan GBV 2021-2014 and NAP GBV 2017-2021, the establishment of Referral Network which chairs by MSS, the recruitment of 13 GBV case workers in which UNFPA supported initially (in the first year) and was taken over by MSS under state budget.

UNFPA has been part of joint programme and continues to partner with other agencies as part of coordinated support to government and NGOs. In addition to the Joint UN projects mentioned by UN Women, UNFPA and WHO jointly supported MoH on the roadmap of health sector response to GBV. Health sector response to GBV activities were well integrated into the NAP GBV 2017-2021.

UNDP is a longstanding institution in Timor-Leste, with the experience, capacity and relationships to implement the project effectively and efficiently. UNDP benefits from longstanding relationships with the Government of Timor-Leste including the justice institutions such as the Ministry of Justice, Courts, Office of Prosecutor-General, and Public Defender's Office, other UN organizations, and key international and local NGOs and citizens groups, as well as gains from structural resilience that allows it to draw resources from its wider organization and regional specialists to meet

greater challenges.

In the area of justice, UNDP is equipped with subject specialists who have worked on exactly these issues as part of the Justice Project that was initially launched in 2003. UNDP's Justice Project has gone through substantial changes in the form of assistance provided to the justice sector. Gender has been a critical component of the Justice Project as seen in one of the project outcomes elaborates "improved access to justice and dispute resolution mechanisms for all with a focus on women and more vulnerable populations", with two targets explicitly mentioning GBV³². Based on the internal analysis, the UNDP external evaluations, and the overall Strategic Plan 2018 – 2021, the justice programme needs to take more robust approach to reach the most vulnerable and in the context of Timor-Leste. UNDP will build on its existing partnerships with the justice institutions to bring justice to GBV survivors.

In addition, as mentioned above, UNDP Timor-Leste is undergoing the Gender Seal process, which ensures gender responsive programmes and projects, monitoring and evaluation, communication, advocacy, as well as increased gender equality within all operations and programmes. Namely, this is capacity that will be developed by the end of 2019, which UNDP can rely on and use for the implementation of this project.

IOM has long-standing expertise in the Timorese context concerning migration patterns, causes of displacement, and required steps to protect persons from harm and vulnerability as a consequence of migration. IOM has been working in Timor-Leste since 1999 in a diverse range of areas including Internally Displaced Persons (IDPs) and camp management, support to Internally Displaced Persons (IDPs) voluntary repatriation to communities, reintegration of former combatants, conflict resolution, community stabilization, reconstruction, counter-trafficking and protection of migrants, border management, disaster risk reduction, and migration health. Through its long-standing partnerships with law enforcement agencies, labor organizations and civil society, IOM has helped to reinforce the national response on disaster risk reduction, human trafficking, supported border control and advanced labor migration schemes. IOM has strong relationships with government stakeholders, the civil society sector, police authorities, labour recruiters and other first responders at national, local and municipal levels. IOM has also worked collaboratively with the International Committee of the Red Cross (ICRC), the Humanitarian Country Team, and donors such as DFAT, USAID, KOICA and the EU.

IOM has extensive operational experience in providing support to victims of disasters as well as expertise in building the capacity of civil society partners governments, including technical support for the development of policy frameworks at national, municipal and community levels. IOM is currently in Phase III of its Disaster Risk Reduction – Building Community Resilience Project in Timor-Leste (DRRBCR) Project in Timor-Leste. Through this project, IOM works closely with the Ministry of Social Solidarity and the Ministry of Interior, as well as with the National Disaster Risk Management Directorate (NDRMD) and its Municipal (MDMC), District (DDMC) and Suco Committees (SDMC) and community radio stations to strengthen disaster risk management governance structures and operations across Timor-Leste. This includes mainstreaming gender into capacity building, community resilience, public awareness and the rapid response facility (Incident Command System).

IOM works to address GBV and sexual exploitation in both crisis and non-crisis settings, as well as at national borders. In each setting, IOM advocates in advocating for a robust and consistent approach to quality GBV interventions. IOM's GBV Framework focuses on mitigating GBV risks, supporting survivors and addressing the root causes to contribute towards progressively transforming the conditions that perpetuate GBV. IOM is well positioned to work on legal and policy frameworks to strengthen institutional capacities for measuring progress with government stakeholders (MSS, MOI, PNTL) to improve GBV monitoring and evaluation in disasters using the GBV information management system (GBV-IMS). IOM also has the expertise to work with law enforcement mechanisms to improve reporting mechanisms and combine efforts to ensure violence against women and girls is prevented and quality essential services are available and accessible to victims and survivors through effective gender mainstreaming in disaster risk reduction. Prevention is a critical component of IOMs work in GBV in disasters.

1.2.5. Cooperating organizations in target country

Toward the prevention of GBV through transformed attitudes, behaviour and social norms (Outcome 1) the Project

³² Justice System Programme (Phase IV), Quarterly Progress Report, Q2 2018.

will expand and create new partnerships with civil society and Government entities coordinated through the Secretariat of State Equality and Inclusion (SEII) to ensure evidence-based prevention strategies are applied to mobilize individual and community action, as well as expand awareness, and utilize education and empowerment strategies in an integrated manner based on a shared understanding and approach in line with international evidence on preventing GBV³³. Given the established evidence that school-based interventions have the potential to shape gender equitable attitudes and behaviours among young people, the project will focus on gendered violence in and around schools, facilitating wider engagement with families and the community to change tolerance of violence from pre-secondary to university level, taking forward the National University of Timor Loroosa'e initiative to create a 'Safe Campus'. The Outcome will also leverage partnerships with networks such as the National Scouts Association, sports associations as well as youth groups and civil society organizations supporting survivors and toward greater self-care and survivor-informed recommendations on what is needed to address sexual violence in public spaces. Notably, it will also pilot models of economic empowerment for women in informal employment and their partners as well as women in rural areas at risk of disasters, which will be documented for further adaptation or expansion as relevant.

To strengthen multi-sectoral health and justice sector responses to GBV (Outcome 2), the Project will expand existing partnerships³⁴ with the Ministry of Health (MoH) to ensure that health service providers have the capacity to deliver essential services in line with global standards and guidelines, that these services are made available and accessible to GBV survivors and that survivors understand and can exercise their rights to services³⁵. There is a growing recognition of the public-health burden of GBV, including IPV and the potential for the health sector to identify abused women during routine consultations and provide services to victims once identified.³⁶ This importantly responds to the negative short and long-term health consequences of women who are exposed to violence compared with women who have never been abused³⁷, as well as the effects on health and well-being of children in violent families (e.g. decreased vaccination and nutritional status, increased risk of behavioural and psychological problems, abandonment and early departure from the home).³⁸ Though Timor-Leste has a well-established health system providing services through a tier structure of health institutions throughout the country, there are significant gaps in the health sector's response to GBV (e.g. lack of training in GVB identification and response, distance to available shelters³⁹, limited coordination between health services and shelters and other referral services). GBV response is clearly within the mandate of the MOH and there is an opportunity through multiple service delivery entry points such as antenatal care and family planning to identify evidence of GBV and ensure that women are not further victimized through their treatment in health services. Multi-sectoral services will be supported through greater engagement with survivors and enabling survivors to access critical peer-support and skills in wellness and self-care.

(Outcome 2 cont.) With regard to strengthening more gender-sensitive and -responsive justice system, the Project will closely collaborate with the state's justice institutions. UNDP's Justice Project has long been in partnership with the Ministry of Justice (MoJ) and other justice institutions including the Court of Appeal, District Courts, Office of Prosecutor-General, and Public Defender's Office. As a remedy for injustices of GBV, the Project will provide technical assistance to the National Police, Prosecution Office, and Public Defenders in developing guidelines and operation procedures in supporting the GBV survivors and handling the GBV cases. This technical assistance will be accompanied by training on laws (Family Law, Criminal Law, and Law Against Domestic Violence) and evidence

³³ UN Women, *Flagship Programme Initiatives*, 2015. See UN Joint Prevention Framework and WHO Respect Framework: <https://apps.who.int/iris/bitstream/handle/10665/312261/WHO-RHR-18.19-eng.pdf?ua=1>

³⁴ UNFPA and WHO have an established relationship with the MOH to develop a road map for an integrated response to GBV including the development of national guidelines and are identified as the partners in support of the roll out and implementation.

³⁵ *Ibid.*

³⁶ Prevention of violence: a public health priority (World Health Assembly). Geneva: WHO; 1996.

³⁷ The physical health consequences include both acute injury and a broader range of longer-term impacts, including: (i) poor nutritional status, digestive problems and hypertension; (ii) diminished sexual and reproductive health outcomes, including fertility, infertility, lack of agency over contraceptive use, and higher risk of HIV and sexually transmitted infections (STIs); (iii) poor maternal health outcomes including increased risk for high blood pressure, risk of ante partum hemorrhage and of miscarriage; and (iv) mental health, including risk of depression, low self-esteem and suicide.

³⁸ García-Moreno C, Jansen HA, Watts CH, Ellsberg M, Heise L, *WHO Multi-country Study on Women's Health and Domestic Violence against Women Study Team. WHO multi-country study on women's health and domestic violence against women: initial results on prevalence, health outcomes and women's responses*. Geneva: WHO; 2005.

³⁹ Supported by NGO Pradet <http://www.pradet.org/programs/safe-room-fatin-hakmatek>

gathering, including forensic capacity and peer-to-peer training. In-house lawyers of the specialized CSOs for women and girls will also receive training to intensify the support. For the awareness-raising of the communities and legal consultations for GBV survivors, the existing extrajudicial section of the Public Defender's Office, *Access to Justice Clinics*, will be used across the country, given the PDO's mandate to provide legal information and consultation to the GBV victims (art. 25, LADV). The AJCs office will be built in Oecusse, where the violence against women is recorded the highest (DHS, 2016).⁴⁰ By monitoring the GBV cases in the courts, handling of the GBV cases by all justice institutions (courts, prosecution, and public defenders/private lawyers) will be recorded and reviewed for further action and advocacy. Many of these activities will be implemented through the partnership with local CSOs specializing in legal assistance.

In support of legal and policy implementation (Outcome 3), the Project will mobilize local authorities, community members and media to promote gender equality and safe public spaces. This will work to identify and amplify the voices of community-based advocates as well as strengthen the gender-sensitivity of media's reporting on sexual violence in public spaces. Communication and outreach will utilize social media, platforms such as Youtube as well as other creative channels and technologies. These efforts will generate momentum and attention to complement the continued capacity development, mentoring and accompaniment with Government and CSOs responsible for implementing and monitoring progress against Timor-Leste's international commitments on gender equality, with a focus on violence against women and girls in both public and private spaces. For sustainability, there will be a particular focus on strengthening the leadership of the Secretariat of State for Equality and Inclusion⁴¹ (SEII) for improved gender budget analysis and mapping of investments in gender equality. This will include technical assistance for SEII to lead the Inter-ministerial NAP GBV Commission⁴² and provision of information sessions for Government to assess existing practices in line with global best practices and training for better coordination among frontline service providers, to strengthen knowledge and reporting capacities of the NAP GBV, including on issues of sexual harassment. The Gender Working Group mechanism will be supported at national and municipal levels (in Baucau, Covalima and RAEOA) to conduct gender budget analyses as well as make recommendations related to investments for safe public spaces and in the context of disaster risk reduction as part of the annual planning and budgeting, implementation and monitoring. This will also work to ensure legislative and policy frameworks are adequately resourced and backed by institutional capacities⁴³. This approach is framed by international standards and norms, using a multi-treaty approach (CEDAW and other HR treaties, BPfA and SDGs). These efforts will be complemented by engagement with civil society, in which a safety audit and costing⁴⁴ for safe public spaces will generate evidence and inform advocacy to increase annual allocation of resources for implementation of the NAP GBV, including attention to creating safe public spaces.

2 Justification

Gender-based violence (GBV) remains one of the most pervasive human rights concerns in Timor-Leste⁴⁵, with almost 2 of every 3 Timorese women (15-49 years) reporting having experienced intimate partner violence in their lifetime⁴⁶. Although both men and women experience GBV, women and girls are more often the target, given the

⁴⁰ Oecusse is one of the four 'judicial capitals' in Timor-Leste. The other three judicial capitals are Dili, Baucau, and Suai. In these capitals, the district courts and other justice institutions are established and each court's jurisdiction reaches the entire 'Judicial District' within which the court is located. The Oecusse JD covers the Special Administrative Region of Oecusse-Ambeno, and each of the other three JDs four administrative municipalities (e.g., Dili JD covers Dili, Ermera, Liquica, and Aileu Municipalities). Currently, the AJCs offices are established in Baucau and Suai covering 8 municipalities of the Baucau and Suai JDs. The AJC office for the Dili JD will be established through support of the EU-UN Spotlight Initiative.

⁴¹ Composed of ministries responsible for NAP implementation, including the Ministries of Justice, Education, Health, Interior, and Social Solidarity, and the Secretaries of State for Equality and Inclusion (SEII), Youth and Sports (SSYS), Social Communication and Vocational Training Policy and Employment (SEPFPOE)

⁴² As well as the Ministry of Finance and the Prime Minister's Office Planning, Monitoring and Evaluation Unit (UPMA)

⁴³ UN Women, *Flagship Programme Initiatives*, 2015. [UN Framework to Underpin Action to Prevent Violence against Women and Essential Services Package for Women and Girls Subject to Violence](#), and [WHO Respect Framework](#).

⁴⁴ UN Women, MSS, and National University of Ireland – Galway, *Estimating the resource requirements for a minimum package of essential services for women and children affected by violence in Timor-Leste*, 2017

⁴⁵ Secretary of State for Equality and Inclusion (formerly SEM), NAP-GBV 2017-2021. (December 2016 draft).

⁴⁶ The Asia Foundation. 2016. *Understanding Violence against Women and Children in Timor-Leste: Findings from the Nabilan Baseline Study: Summary Report*. The Asia Foundation: Dili.

unequal power relationships between men and women within the household, in communities and across society.

Gender-based violence occurs in many forms and across the life cycle. In addition to being a fundamental violation of human rights, it has enormous health, social and economic costs. These costs begin with the severe physical, mental and emotional consequences that not only impact individuals that experience abuse, but also those who witness abuse, most often children. This translates into lost productivity in the workforce, high costs to families and public services, reducing the overall well-being of entire countries and their economies, lasting for generations.⁴⁷ Considering Timor-Leste's demographic composition, the impact of domestic violence alone can have devastating consequences for future generations. With the momentum underway toward achievement of the 2030 Sustainable Development Agenda, Timor-Leste has an important opportunity to break this cycle of violence through a multi-pronged approach focusing on the enabling environment for implementation of the existing legal and policy frameworks on GBV, investing in evidence-based primary prevention practices, and building on progress made in the health and justice sectors; capturing learning and supporting national capacities for sustained change. Being a country highly prone to natural disasters, is also crucial to ensure that national preparedness and response plans also integrate gender-based violence prevention, mitigation and response measures to address GBV in the aftermath of disasters. In this regard, the project is addressing violence against women and girls, with attention to sexual violence in public spaces, as well as domestic violence.

The project is a joint UN effort, which enables the investment to have a wider reach than if only engaging one organization. Administered by UN Women as Chair of the Gender Theme Group, the project will leverage UN Women's expertise and coordination mandate on gender equality, alongside the expertise of sister agencies (UNDP, UNFPA and IOM). The project will support the Government of Timor-Leste to prevent GBV improve essential health and justice sector responses to women and children who have experienced violence, and support overall implementation on the full scope of the NAP GBV (2017-2021), in line with its targets. The project builds on the UN's more than 16 years of programming in the country and facilitates the localization of global standards for prevention and provision of essential health services to survivors of violence, and making important connections between efforts addressing domestic violence with violence in public spaces and in the context of disaster risk reduction.

2.2 Problem Statement (including lessons learned)

2.2.1 In-depth situation analysis at the project site

Violence against women – particularly intimate partner violence, sexual harassment and sexual violence – are major public health problems and a barrier to upholding women's human rights. In the 2015 Nabilan Health and Life Experiences Study, 59% of East Timorese women aged 15-49 years who were ever in a relationship reported experiencing some form of physical and/or sexual partner violence in their lifetime.⁴⁸ Fifty-five per cent reported experiences of emotional abuse at some point in their lifetime. Furthermore, 43% reported having been economically abused in their lifetime. Such intimate partner violence has occurred many times for most women (81%) and 77% reported experiences of severe violence, which includes being hit with a fist or with a harmful object, kicked, dragged, beaten up, choked or burnt on purpose, or threatened with or had a weapon used against her. Over half (52%) of women who were injured had injuries that were severe enough to require health care (e.g., cuts, burns, sprains, broken bones or internal injuries) yet only a third of these women received treatment.⁴⁹ Women who have been victims of physical and/or sexual violence are at significantly greater risk of disability, suicidal ideation and almost twice as likely to have clinical depression.^{50,51} Children of women exposed to violence are at greater risks for

⁴⁷ See for example, <http://www.endvawnow.org/en/articles/301-consequences-and-costs.html>

⁴⁸The Asia Foundation: Fact Sheet 1. Intimate partner violence: women's experiences and men's perpetration of violence against women in Timor-Leste. In: Dili: The Asia Foundation, Australian AID and Nabilan; 2015.

⁴⁹The Asia Foundation: Fact Sheet 2. Health consequences of intimate partner violence against women in Timor-Leste. In: Dili: The Asia Foundation, Australian AID and Nabilan; 2015.

