UN Women Bangladesh: Combating Gender based Violence Project (CGBV)

Behaviour Change Communications (BCC) Strategy

September 2021
## Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Slides</th>
</tr>
</thead>
<tbody>
<tr>
<td>Background</td>
<td>3-9</td>
</tr>
<tr>
<td>About behaviour change (communications)</td>
<td>10-12</td>
</tr>
<tr>
<td>Target groups and behaviours for the CGBV project</td>
<td>13-18</td>
</tr>
<tr>
<td>Analysis of behavioural drivers</td>
<td>19-26</td>
</tr>
<tr>
<td>Analysis of current CGBV interventions to change behaviours</td>
<td>27-37</td>
</tr>
<tr>
<td>BCC materials to develop and disseminate</td>
<td>38-46</td>
</tr>
<tr>
<td>Measuring change</td>
<td>47-49</td>
</tr>
</tbody>
</table>
Background
The CGBV Programme—Introduction

A 4+ year project funded by Global Affairs Canada (GAC) to implement a multi-level, multi-sectoral strategy to combat GBV. Partner organisations are Christian Aid; Amrai Pari (WE Can Alliance) and BLAST. Overall, the project has a multi-level intervention strategy:

- **National level**: Evidence and knowledge generated from district and community levels will inform national policy and legal frameworks that would improve women’s GBV protection structures and provide resources for CGBV programs and support mechanisms.

- **District level**: The CGBV Project is implemented in three districts: Bogura, Comilla, and Patuakhali. At the district level, implementation partners have engaged civil society actors and local governance institutions in the adaptation and implementation in three educational institutions of the campus-based intervention based on the UN Women Whole of School Approach (Amrai Pari), and the workplace intervention (Christian Aid) in three factories, local government institutions and Deputy Commissioner Offices.

- **Community level**: The CGBV Project is implementing the SASA! Together model (Amrai Pari) to implement prevention strategies within local communities, and the Shomman O Shomotar Jeebon (Amrai Pari) model to address GBV within family units.

Given delays and interruptions due to the Covid pandemic, the CGBV project has been slightly restructured and the project timeframe is extended to early 2023.
The CGBV Prevention Framework: Strategies

National level

- #1: Evidence Building
- #2: Policy Advocacy and Constituency Building for VAW Prevention

District level:

- Strategy #3: Local Advocacy, Governance and Participation for VAW Prevention
- Strategy #4: Connecting Prevention with Integrated Service Provision through Inter-Agency Co-operation and Capacity Development
- Strategy #5: Addressing sexual harassment and other forms of sexual violence against women and girls in education institutions
- Strategy #6: Addressing sexual harassment in Workplaces

Community level

- Strategy #7: Community Mobilisation for Gender Transformative Change
- Strategy #8: Behaviour and social norm change towards gender equality and VAW prevention

Source: CGBV Prevention Framework
The CGBV Change Model

IF:
1) National and local laws and policies to prevent violence against women and girls at public spaces and workplaces are strengthened and implemented; 
2) Favourable social norms, attitudes and behaviours are promoted to prevent violence against women and promote women’s social and economic empowerment; and 
3) Policy and practices of civil society and other development actors are increasingly informed by knowledge on effective approaches to preventing violence against

THEN:
There will be a substantial reduction in violence against women and girls enabling women to enjoy more economic opportunities because violence is being prevented at home, public space and workplaces before it occurs.
CGBV Partnerships and Actors

NATIONAL

BLAST
- Coordination of CSD networks on Rape Law Reform and Sexual Management Act
- Develops and implements CGBV legislation advocacy plan

DWA/MOWCA
- Promote national ownership on what works to prevent Gender Based Violence
- Strengthen the narrative framework addressing GBV
- Ensure coordination at local government level on GBV prevention and response

Project Steering Committee
- Overall oversight of project delivery and monitoring of the progress toward results
- Approves annual work plans as well as recommending necessary adjustments to attain the anticipated outcomes
- Providing guidance for national advocacy

DISTRICT

Educational Institutions
- Develop and implement whole of school approach
- Support student led advocacy actions

DC offices and LSGs
- Capacity building and institutional change
- Integrate women’s safety in local planning
- Capacity development of local level NNFPC

Chamber of Commerce and Factories
- Adopt and implement gender transformative interventions
- Training for male and female workers in the factories

COMMUNITY

Community based approach
- Composed of ward / NGO reps, grassroots leaders and community leaders (male and female)
- Roll out community based actions through SAGAT/Gogether approach

Family prevention approach
- Support family prevention group to change their behavior, individually and together to reduce VAWG, improving the economic condition for promoting dignified lives of women and girls and prevent domestic violence
The CGBV Logic model

**OUTCOMES**

- TA to Sexual Harassment Prevention Committees in educational institutions to implement mechanisms to address harassment in partnership with students
- TA to national education authorities to develop systems to monitor implementation of anti-sexual harassment policies at universities and colleges
- TA to workplaces to (i) address and prevent sexual harassment in consultation with female and male workers; (ii) develop and implement Sector-wide Violence Prevention in Workplace policies
- TA to female employees to advocate for safe workplaces & mechanisms to prevent SH /GBV
- Campaigns led by female & male students in educational institutes to advocate to prevent SH
- Capacity of gender equality advocates enhanced to influence policies on preventing VAW and hold authorities accountable for implementation

**INTERMEDIATE OUTCOMES**

- Favourable social norms, attitudes and behaviours are promoted to prevent violence against women & enhance women’s economic empowerment.
- National and local laws and policies to prevent violence against women are strengthened, if needed, & implemented.
- Women’s voice and agency strengthened to influence policies and hold authorities accountable for implementation
- Public and private institutions have increased capacity to implement policies to prevent violence against women in Cumilla, Bogura & Patuakhali
- Women, men, girls & boys at community level are mobilized in favour of respectful relationships, gender equality and safe public spaces.
- Women, men, girls & boys are free of violence at home, at work and in public spaces.