⁵⁰The Asia Foundation: Fact Sheet 2. Health consequences of intimate partner violence against women in Timor-Leste. In: Dili: The Asia Foundation, Australian AID and Nabilan; 2015.

⁵¹The Asia Foundation: Nabilan Health and Life Experience Study - Baseline Assessment Report (tentative title). In: Dili: In Progress (2016).

behavioural and adjustment issues such as nightmares, bed-wetting, and being timid or aggressive. Among children, 75% of the study participants reported having experienced some form of physical or sexual abuse as a child and 80% reported experiences of emotional abuse.⁵² Childhood experiences of abuse can significantly increase their risk of depression, suicidal thoughts and substance use problems. A separate study assessing the health practices of 400 men participating in a men's health program by Cooperativa Café Timor found that with respect to perspectives on domestic/community violence⁵³, approximately 40% of men felt that violence was a problem in their Suco. Only 57% felt that a man should not force his wife to have sex against her will, 15% felt that it was ok and 36% were not sure. This is consistent with the findings of the Nabilan Health and Life Experience Study that 36% and 42% of ever-partnered men in Dili and Manufahi, respectively, reported having perpetrated physical and/or sexual violence against a female partner in their lifetime⁵⁴. Mental health and substance abuse are significant issues among men that are associated with perpetration of violence. The Nabilan Health and Life Experience Study found that 30% and 34% of men in Dili and Manufahi, respectively, met the criteria for clinical depression and approximately 10% of men in both Dili and Manufahi reported having alcohol use problems⁵⁵.

Beyond the health consequences of violence, global evidence shows that the social and economic costs to individuals and their families are equally damaging- ranging from lost days at work, lower productivity and reduced ability to participate in social and public life as well as caring for themselves and their family.

Underlying the widespread gender-based violence is gender inequality and the gender norms that in general, place men in a position of power over women. This is further exacerbated by women's economic dependence, gender-bias in marriage, stereotyped gender roles, as well as cultural and social beliefs that put women at the back of men⁵⁶. This is augmented by the limited investment in addressing the problem, with that less than 2% of the State Budget allocated to gender equality commitments annually, and only a part of that directed at addressing GBV. Sexual violence in public spaces is even further under-resourced, given the lack of data in this area and relatively recent attention to the issue.

At the institutional level, the lack of budget translates into a lack of investment in service providers who can deliver survivor-centred services to women who might have experienced abuse and a cycle of under-resourcing holistic prevention interventions. From the education sector, which has a critical role to protect students from violence and promote norms that are equitable, this lack of engagement with sector personnel perpetuates the harmful messages that allow violence to take place in the first instance. As such, this context reaffirms that more needs to be done to prevent violence from taking place and to facilitate support for survivors through quality essential multi-sectoral services.

Since the promulgation of the 2010 Law against Domestic Violence (LADV), there have been two National Action Plans on Gender-Based Violence (NAP GBV) approved in Timor-Leste (NAP GBV 2012-2016 and NAP GBV 2017-2021). There is increased awareness of domestic violence (the most common form of GBV) as a public crime and an increasing number of cases of domestic violence are being brought before the formal justice system⁵⁷. Global evidence affirms that gender-based violence can be prevented and its harms reduced.⁵⁸ This requires investment preventing violence before it begins, working with young girls and boys, their families, empowering women, engaging couples and mobilizing the wider society to promote transformative norms on gender equality and

⁵²The Asia Foundation: Fact Sheet 2. Health consequences of intimate partner violence against women in Timor-Leste. In: Dili: The Asia Foundation, Australian AID and Nabilan; 2015.

⁵³A sustainable men's health program for rural Timor Leste. Small grant program #2, Timor Leste Health Improvement Project Final Report. In: Dili: Cooperativa Cafe Timor; 2014.

⁵⁴The Asia Foundation: Fact Sheet 1. Intimate partner violence: women's experiences and men's perpetration of violence against women in Timor-Leste. In: Dili: The Asia Foundation, Australian AID and Nabilan; 2015.

⁵⁵The Asia Foundation: Nabilan Health and Life Experience Study - Baseline Assessment Report (tentative title). In: Dili; In Progress (2016).

⁵⁶ National Statistics Directorate (NSD) [Timor-Leste], Ministry of Finance [Timor-Leste], and ICF Macro. 2010. Timor-Leste Demographic and Health Survey 2009-10. Dili, Timor-Leste: NSD [Timor-Leste] and ICF Macro.

⁵⁷ Judicial System Monitoring Programme. 2013. Law against Domestic Violence: Obstacles to Implementation Three Years On. JSMP. Dili.

⁵⁸ Joint UN Prevention Framework and WHO Respect Framework.

respectful relationships, while strengthening the quality of more comprehensive services for survivors of gender-based violence.

GBV in Disasters

Timor-Leste is one of the countries in the Asia Pacific region highly prone to severe natural disasters, such as drought, flooding, landslides, tropical cyclones and tsunamis. Yet, the country's national- and municipal-level capacities remain insufficient to adequately respond to such disasters, especially in rural areas. Furthermore, evidence shows that GBV is exacerbated in natural disasters, as there is frequently a weakening of community and institutional protection mechanisms, disruption of services and community life, destruction of infrastructure, separation of families and displacement, and limited access to GBV services. Therefore, preparing national counterparts to adequately prevent, mitigate and safely respond to the needs of potential survivors in the aftermath of natural disasters is a key priority.

In Timor-Leste, gender norms foster more "risk taking" among men and "risk avoidance" among women, with implications for preparedness and safety in disasters. Women, girls and boys are 14 times more likely to die during a disaster than men. Past disasters in Timor-Leste show that women, girls, boys have been affected more than men due to gender inequality and a breakdown in social structures that leads to reduced protection. Men and women's roles dictate how they use resources that impact on the environment, how environmental impacts affect their livelihoods differently, and what their risks might be during a natural hazard. As a consequence, traditional gender relations are reinforced by disasters, and existing inequalities are exacerbated. This leaves women exposed to different protection risks including sexual exploitation and abuse, unequal access to assistance, discrimination in aid provision, inequitable access to property restitution, and violence and even more vulnerable to GBV in disasters.

Additionally, there tends to be a lack of awareness on those responding to disasters, not being aware that GBV could increase and thus neither looking for it nor preparing for it. Despite establishing a strong legal and policy foundation to address disaster risks and its consequences, such as loss of livelihoods and increased GBV, implementation of a comprehensive approach to addressing disaster risk reduction activities that properly integrate gender issues, such as gender-based violence in disasters, remains a challenge in Timor-Leste. The GoTL has as well put efforts to address gender equality, but with scope for greater complementarity to risk reduction efforts. This has included policy creation and reform, legislation, the introduction of institutional mechanisms and raising public awareness. In order to address the intersectionality and multiple type of impacts of disasters experienced by women and girls, there is a need to fill the gap in the knowledge and efforts to prevent, mitigate and prepare against the negative effects of disasters in a gender responsive manner.

It is well recognized that disasters can increase the likelihood of rape and sexual exploitation, domestic violence, unwanted pregnancies, sexually transmitted infections and complications regarding sexual and reproductive health, including for pregnant women, who face heightened risks from interrupted access to sexual and reproductive health care. During a natural disaster, pregnant or lactating women and adolescent girls, who constitute an average of 18-20% of the female population, are more vulnerable to disasters because of their limited physical mobility and their increased needs for food and water and for access to reproductive health care and safe birthing facilities. Protection from gender-based violence in the context of natural disasters, including through early programme prevention and response, can reduce morbidity and mortality. According to UN reports, 60% of all maternal deaths take place in humanitarian settings and all forms of gender-based violence against women and girls spike during disasters. Moreover, the capacity, knowledge, and impact that women and local women's groups consistently displayed in a crisis are rarely supported. Experience and research show that when women are included in humanitarian action, the entire community benefits. Despite this, women and girls are largely marginalized in the development of DRR policy and excluded from decision-making processes that shape the response strategies that affect their ability and that of their community to recover from crisis.

Access to justice for GBV survivors

UNDP's 2012 country fragility assessment identified the lack of access to justice of the GBV victims as one of the fragility drivers of the country, aggravated by the policy uncertainty around the issue. Despite the enactment of the LADV and the reportedly increased numbers of domestic violence incidents filed in the courts, the customary dispute

resolution, namely, *fetosan-umane*, spiritual resolution, and village laws remain the most accessible, affordable, and timely resolution mechanism for most of the domestic violence victims. Only twenty percent of women who have experienced some form of domestic violence ever sought help, some cases of which referred to traditional justice. Marriage in Timor-Leste is perceived as a link between two families rather than between two individuals, and customary justice redresses the violence in view of reconciling the family relationship without outsiders' intervention. In addition, confusion among community members exists that only 'severe' cases can be reported to the police or prosecution office. Even the victims of severe violence tend to resort to the formal justice system only when their families can provide support. Thirty-seven percent of women replied that their family could provide shelter, and thirty-four percent of women can get some financial support from their families (Ministry of Planning and Finance and Ministry of Health, 2016).

The formal justice system faces significant challenges in appropriately redressing the issue. Only four fixed courts exist with limited human resources – 37 judges, 38 prosecutors, and 36 public defenders across the country as of December 2019. The case backlog in each institution has accumulated significantly; for example, 3,665 criminal cases are pending in the district courts as at December 2018, and none of the justice institutions collects disaggregated GBV data. Most of the domestic violence cases receive suspended sentences without conditions attached, often leading to the suspects and community members believing that nothing was wrong or the victims losing confidence in the formal justice system. Security and justice actors are often criticized for asking inappropriate questions to GBV victims. The awareness of the formal justice system among the population is still low, especially in the rural areas, with 69% of male and 50% of female respondents having heard of a court, 40% of respondents hearing of a prosecutor, and 25% hearing of legal aid (The Asia Foundation, 2013).

2.2.2 Assistance from other organizations to the project site

The Project will build from the UN's past and present programming in Timor-Leste under the UNDAF 2015-2020) and the forthcoming UNSDCF (2021-2025), as a distinct UN intervention dedicated to addressing GBV in line with the UN's Result area on Inclusive Governance.

In addition to the UN, civil society organizations and women's organizations have been actively involved in advocacy, awareness-raising, providing health facilities and legal assistance to the female victims. UN Women alone has worked with over 20 civil society organizations and networks to promote gender equality, including on GBV. The UN agencies have been and will closely collaborate with these organizations as well as the government institutions.

The partner agencies in this proposal are members of the UN Country Team and work together in the UN Gender Theme Group. This coordination ensures that the member organizations work in their specific mandate areas but in close coordination. All partner agencies have global support structures related to GBV programming and will draw on these. Furthermore, although the UN will be working with government counterparts to ensure sustainability, the partner agencies will draw on their long standing relationships with civil society as well, to ensure that lessons learned and best practices from the Timor-Leste perspective are incorporated into the project and to ensure that there is no duplication.

Three of the agencies involved in the project are also implementing the EU-UN Spotlight Initiative (UN Women, UNFPA and UNDP) and in this regard, there will be cross-learning and exchange across the Joint KOICA project and Spotlight, as each is working in distinct municipalities, using each investment to expand the reach of evidence-based approaches to prevention and responses to violence against women and girls.

2.3 Needs Assessment

2.3.1 Description of target group (beneficiaries) and stakeholders

This project will benefit the entire population of the Democratic Republic of Timor-Leste as gender-based violence is

widespread, affecting not only the individuals who experience abuse, as well as those that witness abuse. The target group will include children, adolescents and adults. There will be particular focus on the groups that face multiple forms of discrimination, are more vulnerable to violence and have barriers in access to services due to their marginalization: women, girls, boys, especially those dependent on public spaces for their livelihoods, disaster-affected communities, members of the lesbian, gay, bisexual, transgender communities and persons with living with disabilities.

The direct beneficiaries will be young women and men in school and out of school (targeting ages 10-25), representing 36% of the population, persons with disabilities representing at least 3% of the population (in 2016), members of the lesbian, gay, bisexual, transgender and intersex communities, survivors of gender-based violence, noting that at least one third of women have experienced some form of intimate partner violence, as well as female and male civil servants, with each group engaged in targeted project activities.

Indirect beneficiaries will reach the total population: 1,167,242 people as of 2015 data, comprising 588,561 men and 578,681 women.

2.3.2 Needs of beneficiaries

The target groups above, particularly the direct beneficiaries have significant needs for information, services and legal support in order to reduce their vulnerability to gender based violence. Prevention activities are critical in order to support the individual and interpersonal, institutional and societal foundations by working with government and civil society stakeholders to transform inequitable norms and reduce tolerance of violence.

Recognizing that violence will still take place, vulnerable groups as defined above need access to high quality appropriate services both in terms of health services and judicial services. As per the problem description, appropriate services will reduce the severe physical, mental and emotional consequences of violence – whether the perpetrators are intimate partners, family members or non-partners in public spaces.

2.3.3 Justification for intervention

Gender-based violence (GBV) remains one of the most pervasive human rights concerns in Timor-Leste⁵⁹, with almost 2 of every 3 Timorese women (15-49 years) reporting having experienced intimate partner violence in their lifetime⁶⁰. Although both men and women experience GBV, women and girls are more often the target, given the unequal power relationships between men and women within the household, in communities and across society.

Gender-based violence occurs in many forms and across the life cycle. In addition to be a fundamental violation of human rights, it has enormous health, social and economic costs. These costs begin with the severe physical, mental and emotional consequences that not only impact individuals that experience abuse, but also those who witness abuse, most often children. Sexual violence in public spaces adds even further costs, which are often uncounted due to lack of data and investment in understanding the issue. This translates into lost productivity in the workforce, high costs to families and public services, reducing the overall well-being of entire countries and their economies, lasting for generations.⁶¹ Considering Timor-Leste's demographic composition, the impact of domestic violence and sexual violence in public have devastating consequences for future generations and warrants the investment in prevention and response, while supporting an enabling environment for implementation of the existing legal and policy frameworks on GBV.

Through UN Women, UNDP, UNFPA and IOM, there is knowledge and experience in Timor-Leste to translate the significant global evidence for what works in evidence-based primary prevention practices, and ensuring health and justice services are accessible and survivor-focused, while working through partnerships with national institutions to capture learning and supporting local capacities for sustained change.

⁵⁹ Secretary of State for Equality and Inclusion (formerly SEM), NAP-GBV 2017-2021 (December 2016 draft).

⁶⁰ The Asia Foundation. 2016. Understanding Violence against Women and Children in Timor-Leste: Findings from the Nabilan Baseline Study: Summary Report. The Asia Foundation: Dili.

⁶¹ See for example, <http://www.endvawnow.org/en/articles/301-consequences-and-costs.html>

2.4 Feasibility of the Project

This project builds on existing UN relationships and partnerships with the Government of Timor-Leste and civil society organizations. It is in line with national frameworks on GBV, namely the National Action Plan on GBV and priorities identified by the institutions responsible for its implementation. As elaborated above, the UN agencies have the in-country experience and expertise, as well as the mechanisms for successful coordination already in place, as described earlier to carry out the intervention.

2.4.1 Relevance

Timor-Leste has the second youngest population in Asia and is at the beginning of a youth bulge. With the extremely high prevalence, and acceptance, of violence in the country, a large number of young people are, or will soon be, at risk of all forms of gender-based violence. Therefore, a multi-sectoral approach to gender-based violence that addresses both prevention and services at this critical time, provides an opportunity to drive positive change. Working with multiple partners both in civil society and with government institutions, the project has the potential to significantly reduce the risk of violence as well as to provide effective services when it takes place. In the context of COVID-19, the investment is even more relevant to support the country's recovery from COVID-19 in a way that addresses the increased violence and disproportionate impact of the pandemic on women and girls.

2.4.2 Effectiveness

Gender-based violence is a phenomenon that can only be addressed from a multi-sectoral perspective. By focusing on vulnerable segments of society and on the large number of young people moving into adulthood, the approach by the project ensures effectiveness. The multiple partners in the project have different comparative advantages and work with different duty bearers and institutions. This approach ensures a wide cover of the both beneficiaries and institutions that need to be strengthened to ensure a sustainable approach to eliminating gender-based violence. Using UN Women as a coordinating partner ensures a broad multi-sector approach with a close connection to the Inter-Ministerial NAP GBV Commission through SEII. UNFPA, UNDP and IOM all have close partnerships with the relevant institutions to be able to effectively carry out advocacy and to develop the institutional capacity needed for an effective broad-based response to GBV.

2.4.3 Efficiency

The UN System's experience with multi agency, multi-sectoral joint programmes and long-standing presence and partnerships in the country ensures that the administrative and operational tools for programme implementation are in place. Furthermore, through the UN Theme Group on Gender, Chaired by UN Women, strong coordination of the project can be ensured. Hence, programmatic management, coordination as well as administrative processes are in place which will ensure efficient implementation of the project. As UN Women is the Technical Coherence Lead for the EU-UN Spotlight, UN Women's coordination of the Joint KOICA project will ensure streamlined approaches and efforts to addressing violence against women and girls, bringing efficiencies and savings to the investments.

2.4.4 Impact

The Project aims to have the following impact:

Women and girls in Timor-Leste are empowered to enjoy their right to live free of sexual harassment and other forms of violence in public and private spaces and can access quality essential services in line with the Sustainable Development Goals, notably Goal 3 on Health, Goal 4 on Education, Goal 5 on gender equality and Goal 16 on peaceful societies. This aligns with Timor-Leste's National Action Plan on Gender Based Violence (2017-2021) and Strategic Development Plan vision for Timor-Leste to be "*a gender-fair society where human dignity and women's rights are valued, protected and promoted by the laws and culture*" by 2030.

2.4.5 Sustainability

The United Nations works directly with government and civil society partners. By ensuring that government entities are a part of the work carried out and the key institutional beneficiaries of capacity developing activities, sustainability can be ensured. Through the unique relationship the United Nations system has with governments

because of their membership in the organization, the UN is better placed than most development partners for ensuring that structural adjustments can be made if needed to ensure sustainability and that capacity development results remain with government and remain available to support rights holders.

All partners in the project have strong institutional relations with their implementing partners and are also organizations with a long history in Timor-Leste. The combination of long trusted relationships, the open dialogue with government entities, and having a long-term future looking time horizon, makes the UN uniquely placed to ensure sustainability of its interventions.

2.4.6 Cross-cutting issues (environment, gender, ICT, human rights)

Addressing gender-based violence requires a multi-sectoral approach. Although violence is a critical public health and security issue, many of the risk factors and determinants of violence lie outside the health and security system, requiring a holistic, integrated and coordinated approach to prevention and response across different sectors, professional disciplines, involving governmental, private and non-governmental institutions. As with the centrality of gender equality for the SDGs, achieving gender equality requires making progress in health (SDG 3) and justice (SDG 16), among other areas. For example, to successfully address GBV, the health system will interact and coordinate its own response with a number of other sectors, including police and justice, social services (such as shelter and child protection), education, labour and employment, etc. The project will contribute to filling the existing gap in multisectoral violence prevention efforts by facilitating national guidelines and networks. At the same time, it will enable multi-sectoral collaboration and coordination to address the risk factors of violence and promote quality service delivery, as well as facilitate the access of survivors/victims of violence to multisectoral services, with attention to health and justice, including through strong referral mechanisms; and generate evidence of what works through testing and evaluation of the intervention.

Attention to intersectionality and cross-cutting issues will be prioritized, for example, by engaging specific groups in activities and ensuring project activities are inclusive and accessible. This will include partnerships with communities in rural areas, young women and men, persons with a disability, and members of the lesbian, gay, bisexual, transgender and intersex community and conducting activities for audiences with varying levels of literacy and starting with needs assessments, accessibility checks and making an effort to reduce the environmental impact of project activities. Use of ICT and digital solutions within project activities will be explored, with attention to ethical and safety of project beneficiaries.

3. Project Description

Gender-based violence occurs in many forms and across the life cycle. In addition to be a fundamental violation of human rights, it has enormous health, social and economic costs. These costs begin with the severe physical, mental and emotional consequences that not only impact individuals that experience abuse, but also those who witness abuse, most often children. This translates into lost productivity in the workforce, high costs to families and public services, reducing the overall well-being of entire countries and their economies, lasting for generations.⁶²

Considering Timor-Leste's demographic composition, the impact of domestic violence alone can have devastating consequences for future generations. With the momentum underway toward achievement of the 2030 Sustainable Development Agenda, Timor-Leste has an important opportunity to break this cycle of violence through a multi-pronged approach focusing on the enabling environment for implementation of the existing legal and policy frameworks on GBV, investing in evidence-based primary prevention practices, and building on progress made in the health and justice sectors, capturing learning and supporting national capacities for sustained change.

This requires investment preventing violence before it begins, working with young girls and boys, their families and the wider society to promote transformative norms on gender equality and respectful relationships while strengthening the quality of more comprehensive services for survivors of gender-based violence.

The project is a joint UN effort, and will support the Government of Timor-Leste to prevent GBV and improve essential

⁶² See for example, <http://www.endvawnow.org/en/articles/301-consequences-and-costs.html>

health and justice sector responses to women and children who have experienced violence, in line with the targets in the NAP GBV (2017-2021). By working across UN agencies, the project enables the investment to have a wider reach than if only engaging one organization. Administered by UN Women as Chair of the Gender Theme Group, the project will leverage UN Women's expertise and coordination mandate on gender equality, alongside the expertise of sister agencies (UNDP, UNFPA and IOM). The project will support the Government of Timor-Leste to prevent GBV and improve essential health and justice sector responses to women and children who have experienced violence, in line with the targets in the NAP GBV (2017-2021). The project builds on the UN's more than 16 years of programming in the country and facilitates the localization of global standards for prevention and provision of essential health services to survivors of violence.

3.1. Goal and Objective

Violence against women and girls is prevented and quality essential services are available and accessible to victims and survivors in Timor-Leste in line with the Sustainable Development Goals, notably Goal 3 on Health, Goal 4 on Education, Goal 5 on gender equality and Goal 16 on peaceful societies. This aligns with Timor-Leste's National Action Plan on Gender Based Violence (2017-2021) and Strategic Development Plan vision for Timor-Leste to be "a gender-fair society where human dignity and women's rights are valued, protected and promoted by the laws and culture" by 2030. Project Objectives aim to:

1. Prevent gender-based violence, in particular violence against women and girls, before it happens or before it re-occurs.
2. Empower survivors of gender-based violence to recover and rebuild their lives through improved access to multi-sectoral services.
3. Enforce implementation, monitoring and adequate resourcing of legislation and policies that address violence against women and girls (VAWG) in public and private spaces and promote gender equality.

3.2. Expected Results

The Project aims to achieve the following Outcomes:

1. Transformed attitudes, behaviours and social norms promoted at individual and inter-personal levels to prevent GBV.
2. Improved access to essential public services (health, justice and social services) for women and girls, among other survivors of violence, informed by evidence-based responses to GBV.
3. Enhanced legislation and policy environment for eliminating violence against women and girls and other forms of gender discrimination, is in place and translated into action.

3.2.1. Logical framework of the project

See Appendix 2

3.2.2. Expected outcomes and indicators

See Appendix 2.

3.2.3. Expected outputs and indicators

See Appendix 2.

3.3. Project Activities

In order to achieve the above-mentioned result, the project will include the following activities:

Outcome 1: Transformed attitudes, behaviours and social norms

Output 1.1: Increased knowledge and skills in students, youth, teachers and parents to promote respectful

relationships, based on gender equitable norms

- 1.1.1 Develop material and roll-out classroom and extra-curricular programmes with pre-secondary students, parents and educators to change harmful attitudes and social norms and prevent sexual harassment and school-related GBV in Baucau, Covalima and RAEOA.
- 1.1.2 Conduct a gender analysis of national sports associations and design GBV and sport group sessions to prevent young athletes from sexual harassment and promote their roles as advocates for equitable gender roles and positive masculinities.
- 1.1.3 Develop tools, materials and provide technical support to the National University of Timor-Leste for its "Safe Campus" initiative to prevent sexual violence on campus
- 1.1.4 Support Scouts in the targeted municipalities and National Scouts Association to roll-out the "Voices against Violence" Curriculum to promote respectful relationships using peer-education and advocacy.⁶³
- 1.1.5 Support comprehensive sexuality and reproductive health education in youth centres and schools include a provision of Comprehensive Sexuality Education (CSE) and utilize existing extra-curricular materials to promote gender-equitable attitudes, greater equality of power in intimate relationships and reduce the incidence of GBV.

Output 1.2: Enhanced economic empowerment opportunities for women who face multiple forms of discrimination

- 1.2.1. Provide women informal workers with economic and social empowerment through financial literacy and entrepreneurship training, income generation activities, combined with group education sessions for women and their partners on gender norms, power and communication.
- 1.2.2. Support comprehensive resilience building against emerging emergencies (COVID-19) for vulnerable groups, conduct awareness raising and build the capacity of 30 women's groups and women leaders to participate in DRR decision-making structures, develop GBV integrated CBDRM plans, and identify CBDRM resilient and sustainable livelihood projects that contribute to enhancing women's economic empowerment.

Output 1.3: Increased access to support for survivors of GBV, persons with disabilities, members of the LGBTI community, among other marginalized groups

- 1.3.1 Support civil society to conduct outreach and training for survivors to access peer-support and self-care skills, reduce stigma and encourage help-seeking⁶⁴, using mobile technology and other innovative platforms.
- 1.3.2 Conduct analysis of cases of sexual violence in public (including workplaces and educational institutions), and support development of recommendations

Outcome 2: Essential Health and Justice Services

Output 2.1: Strengthened capacity of health workers/providers to provide coordinated responses to gender-based violence.

- 2.1.1. To conduct awareness raising and understanding of GBV through evidence-based advocacy among senior policy-makers and within health system, about its nature, health and other consequences, risks and causal factors through in country workshops.
- 2.1.2. To conduct community awareness workshops about availability of and need for timely access to health-care services through health facilities/in partnership with national NGO (with well-established community based group) support MoH to conduct outreach activity on health impact of GBV and available services

⁶³ The roll out of Voices against Violence will be given to male and female scouts who complete a series of activities to understand the root causes of violence in their communities, to educate and involve their peers and communities to prevent such violence, and to learn about where to access support if violence is experienced. It has a potential to reach the 11,000 National Scouts and will be adapted from "Voices against Violence" is a co-educational curriculum developed by the World Association of Girl Guides and Girl Scouts (WAGGGS) and UN Women, with inputs from young people. <http://www.unwomen.org/en/digital-library/publications/2013/10/voices-against-violence-curriculum>

⁶⁴ This supports NAP GBV Output 2.4 (Strengthened accessibility to adequate crisis information for survivors- Activity 8— develop and disseminate community information/outreach on victim rights and services). This responds to the limited access to information among community members on the services available for survivors of violence since this information is not readily known across communities (who to go to and what services they can provide; considering help-seeking is so low).

- 2.1.3. Enhance the participation of health care providers in the existing referral network through hosting referral meetings to support strengthening coordination within health system and with other sectors for a strong multisectoral response to GBV.
- 2.1.4. Provide Technical assistance to MoH through placement of a National coordinator and 4 regional coordinators.
- 2.1.5. Strengthen ability of health care providers to respond to GBV through review and update of national guideline for health service providers on identification, management and referral of victims/survivors of GBV and be more inclusive.
- 2.1.6. Develop supervision tools including HMIS reporting format (while ensuring anonymity and confidentiality) and train and support supervision to health facilities on the utilisation and reporting.
- 2.1.7. Establish Medico Legal committee to provide expertise and knowledge in relation Health sector involvement to legal process related to GBV cases.
- 2.1.8. Establish within prioritized health facilities (in Dili and project focus municipalities) spaces to provide LIVES and other components of essential health service package as required ensuring confidentiality and privacy.
- 2.1.9. In coordination with existing tertiary educational institutions, through development of teaching aid materials to integrate content about the identification of, and response to and referral of GBV in pre-service curriculum building on WHO guidelines and tools.

Output 2.2: Enhanced capacity of the justice and law enforcement institutions to provide survivor-centred access to justice for women, including survivors of gender-based violence

- 2.2.1. Provide technical assistance to the PDO and CSOs' in-house lawyers to enhance their knowledge, skills, and systems to handle GBV cases
- 2.2.2. Provide legal outreach and consultations on GBV and existing systems, institutions and procedures in place through PDO's Access to Justice Clinics in the Dili, Baucau, Suai, and Oecusse Judicial Districts
- 2.2.3. Provide technical assistance to the PNTL and Office of Prosecutor-General in developing the institutional capacity in the GBV case management and protocols
- 2.2.4. Conduct monitoring on GBV cases in trials in the permanent and mobile courts and support advocacy

Outcome 3: Enhanced legislation and policy environment for eliminating violence against women and girls and other forms of gender discrimination, is in place and translated into action

Output 3.1. Mobilized community members, local authorities and media in support of gender equality and safety in public spaces

- 3.1.1. Support traditional, religious leaders, persons with disabilities and LGBTI persons to become advocates for safe public spaces through dialogue and awareness-raising sessions organized by civil society.
- 3.1.2. Build national capacity for multi-sectoral joint rapid response and crisis management through SOP development and providing training for first responders to identify needs of vulnerable groups, mitigate risks of GBV during disaster response and safely respond to disclosure of GBV incidents.⁶⁵
- 3.1.3. Map and assess evacuation centres and routes in communities with a high risk of displacement, promoting participation of community members, including women, men, boys and girls in the set-up of evacuation centers.⁶⁶
- 3.1.4. Develop guidelines and train media personnel on gender-sensitive reporting of sexual violence in public spaces (including places of work)
- 3.1.5. Support media monitoring on gender issues, including in the context of sexual violence in public spaces and natural disasters/ pandemics (with journalism students and civil society).

⁶⁵ The training will focus on building the national response capacity and reducing GBV risk factors, as well as sexual exploitation and abuse (SEA) affecting women in disaster-prone communities. Based on the IOM GBV framework focused on addressing root causes of GBV, mitigating the risk of GBV in preparing and responding to disasters, and improving support for GBV survivors, the activity will ensure that first responders are aware of existing GBV referral pathways established during emergencies, including health services, case management services for GBV and Child Protection, as well as security, legal and psychosocial services.

⁶⁶ Ensuring that safe and appropriate Complaint and Feedback Mechanisms are established in each evacuation centre for identifying and responding to concerns and needs of vulnerable individuals/groups affected by disaster, and can be used as safe channels to respond to complaints, including sexual exploitation and abuse cases, for accountability of service-providers.

Output 3.2. Public institutions have strengthened capacities for planning, implementing and reporting on VAWG in public and private spaces

- 3.2.1 Strengthen capacity of SEII personnel and municipal focal points on gender budget analysis and conduct mapping of investments in gender equality and women's empowerment.
- 3.2.2 Design ToT and roll-out training for Municipal Gender Working Groups on conducting annual gender budget assessments and allocating investments for safe public spaces
- 3.2.3 Conduct workshops for members of NAP GBV Inter-ministerial Coordination Mechanism⁶⁷ for better tracking and reporting on EVAW progress (topics on the RESPECT Prevention Framework, Essential Service Package⁶⁸, monitoring, sexual harassment and reporting mechanisms.
- 3.2.4 Provide technical support and training to Government stakeholders (MSSI, MOI, SEII, PNTL) on protection, GBV core concepts and principles, risk identification, GBV mitigation measures, PSEA, AAP, Code of Conduct, available support, and referral pathways.⁶⁹
- 3.2.5 Provide technical support to the National Disaster Operating Center (NDOC) to ensure sex- age and disability-disaggregated data (SADDD) is collected to generate evidence and inform disaster response systems.⁷⁰

Output 3.3: Strengthened civil society capacity to analyze and advocate for Government funding for addressing sexual violence in public spaces and GBV-related policies

- 3.3.1 Provide technical assistance and guidance for civil society to jointly track progress and report on efforts to address sexual violence in public spaces, in line with government gender equality commitments, including NAP GBV, CEDAW and UNSCR 1325
- 3.3.2 Conduct training with CSOs in targeted municipalities to conduct safety audits and determine costs of recommendations related to creating safe public spaces.
- 3.3.3 Conduct training on evidence-based advocacy and support joint advocacy initiatives, including survivors of violence, to facilitate investment in the NAP GBV and safe public spaces.

3.4. Project Implementation

3.4.1. Implementation structure

The project will be implemented by Direct Implementation Modality (DIM) by the UN Women Timor-Leste Country Office, as the Chair of the inter-agency Gender Theme Group and in coordination with the Secretary of State for Equality and Inclusion, together with UNFPA, UNDP and IOM, among other partners with support from UN Women's Regional Office in Bangkok and UN Women Headquarters in New York.

In addition to UN Women, the three organizations participating will work through their own organizational structures, coordinating through a Joint UN Programme Pass-Through Modality.

⁶⁷ Inter-ministerial Coordination refers to SEII's coordination between ministries, including those in the Inter-ministerial NAP GBV Commission, but also other state institutions, such as the Civil Service Commission (ie. to ensure GBV in induction, etc.).

⁶⁸ The United Nations Essential Services for Women and Girls Subject to Violence, a partnership by UN Women, UNFPA, WHO, UNDP and UNODC, aims to provide greater access to a coordinated set of essential and quality multi-sectoral services for all women and girls who have experienced gender-based violence. See: <http://www.unwomen.org/en/digital-library/publications/2015/12/essential-services-package-for-women-and-girls-subject-to-violence>

⁶⁹ Institutional and systems strengthening and capacity building to Government stakeholders to address the root causes of GBV and ensure all survivors of GBV access survivor-centred, and multisectoral services will include training on protection, GBV core concepts, risk identification and mitigation measures, child protection, addressing specific needs of persons with disabilities, PSEA, AAP and Code of Conduct. In addition to adapting referral pathways to ensure that multisectoral services are available to GBV survivors in Timor-Leste during disasters, including health-care services, psychosocial support, case management, safety and security options, legal support and access to justice, economic and social reintegration. This will be tested with the participation of the community, to ensure services will be appropriate to context.

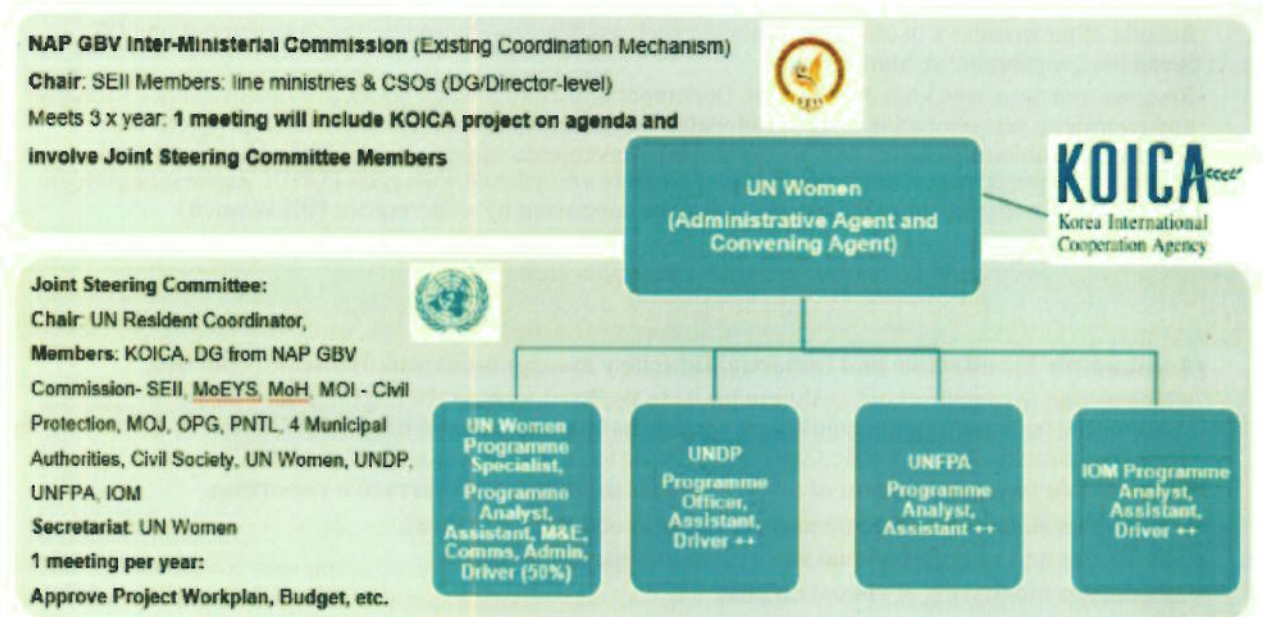
⁷⁰ This includes support to systematically collect and review Sex, Age and Disability Disaggregated Data (SADDD) on differential needs and access to assistance, as well as GBV risk information, such as breakdown by Age, Sex and Disability (SAD) accessibility and safety questions (lighting, distance to distribution site, locations of unsafe areas), services (health, including SRH), confirmation of referral mechanisms or lack of information, and specific communications channels needed for survivor support.

For UNFPA this means that full responsibility for implementation rests with the Country Office which has full decentralized authority, with technical support from the Regional Office in Bangkok and from its Technical Division in New York.

For UNDP that would mean full responsibility for implementation rests with the Country Office in Timor Leste, more specifically within the Governance Programme and Justice Project. The implementation will be supported technically by the UNDP Regional Office in Bangkok and the Crisis Bureau in New York.

For IOM full responsibility for implementation rests with the Country Office with technical support from the Regional Office in Bangkok and technical divisions at Head Offices in New York and Geneva.

In line with the UN Sustainable [Development Group Guidance for Joint Programmes](#), the Project Governance and Accountability will have the following structure and roles.



Inter-Ministerial NAP GBV Commission (led by SEII)

- **Advisory - Coordination Support**

- Provides opportunity for knowledge-sharing on KOICA Project progress (one meeting per year)
- Offers guidance and advise to enhance Project coordination and support to line ministries implementing the NAP GBV

Joint Programme Steering Committee (Chair: Resident Coordinator)

- **Decision-making authority; highest body for strategic guidance, fiduciary and management oversight and coordination**

- Facilitates collaboration between participating UN organizations and host government for the implementation of the Joint Programme
- Includes senior programme managers of all signatories of the Joint Programme Document; may also include other members in observer capacity, such as CSOs; co-chaired by the Government and UN Resident Coordinator at country level
- Reviews and approves Joint Programme Document and annual work plans, provides strategic direction and oversight, sets allocation criteria, allocates resources, reviews implementation progress and addresses problems, reviews and approves progress reports budget revisions/reallocations, and evaluation reports, notes audit reports (published in accordance with each PUNOs' disclosure policy), and initiates investigations (if needed). It may be supported by a Secretariat (UN Women)
- Meets once per year

UN Women (Administrative Agent and Convening Agent)

- **Accountable for effective and impartial fiduciary management and financial reporting**

- Receive donor contributions; Disburse funds to the Participating UN organizations based on Steering Committee instructions; Consolidate periodic Financial reports and final financial report; Involve in day to day administration of the JP; Coordinate operational and financial closure of the JP
- **Responsible for coordination of programmatic activities and narrative reporting.**
- Coordinates all Joint Programme partners (KOICA and 4 UN agencies);
- Coordinates and compiles annual work plans and narrative reports
- Coordinates monitoring of annual targets;
- Calls and supports Steering Committee meetings
- Facilitates audits and evaluation
- Reports back to Steering Committee
- May be involved in Resource Mobilization for the JP
- Overall involved in day to day coordination but does not hold any financial or programmatic accountability.

Participating UN Agencies: UN Women, UNDP, UNFPA and IOM

- **Assume full programmatic and financial accountability of funds disbursed to it by UN Women**

- Operate in accordance with own agency specific regulations, rules and directives and procedures.
- Prepares Narrative Reports in accordance with the narrative reporting template (using the UNDG guidance)

The Joint Steering Committee, including the Heads of all participating agencies, the UNRC, KOICA as donors and the relevant national counterparts will meet once a year. However, ensuring close cooperation and communication with the donor is important, therefore the Project Team, coordinated by UN Women, will have meetings on quarterly basis with the KOICA office in Timor-Leste to update on the developments in the project. Before requests related to budget changes or project extensions can be taken to the Steering Committee, the UN will need to submit (via the Administrative Agent) an official extension request to KOICA country office no later than three (3) months before the Project ends, including the statement of reasons, progress report to date with provisional financial report, and work plan with budget plan for the remaining Project period. The formal consent on relevant changes will be delivered to the UN Women country office by the KOICA country office. However, for a Project

period extension which does not require a change of completion year or other change, UN Women (as Administrative Agent) can inform KOICA country office through official request no later than three (3) months before. Extension of the Project shall be approved by KOICA according to its rules and regulation.

3.4.2. Legal status of participating organizations

The United Nations organization's presence in Timor-Leste is governed by the Standard Basic Agreement (or equivalent) between the UN organization and the Government of Timor-Leste. The agreement ensures that the organizations are working legally in the country and also legalizes the privileges and immunities that the United Nations enjoys in all countries where it operates.

The Basic Agreement concluded between the Government and the United Nations Development Programme on 20 May 2002 (the "Basic Agreement") mutatis mutandis applies to the activities and personnel of the United Nations Entity for Gender Equality and the Empowerment of Women (UN Women). This Project Document, together with any work plan concluded hereunder, is incorporated herein by reference, and constitutes the Project Document as referred to in the Basic Agreement.

3.4.3. Responsibilities of cooperating organizations

UN Women will lead overall coordination of the Project, as well as Project Objectives 1 and 3, in coordination with UNFPA, UNDP and IOM as follows: 1) Transforming attitudes, behaviours and social norms to prevent gender-based violence, in particular against women and girls, before it happens or before it re-occurs and 3) Legal and Policy Framework is translated into action.

UNFPA and UNDP will be responsible for implementation of activities under Outcome 2, in collaboration with UN Women and IOM as relevant. UNDP will focus on the areas of work related to the justice system while UNFPA will focus on all work related to the health sector response. IOM will contribute to activities under Objectives 1, 2 and 3. For a detailed breakdown by agency by activity, please refer to the budget.

UN Women will recruit a National Officer to oversee monitoring & evaluation and will continue to explore opportunities to secure a KMCO or equivalent level officer should the KMCO modality not be available to support public relations and communication with KOICA. Additionally, each agency will explore the possibility of hosting a Korea International Development Volunteer (KIDV) or KOICA Volunteer Programme.

3.4.4. Communications plan among all stakeholders

The Project will create a Communications Plan as part of the inception phase and informed by the baseline findings, to incrementally raise visibility of issues being addressed by the project through diverse communication channels, increase stakeholders engaged and communicating about these issues, and influence attitudes and behaviors related to these issues (such as stereotypes around women and men's gender roles, tolerance of violence, beliefs around caregiving, mobility of women and girls in public spaces, decision-making in relationships, role of service providers, etc.). The Plan will be an elaboration of the Communications Management Plan Drafted (See Appendix 5) and will include engagement with beneficiaries as communicators of the project as well as media outlets and monitor changes over the course of the project. Newsletters, web-stories and annual reports as well as partner meetings and consultations will be organized to share progress and learnings from the project. Youtube will be explored as a channel to expand the reach of project messages through dissemination of audio-visual materials produced as well as other engagement, with attention to audience safety and risk-informed approaches to online communications.

The project, including all Participating UN Organizations will endeavor to maximize opportunities that facilitate recognition of KOICA's Contribution on the Project (e.g. through appropriate references in theme-related documentation, public information, and due notice to third sides). This will include references to KOICA at relevant events supported by the project as well as marking and having visible KOICA logos as provided by KOICA on all commodities and facilities supported by KOICA under the project.

3.4.5. Work plan and time frame

See Appendix 3

Note that any major decision related to the implementation that modifies the activities, outputs, or outcomes in the Project Document shall be formerly agreed by the UN Women and the KOICA country office in Timor-Leste after consultation with the Host Government. The formal consent on relevant changes will be delivered to the Timor-Leste country office by the KOICA country office.

Changes within the budget are permissible provided they are made within the same budget objective and do not exceed 10% of the sum of the total amount of financial support. Such changes will have to be explained in the relevant annual report and reflected in the relevant financial report. All other changes in the budgets are possible provided there is written consent from KOICA.

3.4.6. Budget plan (evidence-based)

See Appendix 4

3.5. Result Management Plan

To ensure value for money, the Project via UN Women will employ one International Programme Specialist to lead Coordination and management and quality assurances of the project, and one National Monitoring and Evaluation Officer. National staff distributed across the implementing agencies will be recruited to support a smooth and cost-effective approach to joint programme implementation. See Section 3.4.1 for overview of the Implementation Structure and details below:

UN Women Head of Office will provide overall oversight of Joint Project, lead communication and coordination with KOICA on behalf of the project. Update UNCT on the project progress and oversee the timely and quality convening of the Project Steering Committee, as AA and CA, and will work closely with UNFPA, UNDP and IOM Heads of Agencies to ensure effective and regular communication on the project on an agreed timeframe.

UN Women will also oversee quality assurances and supervise UN Women's KOICA Project EAW Specialist and Monitoring & Evaluation Officer, as well as serve as secondary supervisor for Programme Officer in the Project.

| Agency | Input Staff for the Project | Grade (or level) | % | Total M/M | R&R |
|----------|-----------------------------|--|------|-----------|--|
| UN Women | EVAW Programme Specialist | P3 International Programme Specialist) | 100% | 21.75 | <ul style="list-style-type: none"> ● Guide the implementation and management of the Project; ● Provide technical assistance and capacity development to UN Women and partners; ● Provide programme development guidance and suppose develop activities to all participating UN agencies ● Manage human resources and financial resources of the Project; ● Manage inter-agency coordination to achieve the desired results of the Project; ● Build partnerships and support in developing resource mobilization strategies; ● Oversee the monitoring and reporting of the Project |

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| | | | | | <ul style="list-style-type: none"> • Oversee the people and financial resources of the Project • Coordinate between the different UN agencies and manage work of the Steering Committee • Manage advocacy, knowledge building and communication efforts. |
| UN Women | Monitoring and Evaluation Officer | NOB | 50% | 10.5 | <ul style="list-style-type: none"> • Support the monitoring of the Project implementation and finances using results-based management tools; • Support inter-agency coordination in reporting on the project implementation progress; • Lead the development and implementation of comprehensive and realistic monitoring and evaluation plans and strategies with appropriate M&E tools, data sources, collection methods, analysis plans, quality controls and resource requirements; • Advise the implementing UN agencies on the development and improvement of core implementation tools, including work plans; • Ensures facilitation of knowledge building and knowledge sharing in the area of monitoring and evaluation; • Support knowledge management, dissemination and use of M&E data. |
| UN Women | Women's Empowerment and Safe Cities Programme Officer | NOB | 100% | 21.75 | <ul style="list-style-type: none"> • Contribute to the implementation of activities managed by UN Women in the Project; • Monitor budget implementation and make budget re-alignments/ revisions as necessary; • Provide information required to compile the annual report, donor reports and other reports as and when required; • Review, coordinate and monitor the submission of implementing partner financial and narrative reports. |

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| UN Women | Programme Assistant | GS 5 | 100% | 21.75 | <ul style="list-style-type: none"> • Provide programme and administrative support to the programme team in the preparation of various programme documents, such as work plans, budgets, reports and proposals on programme implementation arrangements; • Provide administrative support to the programme team in the organization of events, meetings and workshops, etc; • Support the programme team in the financial management of the project and budget monitoring for UN Women and other partners, • Support partner agreement preparations, induction, monitoring and reporting • Ensure project filing and documentation is systematic |
| UN Women | Communications Officer | NOB | 33% | 9.17 | <ul style="list-style-type: none"> • Support advocacy, knowledge building and communication efforts for the Project; • Manage activities under Output 3.1 related to engagement with media and journalist students • Support implementation of communication strategies and plans; • Coordinate production of communication materials, liaising with sister agencies, UNCG • Ensure effective channels for dissemination of all information products to relevant target audiences identified and distribution supervised; • Ensure the visibility of the projects and monitor media engagement with the project; • Ensure the compliance of UNW and guidance related to joint program communications; communications guidelines; • Coordinate inter-agency communications planning and liaise with relevant KOICA officers in regards to communication matters toward streamlined communications with the media in Timor-Leste. • Prepare presentation and briefing templates for programme staff, conduct |

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| | | | | | orientations on communications for project partners |
| UN Women | Procurement | GS | 25% | 5.4 | <ul style="list-style-type: none"> • Support and coordinate procurement processes; • Implement procurement strategies in accordance with UN Women rules, regulations, policies and strategies; • Provide administrative support to contract management processes; • Provide induction sessions to staff on UN Women's procurement rules and regulations |
| UN Women | NOB – Officer (TBC) | SB-4 | 50% | 21.75 (UN Women Cost-shared) | <ul style="list-style-type: none"> • Support implementation of specific activities managed by UN Women in the Project; • Manage budget implementation and for relevant activities and make budget re-alignments/ revisions as necessary; • Provide information required to compile the annual report, donor reports and other reports as and when required; • Support review, coordination and monitoring of implementing partner financial and narrative reports. |
| UN Women | Driver | SB-2 | 50% | 10 | <ul style="list-style-type: none"> • Provide transportation and logistic support as needed. |
| UNFPA | Programme Analyst (Supervised by UNFPA Representative) | NOB | 100% | 21.75 | <ul style="list-style-type: none"> • Contribute to the implementation of the project for UNFPA's part. • Ensure appropriate monitoring and oversight mechanisms of the project implementation including drafting of UNFPA's report for donor • Review, coordinate and monitor the submission of implementing partner financial and narrative reports • Monitor budget implementation and make budget re-alignments/ revisions, as necessary, for the components funded through KOICA. |
| | Programme Assistant (supervised by Programme Analyst) | GS5 | 100% | 21.75 | <ul style="list-style-type: none"> • Provide logistical support to the project by coordinating project related meetings, workshops, training events etc. • Support budget monitoring including for implementing partners. • Support field monitoring of project activities. • Support preparation of report to donor |

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| UNFPA | Communication Analyst (Supervised by Representative) | IUNV | 75% | 16 | <ul style="list-style-type: none"> • Design IEC materials including for social media • Support the visibility of project activities related to the health sector. |
| | Driver (Supervised by UNFPA Admin/ Finance Associate) | SC2 | 100% | 21.75 | <ul style="list-style-type: none"> • Provide logistic support to the project. |
| UNDP | Head of Governance | KMCO | 10% | 2.16 | <ul style="list-style-type: none"> - Coordinating project Activities - Quality assurance - Supervise UNDP's NOB and other UNDP's personnel in the Project |
| UNDP | M&E and Justice Specialist (Supervised by UNDP Head of Governance) | IC | 30% | 6.53 | <ul style="list-style-type: none"> - Quality assurance; - Technical advice and partnership facilitation on overall engagement in justice sector - Lead the development and implementation of comprehensive and realistic monitoring and evaluation plans and strategies with appropriate M&E tools, data sources, collection methods, analysis plans, quality controls and resource requirements for the UNDP components; - Support knowledge management, dissemination and use of M&E data. |
| UNDP | Programme Officer (Supervised by UNDP Head of Governance) | NOB | 100% | 21.75 | <ul style="list-style-type: none"> - Contribute to the implementation of activities managed by UNDP in the Project; - Ensure appropriate monitoring and oversight mechanisms of the project implementation including drafting of UNDP's quarterly/annual progress report and UNDP components for the Project's joint report to KOICA; - Review, coordinate and monitor the submission of implementing partner financial and narrative reports; - Monitor budget implementation and make budget re-alignments/revisions, as necessary, for the components funded through KOICA. |

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| UNDP | Programme Assistant (Supervised by Programme Officer) | GS 5 | 100% | 21.75 | <ul style="list-style-type: none"> - Provide admin/finance support to the project team in the preparation of various project documents, such as work plans, budgets, reports and proposals on project implementation arrangements; - Provide administrative and logistic support to the programme team in the organization of events, meetings and workshops, etc; - Support the programme team in the financial and procurement management of the project and budget monitoring for UNDP and other partners. |
| UNDP | Driver (Supervised by Programme Officer) | SC2 | 100% | 21.75 | - Provide transportation support to the project |
| IOM | Chief of Mission | P3 | 5% | 1 | Provide overall supervision of the project and TOT training for CBP and manual development. |
| IOM | DRR Gender Officer | NOB | 100% | 21.75 | Day to day management of the project activities, Develop training materials and liaison with stakeholders at national and sub-national level. |
| IOM | M & E Officer | P2 | 15% | 3.2 | Compile all report and M and E of the project |
| IOM | 1 DRR Gender Assistant | G4 | 100% | 21.75 | Support day to day running of the project. Coordinate field operations and translation of project documents. Support sub-national government engagement and implementation of field activities. Manage the project visibility and media dissemination. Lead the ToT trainings and CBP implementation in the field. |
| IOM | Finance and Administration Officer | NOB | 10% | 2.175 | Financial management of the project and human resources coordination. |
| IOM | Procurement Officer | NOB | 10% | 2.175 | Support with all procurement and logistics arrangement of the project |
| IOM | Support Staff | G5 | 100% | 2.175 | Support day to day administration of project |
| IOM | 2 Drivers | G2 | 25% | 5.4 | Driving project staff and Support staff during field visit |

3.5.1. Risk management plan

Each UN organization has an Enterprise Risk Management (ERM) Plan as a part of its institutional structure. All projects, regardless of funding source, are covered under these plans. A specific project Risk Management and Mitigation Plan will be developed for this Project prior to implementation and updated as part of the ERM updates every quarter. Considering the project builds on existing Government commitments to address GBV and deepens ongoing partnerships between the UN and counterpart government and civil society organizations, risks related to initiating the project and ownership are low. See the Risk Register (as of July 2020), which will be updated as part of the Inception Period and monitored on a quarterly basis by the Project team.



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3.5.2. Knowledge management plan

Across Outcomes, the project has several activities which will facilitate the generation of new knowledge, capturing of this knowledge and sharing with stakeholders in various ways and will utilize existing NAP GBV and related coordination structures to share and support further knowledge use. By engaging with universities, civil society and policy-makers/service providers, a diverse set of partners will gain exposure to knowledge management practices and processes, but also develop the skills to capture their own knowledge products for sustaining the approach beyond the project cycle. Knowledge products related to the project (Fact Sheets, videos, web stories, Case Studies, etc.) will be developed and shared as relevant throughout, including through social media and platforms such as Youtube, as relevant.

3.5.3. Monitoring and evaluation plan

The project will be monitored in accordance with existing United Nations monitoring and evaluation policies. The monitoring will be based on Results Based Management principles built around the logical framework, in consultation with KOICA. A detailed Project Output Description indicated how each of the activities in the project will be monitored and is available in Annex. Financial monitoring will be conducted in line with each participating agency's rules and regulations and will contribute to the Quarterly Project Update Meetings convened with KOICA. This will be complemented by the Quarterly Risk Monitoring and will together, inform project implementation and adjustments to the workplan to be presented to the Steering Committee on an annual basis.

A National Monitoring and Evaluation Officer employed by UN Women will be responsible for overall coordination of monitoring activities, working closely with the designated monitoring and reporting focal points from each agency. A baseline assessment will be conducted at the inception phase to validate the logframe and facilitate tracking of progress thereafter. The project will have annual reviews involving KOICA, as well as a mid-term review and a formative evaluation at the end of its lifetime. The participating agencies follow the Executive Board approved Harmonized Approach to Cash Transfer (HACT) approach to operational monitoring.

KOICA and the Administrative Agent and/or Participating UN Organizations jointly decide on the monitoring and evaluation of the Project as follows:

The Administrative Agent (UN Women) and Participating UN Organizations (UN Women, UNDP, UNFPA and IOM) will be responsible for initiating, organizing and following up project monitoring and evaluations in accordance with the Project Document and existing United Nations monitoring and evaluation policies;

The Administrative Agent (UN Women) may consult KOICA on the terms of reference for the evaluation and invite KOICA to participate in the monitoring and evaluation at the KOICA's own cost unless explicitly foreseen in the Project budget, all in accordance with the Administrative Agent's Rules and Regulations.

KOICA will conduct its own mid-term and/or end-of-project and/or ex-post evaluation in consultation and cooperation with the Joint Steering Committee and the Administrative Agent. The Project, through the implementing agencies, will, where feasible, support any administrative, logistical or security arrangements as needed and within the context of agency's Rules and Regulations.

3.5.4. Transition or Exit strategy

The United Nations works directly with government and civil society partners. By ensuring that government entities are a part of the work carried out and the key institutional beneficiaries of capacity developing activities, sustainability can be ensured. Through the unique relationship the United Nations system has with governments, who are members in the organization, the UN is better placed than most development partners for ensuring that structural adjustments can be made if needed to ensure sustainability and that capacity development results remain with government and remain available to support rights holders.

This project also specifically supports the Government in strengthening its planning, budgeting and monitoring capacities, which are foundations for the Government to be able to sustain investments made. All partners in the project have strong institutional relations with their implementing partners and are also organizations with a long history in Timor Leste. The combination of long trusted relationships, the open dialogue with government entities, and having a long-term future looking time horizon will facilitate the transition from donor funding to alternative resourcing of activities as required.

3.6. Partnership with Donors

3.6.1. Meetings with KOICA country office in Target Country

This proposal was developed following a presentation on a joint UN Approach to addressing GBV to the KOICA Office in Dili in August 2018, involving UN Women, UNFPA and WHO. UNDP also has an existing partnership with KOICA in Timor-Leste. This Project will build on these engagements, while moving in a joint manner for greater impact. The proposal was initially revised, following feedback from a feasibility mission to Dili from 14-18 January 2019. Subsequently, in the context of the COVID-19 pandemic and following the launch of the EU-UN Spotlight Initiative to end violence against women and girls, the proposal has been further refined to adapt to the context and needs of addressing VAWG in Timor-Leste in June 2020 and then further refined as a result of the second KOICA assessment in July 2020.

3.6.2. Plan for Reporting, meeting, ceremony, etc.

Project Ceremony

A project ceremony can be organized involving the Government-led Inter-Ministerial NAP GBV Commission, as the project will support its work, to be discussed with the relevant institutions under leadership of the Secretary of State for Equality and Inclusion.

Plan for Reporting and Briefing KOICA

The Administrative Agent (UN Women) will provide KOICA headquarters through KOICA country office in Timor-Leste with the following reports during implementation of the Project, as set forth in Paragraph 4 of the Arrangement and in the provisions as below. Annual narrative reports and financial reports will be provided to KOICA using a standard Joint UN reporting format.

- (a) A Quarterly Update with a brief summary of the Project progress including activities and outputs with relevant indicators will be reported through a meeting, including conference calls, to the KOICA country office in Timor-Leste. The modality of the update should be consulted with the KOICA country office in Timor-Leste.
- (b) Annual Report comprising a narrative progress report with output and outcome indicators for the previous 12 months (January-December) reporting period and the provisional financial report will be submitted to the

Together for Equality: Preventing and Responding to Gender-Based Violence in Timor-Leste, November 2020

KOICA headquarters and KOICA country office in Timor-Leste. The Administrative Agent will provide provisional financial reports often as may reasonably be requested by KOICA, with budget execution per activities to the KOICA headquarters and KOICA country office in Timor-Leste, by 31 May of the following year, together with the work plan for the following 12 months..

- (c) Final consolidated narrative report (Synthesis Report), including a summary of outputs and activities undertaken, achievements compared to the goals and objectives for the whole Project period and an evaluation of the Project will be submitted to the KOICA headquarters and country office in Timor-Leste no later than six months (30 June) after the end of the calendar year in which the operational closure of the Programme occurs, by the due date below.
- (d) Annual Financial Statement certified by an authorized official from the Administrative Agent's Division of Management Services (Finance Branch) will be submitted to KOICA headquarters and country office in Timor-Leste no later than 30 June of the following year. KOICA is aware that provisional financial report may be different from the certified financial statement given the timing and internal process.
- (e) Final Financial Statement certified by an authorized official, official from the Administrative Agent's Division of Management Services (Finance Branch) will be submitted to KOICA headquarters and country office in Timor-Leste no later than 30 June following the year in which the project is operationally completed.

Final consolidated financial report, based on certified final financial statements and final financial reports received from Participating UN Organizations after the completion of the activities in the approved programmatic document/Joint Programme Document, including the final year of the activities in the approved programmatic document/Joint Programme Document, to be provided no later than five months (31 May) after the end of the calendar year in which the financial closing of the Programme occurs..

The Administrative Agent and Participating UN Organizations may allocate necessary budget from the given contribution for the below reporting requirements.

Review of Reports

Reporting will begin from the signature of this Arrangement between the Donor and the Administrative Agent, and last until the end of the Project. If the extension of the Project is approved by KOICA, the rescheduled reporting period and due dates will be informed by KOICA to the Administrative Agent after mutual consultation.

Reports provided by the Administrative Agent shall be expressed in United States Dollars. Where necessary, grants, expenditures and income shall be converted into United States Dollars using the relevant operational rate of exchange set by the United Nations.

KOICA will review the reports based on KOICA's reports review criteria including budget execution rate, and progress against the original plan, the concreteness of the following year's work plan, monitoring and evaluation performance, and partnership and cooperation between Sides, etc. KOICA may request the Administrative Agent to complement the reports in terms of contents or provide the Administrative Agent with its suggestions for improvement of the Project when necessary. Upon such requests, the Administrative Agent shall consult the KOICA country office in Timor-Leste and respond promptly with relevant clarification, supplementation or revision of the reports. UN Women, as the Administrative Agent, will liaise with KOICA country office in Timor-Leste to ensure the submissions meet the review criteria including budget execution rate, and progress against the original plan, the concreteness of the following year's work plan, monitoring and evaluation performance, and partnership and cooperation, etc.

In-person project briefings and visits to project sites will be arranged periodically through the project lifetime. Project updates with KOICA and progress will be provided quarterly coordinated through UN Women with the participating agencies, and as requested in the interim periods. Updates will include activities and outputs with relevant indicators presented through the meeting, including virtual meetings, involving the KOICA country office in Timor-Leste. Once a year, the project Steering Committee will present an Update summarizing the progress of the Project to the Inter-Ministerial NAP GBV Commission, involving the KOICA country office in Timor-Leste.

Reporting Schedule

| | Type | Reporting Period | Due date |
|---|----------------------------------|--|---|
| | Quarter 4 2020 Update | Date of signing – Dec. 31 st , 2020 | Project Update Meeting with KOICA (December 2020) |
| 1 | Annual Report | Date of signing - Dec. 31 st , 2020 | May. 31 st , 2021 |
| | Financial Report | Date of signature - Dec. 31 st , 2020 | Certified annual financial statement as of 31 December 2020 ("Source and Use of Funds" as defined by UNDG guidelines) to be provided no later than five months (31 May 2021) |
| | Quarter 1 2021 Update | Jan. 1 st , 2021 - March. 30 th , 2021 | Project Update Meeting with KOICA (March 2021) |
| | Quarter 2 2021 Update | 1 April - Jun. 30 th , 2021 | Project Update Meeting with KOICA (June 2021) |
| 2 | Annual Report | Jan. 1 st , 2021 - Dec. 31 st , 2021 | May. 31 st , 2022 |
| | Financial Report | Jan. 1 st , 2021 - Dec. 31 st , 2021 | Certified annual financial statement as of 31 December 2021 ("Source and Use of Funds" as defined by UNDG guidelines) to be provided no later than five months (31 May 2022) |
| | Quarter 3 2022 Update | July- Sept 2021 | Project Update Meeting with KOICA (July- Sept 2022) |
| | Quarter 4 2022 Update | Oct- Dec 2021 | Project Update Meeting with KOICA (Oct- Dec 2022) |
| | Quarter 1 2022 Update | Jan. 1 st , 2021 - March. 30 th , 2022 | Project Update Meeting with KOICA (March 2022) |
| | Quarter 2 2021 Update | 1 April - Jun. 30 th , 2022 | Project Update Meeting with KOICA (June 2022) |
| 3 | Annual Report | Jan. 1 st , 2022 - Dec. 31 st , 2022 | May. 31 st , 2023 |
| | Financial Report | Jan. 1 st , 2022 - Dec. 31 st , 2022 | Certified annual financial statement as of 31 December 2022 ("Source and Use of Funds" as defined by UNDG guidelines) to be provided no later than 5 months (31 May 2023) |
| | Quarter 3 2022 Update | July- Sept 2022 | Project Update Meeting with KOICA (July- Sept 2022) |
| | Quarter 4 2022 Update | Oct- Dec 2022 | Project Update Meeting with KOICA (Oct- Dec 2022) |
| | Quarter 1 2023 Update | Jan. 1 st , 2023 - March 30 th , 2023 | Project Update Meeting with KOICA (March 2023) |
| | Quarter 2 2023 Update | 1 April - Jun. 30 th , 2023 | Project Update Meeting with KOICA (June 2023) |
| 4 | Annual Report | Jan. 1 st , 2023 - Dec. 31 st , 2023 | May. 31 st , 2024 |
| | Financial Report | Jan. 1 st , 2023 - Dec. 31 st , 2023 | Certified annual financial statement as of 31 December 2023 ("Source and Use of Funds" as defined by UNDG guidelines) to be provided no later than 5 months (31 May 2024) |
| | Quarter 3 2023 Update | July- Sept 2023 | Project Update Meeting with KOICA (July-Sept 2023) |
| | Quarter 4 2023 Update | Oct- Dec 2023 | Project Update Meeting with KOICA (Oct- Dec 2023) |
| | Quarter 1 2024 Update | Jan. 1 st , 2023 - March 30 th , 2024 | Project Update Meeting with KOICA (March 2024) |
| | Quarter 2 2024 Update | 1 April - Jun. 30 th , 2024 | Project Update Meeting with KOICA (June 2024) |
| 5 | Synthesis Report | Date of signature (Nov 2020) – End of the Project (Nov 2024) | Final consolidated narrative report, after completion of the activities in the Joint Programme Document (ProDoc), including the final year of activities in the Joint ProDoc, to be provided no later than six months after the end of the calendar year in which the operational closure of the Programme occurs (30 June 2025) |
| | Provisional Financial Report | Date of signature (Nov 2020) – End of the Project (Nov 2024) | Final Financial Statement certified by an authorized official from the Finance branch will be submitted no later than 31 st May following the year in which the project was operationally completed (31 st May 2025) |
| | Certified Final Financial Report | Date of signature (Nov 2020) – 31 Dec 2025 | Final consolidated financial report, based on certified final financial statements and final financial reports received from Participating UN Organizations after the completion of the activities in the approved Joint Programme Document, including the final year of the activities in the approved Joint Programme Document, no later than five months (31 May) after the end of the calendar year in which the financial closing of the Programme occurs. (31 May 2026) |

3.6.3. Visibility and Public Relations Plan

The Administrative Agent and Participating UN Organizations will endeavour to maximize opportunities that facilitate recognition of KOICA's Contribution on the Project (e.g. through appropriate references in theme-related documentation, public information, and due notice to third sides). In this regard, the Project will be featured in agency-specific publications (UN Women Quarterly Newsletter), UN Facebook Page, Twitter, as well as through regular engagement with local media and foreign correspondents as relevant. Project messaging and materials will also be developed and branded for wide recognition, in line with UN Branding guidelines and in coordination with KOICA.

The overall objective of this Visibility and Public Relations Plan is to raise the visibility of the project "Together for Equality: Preventing and Responding to Gender-Based Violence in Timor-Leste" in order to have a greater impact on national GBV legislation and policies as well as to prevent GBV and empower the victims. Furthermore, this plan forecasts the use of communication material for the project's activities. The goal is to ensure that the function and the results of the project are well understood by each specific target audience for each specific activity.

The Visibility and Public Relations Plan will comprise the following elements:

- 1) Strengthening ties with local media organizations and keeping them informed of the project's work. Building positive, favorable and accurate media coverage will positively shape the public perception towards the project.
- 2) Enhancing the visibility of the project by communicating results, ongoing activities and messages on a consistent basis through media interviews, press releases, open-editorial articles, website stories, informative videos amongst others to be published on the website of relevant UN agencies (UN Women, UNFPA, UNDP and IOM) and their social media channels. This can also make use of agency and partner institution's Youtube channels.
- 3) Utilizing social media channels to further expand the project's outreach and to disseminate messages, results and activities.
- 4) Designing specific communication package (including a brochure, posters, stickers and any other promotional material for creation of the visual identity).

In addition, all commodities and facilities supported by KOICA under this Arrangement will be clearly badged/marked with the KOICA logos which are to be provided by KOICA (as below).

KOICA Logo:



Appendix 1: Problem and Solution Tree Diagram

| Causes | Causal consequences | Problems to be solved | Activities to solve defined problems | Outputs | Outcomes | Objectives | Goal |
|--|--|---|---|---|--|---|--|
| <p>Cause 1.1.1. Young people's lack of knowledge and skills in sexual reproductive health in order to help transform gender attitudes</p> <p>Cause 1.2.1. Schools do not challenge existing gender inequality and reinforce harmful social norms</p> <p>Cause 1.3.1. Athletes and sporting associations can perpetuate masculine cultures which reinforce male entitlement and could be mobilized to promote positive gender norms</p> <p>Cause 1.3.2. Limited role models speaking out against tolerance of violence as a private matter.</p> | <p>Causal consequence 1.1 – 1.3: Young people lack the skills and encouragement to speak out against social norms which emphasize honour of women and girls and privacy of family over rights to live free of violence</p> <p>Causal consequence 1.2: Children are exposed to harmful messages, practices and potential abuse whether at home or in schools that continues the cycle of GBV across generations and are not gaining protective skills to prevent and recover from gender-based violence</p> | <p>Problem 1.1: Women and children are at risk of gender-based violence due to attitudes of victim-blaming and gender norms perpetuate inequality, alongside weak ownership for commitments and disjointed efforts on prevention.</p> | <p>Activity 1.1.1: Develop material and roll-out classroom and extra-curricular programmes with pre-secondary students, parents and educators to change harmful attitudes and social norms and prevent sexual harassment and school-related GBV in Baucau, Covalima and RAEOA</p> <p>Activity 1.1.2: Conduct a gender analysis of national sports associations and design GBV and sport group sessions to prevent young athletes from sexual harassment and promote their roles as advocates for equitable gender roles and positive masculinities.</p> <p>Activity 1.1.3: Develop tools, materials and provide technical support to the National University of Timor-Leste for its "Safe Campus" initiative to prevent sexual violence on campus</p> | <p>Output 1.1: Increased knowledge and skills in students, youth, teachers and parents to promote respectful relationships, based on gender equitable norms</p> | <p>Outcome 1: Transformed attitudes, behaviours and social norms promoted at individual and interpersonal levels to prevent GBV.</p> | <p>Objective 1: Prevent gender-based violence, in particular sexual harassment and other forms of violence against women and girls, before it happens or before it re-occurs.</p> | <p>Women and girls in Timor-Leste are empowered to enjoy their right to live free of sexual harassment and other forms of violence in public and private spaces and can access quality essential services, in line with the Sustainable Development Goals.</p> |

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| <p>Cause 1.4.1. Women do not have financial or social resources to influence decision-making in their homes</p> | <p>Causal consequence 1.4-1.5. Women may have few opportunities to reduce the factors that put them at risk of violence, which perpetuates their vulnerability for abuse</p> | | <p>Activity 1.1.4: Support Scouts in the targeted municipalities and National Scouts Association to roll-out the "Voices against Violence" curriculum to promote respectful relationships using peer-education and advocacy.</p> | | | | |
| <p>Cause 1.5.1. Community development and disaster risk reduction policies inadvertently discriminate against women and reinforce the feminization of poverty</p> | | | <p>Activity 1.1.5: Support comprehensive sexuality and reproductive health education in youth centres and schools include a provision of Comprehensive Sexuality Education (CSE) and utilize existing extra-curricular materials to promote gender-equitable attitudes, greater equality of power in intimate relationships and reduce the incidence of GBV.</p> | | | | |
| | | | <p>Activity 1.2.1: Provide women informal workers with economic and social empowerment through financial literacy and entrepreneurship training, income generation activities, combined with group education sessions for women and their partners on gender norms, power and communication.</p> | <p>Output 1.2: Enhanced economic empowerment opportunities for women who face multiple forms of discrimination</p> | | | |
| | | | <p>Activity 1.2.2: Support comprehensive resilience building against emerging emergencies (COVID-19) for vulnerable groups, conduct awareness raising and build the capacity of 30 women's groups and women leaders to participate in DRR decision-making structures, develop GBV integrated CBDRM plans, and identify CBDRM resilient and sustainable livelihood projects that contribute to enhancing women's economic empowerment.</p> | | | | |

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| <p>Cause 1.6.1: Social norms promote rigid gender roles and harmful masculinities that do not reflect gender equality</p> <p>Cause 1.7.1: Stigma, shame and limited awareness of support services limit help-seeking of gender-based violence survivors</p> | <p>Causal consequence 1.6: Survivors of violence face shame and stigma which revictimizes victims and perpetuates the cycle of abuse.</p> <p>Causal Consequence 1.7: violence in public spaces is under-reported and support services do not reach those who need them</p> | <p>Problem 1.2: many GBV survivors are disempowered and isolated in their communities.</p> | <p>Activity 1.3.1: Support civil society to conduct outreach and training for survivors to access peer-support and self-care skills, reduce stigma and encourage help-seeking, using mobile technology and other innovative platforms.</p> <p>Activity 1.3.2: Conduct analysis of cases of sexual violence in public (including workplaces and educational institutions), and support development of recommendations</p> | <p>Output 1.3: Increased access to support for survivors of GBV, persons with disabilities, members of the LGBTI community, among other marginalized groups</p> | | |
| <p>Cause 2.1.1: Limited awareness of GBV as a public health issue.</p> <p>Cause 2.2.1: Lack of knowledge by general community on health consequences of GBV and available services.</p> | <p>Causal Consequence 2.1: GBV issues are not well reflected in policies/programmes</p> <p>Causal Consequence 2.2: Victims of GBV do not turn to health facilities to seek assistance.</p> | <p>Problem 2.1: Awareness raising on GBV as public health issues needs to be increased.</p> <p>Problem 2.2: Community do not know that health facilities can attend to victims of violence. Victims of violence seek health care though they</p> | <p>Activity 2.1.1: To conduct awareness raising and understanding of GBV through evidence-based advocacy among senior policy-makers and within health system, about its nature, health and other consequences, risks and causal factors through in country workshops</p> <p>Activity 2.1.2: To conduct community awareness workshops about availability of and need for timely access to health-care services through health facilities/in partnership with national NGO (with well-established community based group) support MoH to conduct outreach activity on health impact of GBV and available services</p> | <p>Output 2.1: Strengthened capacity of health workers'/providers' to provide coordinated responses to gender-based violence.</p> | <p>Outcome 2: Improved access to essential public services (health, justice and social services) for women and girls, among other survivors of violence, informed by evidence-based responses to GBV.</p> | <p>Objective 2: Empower survivors of gender-based violence, especially women and girls, to recover and rebuild their lives through improved access to multi-sectoral services and public spaces.</p> |

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| <p>Cause 2.3.1: Lack of training to health workers to provide appropriate support and services to victims of GBV</p> | <p>Causal Consequence 2.3: Health workers are not able to provide timely and appropriate services to victims of GBV</p> | <p>do not reveal violence as primary reason seeking care.</p> | <p>Activity 2.1.3: Enhance the participation of health care providers in the existing referral network through hosting referral meetings to support strengthening coordination within health system and with other sectors for a strong multisectoral response to GBV</p> <p>Activity 2.1.4: Provide Technical assistance to MoH through placement of a National coordinator and 4 regional coordinators</p> <p>Activity 2.1.5: Strengthen ability of health care providers to respond to GBV through review and update of national guideline for health service providers on identification, management and referral of victims/survivors of GBV and be more inclusive</p> <p>Activity 2.1.6: Develop supervision tools including HMIS reporting format (while ensuring anonymity and confidentiality) and train and support supervision to health facilities on the utilisation and reporting</p> <p>Activity 2.1.7: Establish Medico Legal committee to provide expertise and knowledge in relation Health sector involvement to legal process related to GBV cases</p> <p>Activity 2.1.8: Establish within prioritized health facilities (6 hospitals and 8 Community Health Centres with bed) spaces to provide LIVES and other components of essential health service package as required ensuring confidentiality and privacy</p> | | | | |
| <p>Problem 2.3: Health providers have an important role to play in preventing and responding to GBV; however, their capacity in detecting cases, provision of services and linking services from and to other sectors remains limited.</p> | | | | | | | |

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| Cause 2.4.1: Lack of or limited free legal aid services for the victims of GBV by the state and non-state institutions | Causal consequence 2.4: Accessing justice remains difficult and expensive to GBV survivors | Problem 2.4: Non-existent or limited capacity of the public defenders and in-house CSO lawyers in supporting GBV survivors and handling the GBV cases. | Activity 2.1.9: In coordination with existing tertiary educational institutions, through development of teaching aid materials to integrate content about the identification of, and response to and referral of GBV in pre-service curriculum building on WHO guidelines and tools. Activity 2.2.1: Provide technical assistance to the PDO and CSOs' in-house lawyers to enhance their knowledge, skills, and systems to handle GBV cases | Output 2.2: Enhanced capacity of the justice and law enforcement institutions to provide survivor-centred access to justice for women, including survivors of gender-based violence | | |
| Cause 2.5: Entrenched gendered social norms and limited access to information on the relevant laws, policies, and formal justice options | Causal consequence 2.5: Limited understanding about how to prevent and respond to the GBV cases in their families and communities especially in rural areas | Problem 2.5: GBV survivors and the families and community members do not know women's legal rights and recourses and formal justice options | Activity 2.2.2: Provide legal outreach and consultations on GBV and existing systems, institutions and procedures in place through PDO's Access to Justice Clinics in the Dili, Baucau, Suai, and Oecusse Judicial Districts | | | |
| Cause 2.6: Limited gender sensitivity and survivor-centred mechanisms in the Police and Prosecution to adequately respond to the GBV survivors | Causal consequence 2.6: GBV survivors' initial contact experience with the police and prosecution is not always positive, and women and GBV survivors are reluctant | Problem 2.6: The National Police, including the community police, and the Office of Prosecutor- | Activity 2.2.3: Provide technical assistance to the PNTL and Office of Prosecutor-General in developing the institutional capacity in the GBV case management and protocols | | | |

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| | to seek justice following their experiences of abuse | General are lacking GBV survivor-centred mechanisms and the overall institutions need to be gender mainstreamed | | | | | | | |
| Cause 2.7.1: Lack of survivor-centered approach in the courts | Causal consequence 2.7: Judges' gender-biased and insensitive comments during the court hearings reported by victims; suspended sentencing practices | Problem 2.7: Women face discrimination and gender bias within the justice system | 2.2.4. Conduct monitoring on GBV cases in trials in the permanent and mobile courts and support advocacy | | | | | | |
| Cause 3.1.1: Community influencers (e.g. religious leaders) are not harnessed to use their roles fully as duty bearers in addressing GBV. | Causal consequence 3.1: Survivors of violence face shame and stigma which revictimizes victims and perpetuates the cycle of abuse | Problem 3: Weak implementation and monitoring capacity of GE laws and policies on GBV limits impact of prevention efforts and facilitates impunity for perpetrators | Activity 3.1.1: Support traditional, religious leaders, persons with disabilities and LGBTI persons to become advocates for safe public spaces through dialogue and awareness-raising sessions organized by civil society | Output 3.1: Mobilized community members, local authorities and media in support of gender equality and safety in public spaces | Outcome 3: Enhanced legislation and policy environment for eliminating violence against women and girls and other forms of gender discrimination, is in place and translated into action | Objective 3: Enforce implementation, monitoring and adequate resourcing of legislation and policies that address violence against women and girls (VAWG) in public spaces, in | | | |
| Cause 3.2.1 DRR mechanisms are not aware of the increased risk of GBV | Causal consequence 3.2: DRR mechanisms lose opportunities to reduce women's risk of | | Activity 3.1.2: Build national capacity for multi-sectoral joint rapid response and crisis management through SOP development and providing training for first responders to | | | | | | |

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| <p>related to disasters</p> | <p>GBV by not engaging them in ongoing investments in disaster preparedness</p> | <p>identify needs of vulnerable groups, mitigate risks of GBV during disaster response and safely respond to disclosure of GBV incidents</p> | <p>Activity 3.1.3: Map and assess evacuation centres and routes in communities with a high risk of displacement, promoting participation of community members, including women, men, boys and girls in the set-up of evacuation centers</p> | <p>the context of disaster risk reduction and promote gender equality more broadly.</p> |
| <p>Cause 3.3.1: Media outlets lack protocols and sensitivity on the causes and consequences of GBV and the harm that can be done through reporting on the issue</p> <p>Cause 3.3.2: Gender stereotypes and beliefs around violence inform the way that GBV is covered by media outlets</p> | <p>Causal consequence 3.3: Media reporting on GBV perpetuates inequitable social norms and victim-blaming</p> | <p>Activity 3.1.4: Develop guidelines and train media personnel on gender-sensitive reporting of sexual violence in public spaces (including places of work)</p> <p>Activity 3.1.5: Support media monitoring on gender issues, including in the context of sexual violence in public spaces and natural disasters/ pandemics (with journalism students and civil society)</p> | <p>Activity 3.1.4: Develop guidelines and train media personnel on gender-sensitive reporting of sexual violence in public spaces (including places of work)</p> <p>Activity 3.1.5: Support media monitoring on gender issues, including in the context of sexual violence in public spaces and natural disasters/ pandemics (with journalism students and civil society)</p> | |
| <p>Cause 3.4.1: Limited investments to strengthen national systems for coordination on GBV efforts. Capacities of national partners for coordination on GBV is weak</p> | <p>Causal consequence 3.4: Efforts to implement GBV policies are not well coordinated or monitored. Coordination efforts are often project-based, operate in silos and are not sustained over</p> | <p>Activity 3.2.1: Strengthen capacity of SEI personnel and municipal focal points on gender budget analysis and conduct mapping of investments in gender equality and women's empowerment</p> <p>Activity 3.2.2: Design ToT and roll-out training for Municipal Gender Working Groups on conducting annual gender budget assessments and allocating investments for safe public spaces</p> | <p>Output 3.2: Public institutions have strengthened capacities for planning, implementing and reporting on VAWG in public and private spaces</p> | |

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| <p>Cause 3.4.2 Inter-ministerial coordination is ad-hoc and does not result in better programming</p> <p>Causal consequence 3.5.1: Annual Action Plans of line ministries do not reflect GE and GBV commitments or budget for their implementation</p> <p>Cause 3.5.1 Line ministry capacity to plan and allocate for GE commitments limited</p> <p>Cause 3.6.1: Lack of a systematic investment and evidence-based approach to prevention and response to GBV across sectors</p> <p>Cause 3.7.1: Limited capacities of CSOs and rights holders to monitor and call to account duty bearers on GBV efforts and related GE commitments</p> <p>Cause 3.7.1 CSOs do not have consistent levels of understanding on gender-responsive</p> | <p>time. Inter-ministerial coordination is ad-hoc and does not result in better programming</p> <p>Causal consequence 3.5.1: Annual Action Plans of line ministries do not reflect GE and GBV commitments or budget for their implementation</p> <p>Causal consequence 3.6: Efforts to prevent and address GBV lack sustainability and institutional capacities</p> <p>Causal consequence 3.7.1: CSOs are unable to influence implementation of GE laws and policies.</p> <p>Causal consequence 3.7.2: CSOs are unable to present a collective voice with evidence for increasing State resource investments</p> | <p>Activity 3.2.3: Conduct workshops for members of NAP/GBV Inter-ministerial Coordination Mechanism for better tracking and reporting on EVAW progress (topics on the RESPECT Prevention Framework, Essential Services Package, monitoring, sexual harassment and reporting mechanisms)</p> <p>Activity 3.2.4: Provide technical support and training to Government stakeholders (MSSI, MOI, SEH, PNTL) on protection, GBV core concepts and principles, risk identification, GBV mitigation measures, PSEA, AAP, Code of Conduct, available support, and referral pathways</p> <p>Activity 3.2.5: Provide technical support to the National Disaster Operating Center (NDOC) to ensure sex-age and disability-disaggregated data (SADDD) is collected to generate evidence and inform disaster response systems</p> | <p>Activity 3.3.1: Provide technical assistance and guidance for civil society to jointly track progress and report on efforts to address sexual violence in public spaces, in line with government gender equality commitments, including NAP/GBV, CEDAW and UNSCR 1325.</p> <p>Activity 3.3.2: Conduct training with CSOs in targeted municipalities to conduct safety audits and determine costs of recommendations related to creating safe public spaces.</p> <p>Activity 3.3.3: Conduct training on evidence-based advocacy and support joint advocacy initiatives, including survivors of violence, to facilitate investment in the NAP/GBV and safe public spaces.</p> | <p>Output 3.3: Strengthened civil society capacity to analyze and advocate for Government funding for addressing sexual violence in public spaces and GBV-related policies</p> | | |
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Appendix 2. Logical Framework (See Project Design Matrix -PDM in Appendix 6 for additional details)

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| Project Name | Together for Equality: Preventing and Responding to Gender-Based Violence in Timor-Leste | | |
| Goal | Women and girls in Timor-Leste are empowered to enjoy their right to live free of sexual harassment and other forms of violence in public and private spaces and can access quality essential services, in line with the Sustainable Development Goals. | | |
| Objectives | <ol style="list-style-type: none"> 1. Prevent gender-based violence, in particular sexual harassment and other forms of violence against women and girls, before it happens or before it re-occurs. 2. Empower survivors of gender-based violence, especially women and girls, to recover and rebuild their lives through improved access to multi-sectoral services and public spaces. 3. Enforce implementation, monitoring and adequate resourcing of legislation and policies that address violence against women and girls (VAWG) in public spaces, in the context of disaster risk reduction and promote gender equality more broadly. | | |

| Outcome 1 | Indicator | Baseline | Target | Means of Verification | Source of data | Frequency of data collection | Activities | Responsible Party | Planned Target (2020-2024) |
|--|--|---|--------------------------------------|--|-----------------------|-------------------------------------|---|-----------------------------------|--------------------------------------|
| Transformed attitudes, behaviours and social norms promoted at individual and inter-personal levels to prevent GBV | % of project participants who think it is never justifiable for a man to beat his wife, by sex | (2016 data show 81% women and 79% men justify a man beating his wife) | TBD (depending when DHS takes place) | DHS (every 5-7 years, last one was 2016) or specialized VAW surveys | DHS Survey | Every 5-7 years, last one was 2016 | All activities under Outcome 1 | All Agencies (UNFPA leads on DHS) | TBD (depending when DHS takes place) |
| Output 1.1 – 1.3 | Indicators | Baseline | Target | Means of Verification | Source of data | Frequency of data collection | Activities | Responsible Party | Planned Target (2020-2024) |
| Output 1.1 Increased knowledge and skills in students, youth, teachers and parents to promote respectful relationships, based on gender equitable norms | % of young people, parents and teachers, by sex, who demonstrate a change in gender attitudes after receiving training/being part of on CSE or Connect with Respect. | 0 | 75% | Annual UN Women Surveys with participants of school-based activities Activity Report UNFPA/ UN Women monitoring Report (Pre-post tests) | Surveys | Annual | 1.1.1. Develop material and roll-out classroom and extra-curricular programmes with pre-secondary students, parents and educators to change harmful attitudes and social norms and prevent sexual harassment and school-related GBV in Baucau, Covallima and RAEOA. 1.1.2. Conduct a gender analysis of national sports associations and design GBV and sport group sessions to prevent young athletes from sexual harassment and promote their roles as advocates for equitable gender roles and positive masculinities. 1.1.3 Develop tools, materials and provide technical support to the National University of Timor-Leste for its "Safe Campus" initiative to prevent sexual violence on campus | UN Women and UNFPA | Target 75% by end of Project |

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| <p>Output 1.2 Enhanced economic empowerment opportunities for women who face multiple forms of discrimination</p> | <p>(Quantitative) Number of participants of entrepreneurship training, by sex, age and disability (UN Women Target: 400: 100 per municipality)</p> | <p>Number of women and young people from marginalized groups reached through economic empowerment interventions</p> | <p>Target: 400: 100 per municipality</p> | <p>UN Women and IOM monitoring. (Annual partner monitoring, capacity development of women's groups and women leaders)</p> | <p>Annual</p> | <p>1.1.4 Support Scouts in the targeted municipalities and National Scouts Association to roll-out the "Voices against Violence" curriculum to promote respectful relationships using peer-education and advocacy. 1.1.5 Support comprehensive sexuality and reproductive health education in youth centres and schools include a provision of Comprehensive Sexuality Education (CSE) and utilize existing extra-curricular materials to promote gender-equitable attitudes, greater equality of power in intimate relationships and reduce the incidence of GBV. 1.2.1 Provide women informal workers with economic and social empowerment through financial literacy and entrepreneurship training, income generation activities, combined with group education sessions for women and their partners on gender norms, power and communication 1.2.2 Support comprehensive resilience building against emerging emergencies (COVID-19) for vulnerable groups, conduct awareness raising and build the capacity of 30 women's groups and women leaders to participate in DRR decision-making structures, develop GBV-integrated CBDRM plans, and identify CBDRM resilient and sustainable livelihood projects that contribute to enhancing women's economic empowerment.</p> | <p>UN Women and IOM</p> | <p>Target: 400: 100 per municipality</p> |
| <p>Output 1.3 1.3 Increased</p> | <p>(Qualitative) % of Self-reliance and confidence of participants to continue the initiative in economic activities Number of service providers in</p> | | <p>Target: 4 administrators</p> | <p>UN Women monitoring</p> | <p>Annual</p> | <p>1.3.1 Support civil society to conduct outreach and training for survivors to</p> | <p>UN Women</p> | |

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| <p>access to support for survivors of GBV, persons with disabilities, members of the LGBTI community, among other marginalized groups</p> | <p>project administrative posts providing information on services and counselling for victims (Timor-Leste NAP GBV Indicator 2.3.1)</p> | <p>Administrative posts have peer-support mechanisms</p> | <p>(Annual) Tool will be developed at inception to measure the access to peer support and support services; will be measured annually</p> | <p>Source of data NAP GBV 2019 Monitoring report</p> | <p>Frequency of data collection Annual</p> | <p>Activities All activities under Outcome 2</p> | <p>Responsible Party UNDP and UNFPA</p> | <p>4 administrative posts have peer-support mechanisms</p> |
| <p>Outcome 2 Improved access to essential public services (health, justice and social services) for women and girls, among other survivors of violence, informed by evidence-based responses to GBV</p> | <p>Indicator Number of survivors satisfied with assistance of multi-sectoral services (this comes from Timor-Leste's NAP GBV Outcome Indicator 2.6)</p> | <p>Baseline TBD</p> | <p>Means of Verification NAP GBV Monitoring</p> | <p>Source of data NAP GBV 2019 Monitoring report</p> | <p>Frequency of data collection Annual</p> | <p>Activities All activities under Outcome 2</p> | <p>Responsible Party UNDP and UNFPA</p> | <p>Planned Target (2020-2024) TBD</p> |
| <p>Output 2.1-2.2 Output 2.1 Strengthened capacity of health workers'/provider coordinated responses to gender-based violence</p> | <p>Indicators Number of Health Facilities that implemented the Standard Operating Procedures (SOP) integrated services to survivors of Gender Based Violence and referral</p> | <p>Baseline</p> | <p>Means of Verification UNFPA: Timor-Leste Demographic Health Survey HMIS and MCH Report, UNFPA report</p> | <p>Source of data UNFPA: Timor-Leste Demographic Health Survey HMIS and MCH Report, UNFPA report</p> | <p>Frequency of data collection Annual</p> | <p>Activities 2.1.1. To conduct awareness raising and understanding of GBV through evidence-based advocacy among senior policy-makers and within health-system, about its nature, health and other consequences, risks and causal factors through in country workshops. 2.1.2 To conduct community awareness workshops about availability of and need for timely access to health-care services through health facilities/In partnership with national NGO (with well-established community based group) support MoH to conduct outreach activity on health impact of GBV and available services. 2.1.3 Enhance the participation of health care providers in the existing referral network through hosting referral</p> | <p>Responsible Party UNFPA</p> | <p>Planned Target (2020-2024) Target: 34 by end of Project</p> |

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| Output 2.2 Enhanced Capacity of the justice and law enforcement institutions to provide survivor-centred access to justice for women, including: | % increase in clients receiving GBV support by legal aid providers supported by the project PDO, PNTL, and OPG, having a | Target: 50% increase by the end of Project | Data collection and reporting templates, data from partners, field trip reports, completed guidelines and manuals (Quarterly and | (Quarterly and Annual Progress Reports) | Quarterly and annual | meetings to support strengthening coordination within health system and with other sectors for a strong multisectoral response to GBV. 2.1.4 Provide Technical assistance to MoH through placement of a National coordinator and 4 regional coordinators. 2.1.5 Strengthen ability of health care providers to respond to GBV through review and update of national guideline for health service providers on identification, management and referral of victims/survivors of GBV and be more inclusive. 2.1.6 Develop supervision tools including HMIS reporting format (while ensuring anonymity and confidentiality) and train and support supervision to health facilities on the utilisation and reporting. 2.1.7 Establish Medico Legal committee to provide expertise and knowledge in relation Health sector involvement to legal process related to GBV cases. 2.1.8 Establish within prioritized health facilities (6 hospitals and 8 Community Health Centres with bed) spaces to provide LIVES and other components of essential health service package as required ensuring confidentiality and privacy. 2.1.9. In coordination with existing tertiary educational institutions, through development of teaching aid materials to integrate content about the identification of, and response to and referral of GBV in pre-service curriculum building on WHO guidelines and tools | UNDP | Target: 50% increase by the end of Project) |
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| survivors of gender-based violence | guideline and training manuals on relevant laws on GBV case handlings (Yes by the end of Project) | Annual Progress Reports) | | | | | | | |
| Outcome 3 | Indicators | Baseline | Target | Means of Verification | Source of data | Frequency of data collection | Activities | Responsible Party | Planned Target (2020-2024) |
| Enhanced legislation and policy environment for eliminating violence against women and girls and other forms of gender discrimination, is in place and translated into action | Percent (%) of NAP GBV activities implemented | 0% | TBD by end of 2021 for NAP GBV 2017-2021; 50% by 2024 for subsequent NAP GBV | Baseline/ endline analysis and analysis of annual NAP GBV reports coordinated by SEI | NAP GBV reports | Annual | <p>Clinics in the Dili, Baucau, Suai, and Oecusse Judicial Districts</p> <p>Activity 2.2.3. Provide technical assistance to the PNTL and Office of Prosecutor-General in developing the institutional capacity in the GBV case management and protocols</p> <p>Activity 2.2.4 Conduct monitoring on GBV cases in trials in the permanent and mobile courts and support advocacy.</p> <p>3.1.1. Support traditional, religious leaders, persons with disabilities and LGBTI persons to become advocates for safe public spaces through dialogue and awareness-raising sessions organized by civil society.</p> <p>3.1.2. Build national capacity for multi-sectoral joint rapid response and crisis management through SOP development and providing training for first responders to identify needs of vulnerable groups, mitigate risks of GBV during disaster response and safely respond to disclosure of GBV incidents.</p> <p>3.1.3 Map and assess evacuation centres and routes in communities with a high risk of displacement, promoting participation of community members, including women, men, boys and girls in the set-up of evacuation centers.</p> <p>3.1.4 Develop guidelines and train media personnel on gender-sensitive reporting of sexual violence in public spaces (including places of work)</p> <p>3.1.5. Support media monitoring on gender issues, including in the context of sexual violence in public spaces and natural disasters/ pandemics (with journalism students and civil society).</p> | UN Women (w/inputs from all agencies) | Target: TBD by end 2021 for NAP GBV 2017-2021; 50% by 2024 for subsequent NAP GBV |
| Output | Indicators | Baseline | Target | Means of Verification | Source of data | Frequency of data collection | Activities | Responsible Party | Planned Target (2020-2024) |

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| <p>Output 3.1 Mobilized community members, local authorities and media in support of gender equality and safety in public spaces</p> | <p>% of villages in Baucau, Covailima and Oecusse who have at least one public champion against VAWG</p> | <p>Target: 80%</p> | <p>Baseline and Endline UN Women monitoring survey, IOM monitoring training of government stakeholders and other first responders</p> | <p>Baseline and Endline monitoring survey</p> | <p>End of project</p> | <p>3.1.1. Support traditional, religious leaders; persons with disabilities and LGBTI persons to become advocates for safe public spaces through dialogue and awareness-raising sessions organized by civil society. 3.1.2. Build national capacity for multi-sectoral joint rapid response and crisis management through SOP development and providing training for first responders to identify needs of vulnerable groups, mitigate risks of GBV during disaster response and safely respond to disclosure of GBV incidents. 3.1.3 Map and assess evacuation centres and routes in communities with a high risk of displacement, promoting participation of community members, including women, men, boys and girls in the set-up of evacuation centers. 3.1.4 Develop guidelines and train media personnel on gender-sensitive reporting of sexual violence in public spaces (including places of work); 3.1.5. Support media monitoring on gender issues, including in the context of sexual violence in public spaces and natural disasters/ pandemics (with journalism students and civil society).</p> | <p>UN Women and IOM</p> | <p>End of project Target: 80%</p> |
| <p>Output 3.2 Public institutions have strengthened capacities for planning, implementing and reporting on VAWG in public and private spaces</p> | <p>(Quantitative) Number of institutions/ organizations which monitor their implementation of the NAP GBV annually using standardized framework</p> | <p>Target: 13 institutions by end of Project</p> | <p>Annual monitoring report (2021, 2022, 2023, 2024) of the NAP GBV or information on NAP GBV implementation provided by relevant institutions to SEH (by the end of March the following year), IOM monitoring support and</p> | <p>Annual monitoring report (2021, 2022, 2023, 2024) of the NAP GBV or information on NAP GBV implementation provided by relevant institutions to SEH</p> | <p>Annual</p> | <p>3.2.1 Strengthen capacity of SEI personnel and municipal focal points on gender budget analysis and conduct mapping of investments in gender equality and women's empowerment. 3.2.2. Design ToT and roll-out training for Municipal Gender Working Groups on conducting annual gender budget assessments and allocating investments for safe public spaces 3.2.3 Conduct workshops for members of NAP GBV Inter-ministerial Coordination Mechanism for better tracking and reporting on EYAW progress (topics on the RESPECT Prevention Framework, Essential Services Package, monitoring, sexual harassment and reporting</p> | <p>UN Women and IOM</p> | <p>Target: 13 institutions by end of Project)</p> |

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| <p>Output 3.3: Strengthened civil society capacity to analyze and advocate for Government funding for addressing sexual violence in public spaces and GBV-related policies</p> | <p>% of CSOs working on GBV with knowledge on government policies and budgets related to NAP GBV</p> | <p>Target: 50% by end of Project</p> | <p>Annual Monitoring by UN Women using a baseline and endline survey with CSOs (Quiz type)</p> | <p>Baseline and endline survey with CSOs</p> | <p>Annual</p> | <p>3.3.1 Provide technical assistance and guidance for civil society to jointly track progress and report on efforts to address sexual violence in public spaces, in line with government gender equality commitments, including NAP GBV, CEDAW and UNSCR 1325; 3.3.2 Conduct training with CSOs in targeted municipalities to conduct safety audits and determine costs of recommendations related to creating safe public spaces; 3.3.3 Conduct training on evidence-based advocacy and support joint advocacy initiatives, including survivors of violence, to facilitate investment in the NAP GBV and safe public spaces.</p> | <p>UN Women</p> | <p>Target: 50% by end of Project</p> |
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Appendix 4: Budget Allocation (As per proposed disbursements)

| Outputs | Activities | 2020 | | | | 2021 | | | | 2022 | | | | 2023 | | | | 2024 | | | | TOTAL | | |
|-------------------------------|------------|-----------|--------------|----|----|--------------|--------------|-----|----|------|---------------|--------------|-----------|------|----|--------------|--------------|----------|----|----|----|-------------|--------------|---------------|
| | | Q4 | USD | Q1 | Q2 | Q3 | Q4 | USD | Q1 | Q2 | Q3 | Q4 | USD | Q1 | Q2 | Q3 | Q4 | USD | Q1 | Q2 | Q3 | | Q4 | USD |
| Project inception/recruitment | 1.1.1. | X | \$ 2,000 | X | X | X | \$ 94,000 | X | X | X | X | \$ 64,000 | X | X | X | X | \$ 29,000 | X | X | X | X | X | \$ 8,000 | \$ 197,000 |
| | 1.1.2. | | \$ - | X | X | X | \$ 16,000 | X | X | X | X | \$ 47,000 | X | X | X | X | \$ 22,750 | X | X | X | X | X | \$ 14,250 | \$ 100,000 |
| | 1.1.3. | X | \$ 3,000 | X | X | X | \$ 23,250 | X | X | X | X | \$ 29,000 | X | X | X | X | \$ 23,250 | X | X | X | X | X | \$ 13,500 | \$ 92,000 |
| | 1.1.4. | | \$ 6,000 | X | X | X | \$ 25,000 | X | X | X | X | \$ 35,000 | X | X | X | X | \$ 25,000 | X | X | X | X | X | \$ 11,000 | \$ 102,000 |
| | 1.1.5. | | \$ 9,500 | X | X | X | \$ 23,500 | X | X | X | X | \$ 14,000 | X | X | X | X | \$ 23,500 | X | X | X | X | X | \$ 9,500 | \$ 80,000 |
| | 1.1.6. | X | \$ 10,320 | X | X | X | \$ 30,000 | X | X | X | X | \$ 70,000 | X | X | X | X | \$ 50,000 | X | X | X | X | X | \$ 50,000 | \$ 210,320 |
| | 1.1.7. | X | \$ 8,023.43 | X | X | X | \$ 32,093.75 | X | X | X | X | \$ 32,093.75 | X | X | X | X | \$ 32,093.75 | X | X | X | X | X | \$ 24,070.32 | \$ 128,375.00 |
| Output 1.2 | 1.2.1. | X | \$ 6,500 | X | X | X | \$ 127,500 | X | X | X | X | \$ 47,500 | X | X | X | X | \$ 17,500 | X | X | X | X | X | \$ 2,000 | \$ 201,000 |
| | 1.2.2. | | \$ 15,000 | X | X | X | \$ 155,000 | X | X | X | X | \$ 190,000 | X | X | X | X | \$ 20,000 | X | X | X | X | X | \$ - | \$ 380,000 |
| | 1.2.3. | | | X | X | X | \$ 46,984 | X | X | X | X | \$ 46,984 | X | X | X | X | \$ 46,984 | X | X | X | X | X | \$ 46,984 | \$ 187,936 |
| | 1.2.4. | | \$ 25,000 | X | X | X | \$ 10,000 | X | X | X | X | \$ 10,000 | X | X | X | X | \$ 9,000 | X | X | X | X | X | \$ - | \$ 54,000 |
| Output 1.3 | 1.3.1. | | \$ - | X | X | X | \$ 40,000 | X | X | X | X | \$ 50,000 | X | X | X | X | \$ - | X | X | X | X | X | \$ - | \$ 90,000 |
| | 1.3.2. | X | \$ 3,000 | | | | \$ 9,000 | X | X | X | X | \$ 12,000 | X | X | X | X | \$ 7,000 | X | X | X | X | X | \$ 1,000 | \$ 32,000 |
| | 1.3.3. | | | X | X | X | \$ 46,984 | X | X | X | X | \$ 46,984 | X | X | X | X | \$ 46,984 | X | X | X | X | X | \$ 46,984 | \$ 187,936 |
| Output 2.1 | 2.1.1. | | \$ 4,500 | | | | \$ 7,250 | | X | | | \$ 7,250 | | X | | | \$ 9,000 | | X | | | | \$ 7,000 | \$ 35,000 |
| | 2.1.2. | | \$ 15,000 | X | X | X | \$ 45,000 | X | X | X | X | \$ 45,000 | X | X | X | X | \$ 45,000 | X | X | X | X | X | \$ 30,000 | \$ 180,000 |
| | 2.1.3. | | \$ 2,500 | X | X | X | \$ 5,000 | | X | | | \$ 5,000 | | X | | | \$ 5,000 | | X | | | | \$ 2,500 | \$ 20,000 |
| | 2.1.4. | | \$ 7,692 | X | X | X | \$ 25,000 | X | X | X | X | \$ 25,000 | X | X | X | X | \$ 25,000 | X | X | X | X | X | \$ 17,308 | \$ 100,000 |
| | 2.1.5. | | | | | | | | | | | | | | | | | | | | | | | \$ 75,000 |
| | 2.1.6. | | | | | | | | X | X | X | X | \$ 38,000 | | X | | | \$ 6,000 | | X | | | | \$ 6,000 |
| Output 2.1 | 2.1.7. | | | | | | \$ 15,000 | X | X | X | X | \$ 19,750 | X | X | X | X | \$ 4,750 | X | X | X | X | X | \$ 500 | \$ 40,000 |
| | 2.1.8. | | \$ 18,000 | X | X | X | \$ 48,950 | X | X | X | X | \$ 41,800 | X | X | X | X | \$ 8,950 | X | X | X | X | X | \$ 1,800 | \$ 119,500 |
| | 2.1.9. | | | | | | \$ 16,000 | X | X | X | X | \$ 24,000 | | X | | | | | | | | | | \$ 40,000 |
| | 2.1.10 | X | \$ 24,070.38 | X | X | X | \$ 96,281.25 | X | X | X | X | \$ 96,281.25 | X | X | X | X | \$ 96,281.25 | X | X | X | X | X | \$ 72,210.87 | \$ 385,125.00 |
| 2.2.1 | | \$ 50,000 | X | X | X | \$ 78,392.00 | X | X | X | X | \$ 156,642.00 | X | X | X | X | \$ 79,392.00 | X | X | X | X | X | \$ 9,464.00 | \$ 373,890 | |

Appendix 5: Communication Management Plan

This document outlines the communication management for the proposed KOICA-funded project “Preventing and Responding to Gender-Based Violence in Timor-Leste” to be jointly implemented by UN Women, UNFPA, UNDP and IOM in Timor-Leste.

This Project will create a Communications Plan following the baseline findings, to incrementally raise visibility of sexual violence in public spaces and domestic violence, as key forms of gender-based violence being addressed by the project through diverse communication channels. It will increase stakeholders engaged and communicating about these issues, and influence attitudes and behaviors related to these issues (such as stereotypes around women and men’s gender roles, tolerance of violence, beliefs around caregiving and decision-making in relationships, role of service providers, etc.). The Plan will include engagement with beneficiaries as communicators of the project as well as media outlets, and students to monitor changes over the course of the project. Newsletters, web, radio/television and social media stories and annual reports as well as partner meetings and consultations will be organized to share progress and learnings from the project.

Project Reporting

Annual narrative reports and financial reports will be provided to KOICA using a standard Joint UN reporting format and based on the timeline agreed upon in the Programme Document. Project updates with KOICA and progress will be provided quarterly through the established Steering Committee, and as requested in the interim periods. In-person project briefings and visits to project sites will be arranged periodically through the project lifetime. Every six months, the project will present a Biannual Update summarizing the progress of the Project during the reporting period to the Steering Committee, which includes the KOICA country office in Timor-Leste. Annually, the project will convene annual review meetings to take stock of project progress, lessons learned and adjustments that need to be made.

Communication

The United Nations in Timor-Leste has an inter-agency Communications Group that is chaired by UNDP and the Office of the Resident Coordinator to ensure streamlined messaging and communications related to the UN’s work in Timor-Leste. Additionally, each UN agency has its own Communications Strategy at the global and/or national level which frame each agency’s communication efforts at the country level.

In this regard, the project communication objective will be to increase public visibility and awareness of the project, its activities and impact, with attention to the collaboration between KOICA-UN and Government of Timor-Leste. The purpose of the communication actions will also be to increase knowledge and advocate as needed on specific issues within the thematic area of ending gender-based violence, including challenging norms and stereotypes related to women’s mobility in public spaces, investing in comprehensive prevention of violence before it begins, expanding access to quality support services and reducing the risks of violence in the context of natural disasters. An important communication objective is to encourage sustainability of State allocations for the issue while also raising the donor’s visibility and recognition for allocating public resources to the project, as well as to highlight efforts and results of the project.

A project ceremony can be organized involving the Government-led NAP GBV Coordination Entity, as the project will support its work, or linked to the recently established EU-UN Spotlight Coordination Unit, to be discussed with relevant institutions under leadership of the Secretary of State for Equality and Inclusion. Within the project team, a percentage of communications’ staff time will be dedicated to the project visibility and communications-related activity. In this regard, all Participating UN Organizations, will endeavor to maximize opportunities that facilitate recognition of KOICA’s Contribution on the Project (e.g. through appropriate references in theme-related documentation, public information, and due notice to third sides). This will include references to KOICA at relevant events supported by the project as well as

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marking and having visible KOICA logos as provided by KOICA on all commodities and facilities supported by KOICA under the project.

The Project will be featured in agency-specific publications, UN and agency-specific Facebook Pages, Twitter, as well as through regular engagement with local media and foreign correspondents as relevant. Project messaging and materials will also be developed and branded for wide recognition, in line with UN Branding guidelines and in coordination with KOICA.

The overall objective of this Visibility and Public Relations Plan is to raise the visibility of the project "Preventing and Responding to Gender-Based Violence in Timor-Leste" in order to have a greater impact on national GBV legislation and policies as well as to prevent GBV in public and private spaces and empower survivors. Furthermore, this plan forecasts the use of communication material for the project's activities. The goal is to ensure that the function and the results of the project are well understood by each specific target audience for each specific activity.

The Visibility and Public Relations Plan will comprise the following elements:

- Strengthening ties with local media organizations and keeping them informed of the project's work. Building positive, favorable and accurate media coverage will positively shape the public perception towards the project.
- Enhancing the visibility of the project by communicating results, ongoing activities and messages on a consistent basis through media interviews, press releases, open-editorial articles, website stories, informative videos amongst others to be published on the website of relevant UN agencies (UN Women, UNFPA, UNDP and IOM) and their social media channels.
- Utilizing social media channels to further expand the project's outreach and to disseminate messages, results and activities.
- Designing specific communication package (including a brochure, posters, stickers and any other promotional material for creation of the visual identity).

Target Audiences

Primary:

- Government representatives, legislators, and policy-makers;
- Civil society organizations, including GBV service providers;
- Survivors of GBV;
- Persons with disabilities;
- Members of the LGBTI community;
- Community members vulnerable to disaster risks
- Health workers
- Justice sector personnel from public and private institutions;
- Traditional, community and religious leaders;
- Education institutions (pre-secondary, secondary in the targeted municipalities), universities in Dili and their respective communities (male/ female students, their families, school administration and teachers);
- Local private sector
- Journalists from mainstream media outlets and journalism students
- Athletes

Secondary:

- Social media influencers (e.g. bloggers, etc.);
- Public opinion formers and personalities (e.g. influential writers, public personalities);
- Regional and international organizations (related to sports or scouting associations).

Key Messages

Women and girls in Timor-Leste are empowered to enjoy their right to live free of sexual harassment and other forms of violence against women and girls in public and private spaces and can access quality essential services. The key messages disseminated through a number of channels will focus the following areas:
Prevent gender-based violence, in particular sexual violence in public spaces and domestic violence, before it happens or before it re-occurs.

Empower survivors of gender-based violence, especially women and girls (as the group most victimized), to recover and rebuild their lives through improved access to multi-sectoral services and safe public spaces.

Enforce implementation, monitoring and adequate resourcing of legislation and policies that address violence against women and girls (VAWG) in public spaces and in the context of disaster risk reduction and promote gender equality.

Communication Channels and tools

The messages will be disseminated through the following channels – the website of relevant UN agencies (UN Women, UNFPA, UNDP and IOM) and their social media channels including their Facebook pages and Twitter of United Nations Timor-Leste, in both Tetum and English versions.

All materials shared on social media (or otherwise) will acknowledge the contribution of KOICA, as appropriate and sensitive. Equally, these materials will be shared opportunely with Korean representation in Timor-Leste for dissemination on their own social media channels. Other stakeholders, including government counterparts, civil society organizations and educational partners will also receive the materials for further dissemination.

Events: This includes events of the project organized jointly or led by the Participating UN Organizations, such as conferences, workshops, celebration of key international days (Women’s Day, 16 Days of Activism against GBV, etc), Steering Committee meetings, knowledge sharing and exchange, field monitoring with (potential) donor presence etc. Each event will serve as a vehicle to communicate key messages and relevant project information and will be organized in consultation with KOICA.

Branding: All printed and non-printed material will acknowledge KOICA’s contribution as well as include logos of KOICA, Participating UN Organizations and relevant partners. The project will agree on a unified visual identity developed, along with specific banner, folder, notebook, and visual art designs.

Traditional media: The project will leverage the Participating UN Organizations’ existing engagement and relations with local media in Timor-Leste to reach national stakeholders and the general public. The messaging decisions will be made in consultation with KOICA.

Communication materials: Materials to be developed throughout the implementation of the project following the communications guidelines of the Participating UN Organizations and KOICA as available and finalized in joint consultations. This will seek to limit the environmental footprint of the materials produced and include, but are not limited to:


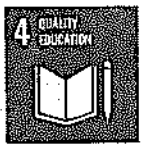



| Material | Description | Branding Requirement |
|---|--|--|
| Banners, roll-ups, backdrops, folders, notebooks, pens and other physical visual elements | <ul style="list-style-type: none"> Minimum visibility material | Logos: Relevant Participating UN Organizations, KOICA and partners as applicable |
| Programme brief | <ul style="list-style-type: none"> 2-pager Online dissemination Tetum and English | Logos: Relevant Participating UN Organizations, KOICA and partners as applicable |

| | | |
|--|--|--|
| | | Acknowledgment of donor's contribution and partners as applicable |
| Human-interest stories (disseminated via Participating UN Organizations' Facebook pages, websites and online newsletter, as well as UN Timor-Leste's Facebook and Twitter pages) | <ul style="list-style-type: none"> • 700-1000 words • Should include high quality pictures • Focus on impact and beneficiaries • Can include quotes by donor, Participating UN Organizations and beneficiaries/partners. • Tetum and English • The editorial formats will be in line with communications guideline of relevant Participating UN Organizations | <p>Relevant Participating UN Organizations and Donor's acknowledgement, as well as national partners as applicable</p> <p>Mention and hyperlink to the project webpage</p> |
| Interviews | <ul style="list-style-type: none"> • 500-800 words • Should include high quality pictures • Focus on partners or beneficiaries • The editorial formats will be in line with the communications guideline of relevant Participating UN Organizations • Tetum and English | <p>Donor's acknowledgement and partners as applicable.</p> <p>Mention and hyperlink to the project webpage</p> |
| Media advisories/ Press releases | <ul style="list-style-type: none"> • To be done exclusively when there is project-related news. • Should include quotes by donor and relevant Participating UN Organizations • Tetum and English | <p>Logos: Relevant Participating UN Organizations, KOICA and partners as applicable</p> <p>Acknowledgment of donor's contribution and partners as applicable</p> <p>Mention and hyperlink to the project webpage</p> |
| Social media posts | <p>Should tag:</p> <ul style="list-style-type: none"> • KOICA accounts • Korean representation in country • Participating UN Organizations' accounts both at country and regional level, if relevant • Relevant partners as applicable <p>Hashtags:</p> <ul style="list-style-type: none"> • Official Hashtags to be developed • Additional global or regional hashtags as appropriate: <p>A. Sustainable Development Agenda: #SDGs #GlobalGoals #SDG3 #SDG5 #SDG16 #Agenda2030 #sustainabledev #sustdev #LeaveNoOneBehind</p> <p>B. Women Empowerment, Gender Equality, #GenderEquality#Planet5050 #GenerationEquality</p> <p>C. Ending GBV: #orangetheworld #EndViolence</p> | <p>Logos: Relevant Participating UN Organizations, KOICA and partners as applicable</p> <p>Acknowledgment of donor's contribution and partners as applicable</p> <p>Links to resources available on the web</p> |

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| | | |
|---------------------------|---|--|
| <p>Advocacy campaigns</p> | <ul style="list-style-type: none"> Individual targeted media campaigns – encompassing messaging, social and multi-media, and text materials – to specifically support implementation of key outputs and promote key initiatives of the Programme | <p>Logos: Relevant Participating UN Organizations, KOICA and national partners as applicable</p> <p>Acknowledgment of donor's contribution and partners as applicable</p> <p>Links to resources available on the web</p> |
| <p>Videos/infographic</p> | <ul style="list-style-type: none"> Short videos (max 2 min) or infographics to capture events, activities, impact testimonials for social media dissemination. Tetum or English with subtitles | <p>Logos: Relevant Participating UN Organizations, KOICA and partners as applicable</p> <p>Acknowledgment of donor's contribution and partners as applicable</p> <p>Links to resources available on the web</p> |
| <p>Photography</p> | <ul style="list-style-type: none"> High quality, professionally taken photography from project activities, with focus on end-beneficiaries (preferably not from meetings and panels) | <p>Captions, credit</p> |

Link to SDGs:

| | |
|---|---|
|  | <p>Sustainable Development Goal 3: Ensure healthy lives and promote well-being for all at all ages.</p> |
|  | <p>Sustainable Development Goal 4: Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all.</p> |
|  | <p>Sustainable Development Goal 5: Achieve gender equality and empower all women and girls.</p> |
|  | <p>Sustainable Development Goal 11: Make cities and human settlements inclusive, safe, resilient and sustainable</p> |
|  | <p>Sustainable Development Goal 16: Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive at all levels.</p> |

Joint Marking of UN Advocacy Days:

A draft list of UN-recognized advocacy days to be leveraged as catalyzer of media/public attention and link any pro-activities as appropriate, linking to the various components of the KOICA-funded project:

- 8 March, International Women's Day
- 6 April, International Day of Sport for Development and Peace
- 7 April, World Health Day
- 17 May, International Day Against Homophobia, Transphobia and Biphobia
- 13 August, International Youth Day
- 11 October, International Day of the Girl Child
- 13 October, International Day for Disaster Risk Reduction
- 25 November, International Day for the Elimination of Violence against Women
- 3 December, International Day of Persons with Disabilities
- 25 November – 10 December, 16 Days of Activism
- 18 December -International Migrants Day

Communications Evaluation

The effectiveness of the communication interventions will be measured quarterly based on the following:

- Number of media placements: TV, Radio, Newspapers, media websites, blogs, etc.
- Number of IEC materials distributed
- Social Media Analytics: Facebook: Reach/Engagements; Twitter: Impressions/engagements

DRAFT Template (UN Timor-Leste) Preventing and Responding to GBV in Timor-Leste

DRAFT Key Messages (to be further elaborated and refined)

- *The root cause of gender-based violence is gender inequality and discrimination.*
Violence against women and girls is the most common form of gender-based violence and is related to women and girl's lack of power and control, as well as to the social norms that prescribe men and women's roles in society and condone abuse. Inequalities between men and women cut across public and private spheres of life, and restrict and limit women's freedoms, choices and opportunities.
- *Young women and adolescents are most commonly targeted or sexual harassment and other forms of sexual violence in public spaces in Dili.* A UN Women Scoping Study on Safe Cities found female and male participants identifying young women and adolescents as the most at-risk for sexual harassment in the streets and public transport of Dili⁷¹. Often, young women experience harassment on their way to or from school, or when collecting wood or water, even in urban spaces.
- *Women and girls who identify as lesbian, bisexual women and transgender men and women and girls with disabilities face greater risks of violence compared to women and girls who do not identify with these groups.*
- *Media has an important role to shape public opinion and actions on promoting safe public spaces and zero tolerance of gender-based violence.*
- *If you experience violence, you are not alone. Learn more about places you can access support at hamahon.tl.*
- *When someone in your life is the victim of physical, emotional or sexual abuse, it is important to be supportive and attentive to their needs. Listening respectfully is one way you can help.*
- *Violence against women and girls can be prevented, and it begins with RESPECT. #HahuHoRespeitu* It starts with RESPECT and using evidence-based approaches to address the underlying power imbalances and discrimination that blame women and girls for their experiences of violence.

⁷¹ UN Women. (2018). Safe Cities Scoping Study in Timor-Leste

Appendix 6: Supplementary Documents

1. Stakeholder Analysis



6.%20Stakeholder%20
0Analysis_UN_26Jul20

2. Beneficiary Analysis



.Annex-Beneficiary%2
0Analysis_UN_27July.d

3. Project Output Description



Annex3_PD_Appen
dix_OD_16Nov2020

4. Project Design Matrix



Annex4_ProjectDesi
gnMatrix-13Nov2021

5. Project Budget (Excel)



Annex5_KOICA_GBV
_TL_Budget Plan_UN

6. Reference for KOICA on Project Governance and Implementation



Annex6_Governanc
e in PD_KOICA_UNM

7. Narrative Reporting Templates



Annual Narrative: KOICA%20Annual%
20Report%20Format



Synthesis (Final Narrative Report): KOICA Synthesis
Report Format.docx

8. Financial Reporting Templates



Annual Financial Reporting Annual_UNJP%20Te
mplates_Together4E



Biannual Reporting Template: 1.%20KOICA%20Bia
nnual%20Update%2