**IMPACT**

- Women and girls including the most marginalized are free of violence at home, at work and in public spaces.
- Policy and programming are increasingly informed by expanded knowledge base on effective approaches to VAW prevention.
- Innovative initiatives developed and documented to create more gender equitable roles and relations inside the household.
- An expanded knowledge base of effective approaches to VAW prevention developed through national & local level research & analysis.
The CGBV Communication Strategy 2018-2022

Specific Objectives:
- Raise awareness on drivers, data, consequences and solutions related to violence against women;
- Challenge gender biases and stereotypes, promote positive masculinity and transform gender social norms,
- Share and disseminate promising practices on what works to prevent violence against women and CGBV project learnings

Planned interventions:
- Development and dissemination of Information, Education and Communication (IEC) material, as well as studies, research, briefs on VAW and gender equality;
- Advocacy and campaigns on VAW and gender equality (such as HeforShe, UNiTE, Generation Equality, 16 days of Activism etc.);
- Awareness raising activities and Behavior Change Communication interventions at family, community, university, workplace and public space level;
- Engagement through traditional and social media to disseminate gender and VAW related messaging and learnings;
- Organize national and district level dialogues and learning events coupled with online information sharing.

Awareness-raising and BCC activities outlined in Strategy
- Conduct trainings and adapt the UNiTE Change-makers toolkit module workshops in universities
- Partner with local organizations for BCC with communities and universities at district level
- Launch a stickers campaign on sexual harassment in public transport and propagate on social media at district level
- Develop posters and BCC material for workplace in the 3 districts
- Develop and disseminate video on male’s role in promoting gender equality and eliminating VAW
- Support students and teachers to develop a communication plan to disseminate zero tolerance to sexual harassment policy
- Disseminate messaging on role of men and boys in promoting gender equality and on young women innovators for social media
- Design and disseminate messaging to promote behavior change on social media
- Create and disseminate an avatar/super hero to promote male role models under the HeforShe banner
About Behaviour Change (Communications)
Key Steps for Behaviour Change Programming

1. Identify what behaviours you are trying to change and with which actors
2. Understand the main drivers of that behaviour(s) in a specific context
3. Design interventions to address main drivers of behaviour(s)
4. Work to reinforce and embed behaviour changes
5. Monitor if and how the interventions lead to particular behaviour changes

There are a variety of theories and approaches for behavioural change but all seek to understand processes for individuals to change behaviours. All approaches start with the question:

What are the interlocking factors that prevent or enable behaviour changes in a given context?
What is Behaviour Change Communication (BCC)?

Behaviour Change Communication (BCC) is the strategic use of communication process and strategies to promote positive behaviour(s) (changes), based on proven theories and research-based evidence and which are based on an understanding of the specific socio-cultural context and designed with the participation of target individuals, groups and communities.

There are various tools and guides which agree that effective behavioural change communications (BCC) requires a number of steps:

- Clarity about the specific behaviours of specific actors to change (What is the current behaviour? What is the future desired behaviour?)
- Use of primary and secondary research to understand the drivers of these behaviours (e.g. using COM-B model)
- Review other programme interventions that are working to address various behavioural drivers
- Development of carefully targeted messages and materials to complement these (e.g. reinforce messages, prompt reflection, motivate change, provide positive role models)
- Pilot these materials with the target groups and revise based on feedback
- Delivery of the refined messages through appropriate channels (e.g. radio, TV, billboards, print material, social media, group dialogues)
- Ongoing monitoring and evaluation of the delivery and impacts of the BCC activities
Target groups and behaviours for the CGBV project
### Who are the primary target groups and behaviours for the CGBV project?

<table>
<thead>
<tr>
<th>Target group</th>
<th>Current behaviour</th>
<th>Future desired behaviour</th>
</tr>
</thead>
</table>
| Male (potential) perpetrators of IPV in and outside of the home (dating relationships) | Some male partners perpetrate physical, sexual and emotional IPV against their female partners | Male & female partners engage in non-violent communication and discuss and take decisions together  
Male and female partners share labour inside and outside the home equitably  
Male partners ask for their female partner’s consent to engage in any sexual act. |
| Male (potential) perpetrators of physical and sexual harassment in workplaces, colleges and public space  
- Male factory supervisors  
- Male government workers  
- Male teachers  
- Male students  
- Men in public spaces | Some men perpetrate physical and sexual harassment against female colleagues, students and employees | Men speak to and about women colleagues and students with respectful, positive language.  
Men keep a respectful distance and behave kindly towards women in public spaces |
| Women survivors of VAW  
- Female partners  
- Women workers  
- Female students  
- Women in public spaces | Many women survivors do not report / speak out against the SH they experience  
Many women survivors do not access the VAW support services to meet their needs | Women speak up to negotiate consent with their partners  
Women speak out and report the SH/GBV they experience  
Women access the VAW support services they need for their wellbeing |
### Who are the **secondary** target groups and behaviours for the CGBV project?

<table>
<thead>
<tr>
<th>Target group</th>
<th>Current behaviour</th>
<th>Future desired behaviour</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Male bystanders (witnesses)</strong></td>
<td>Most Male bystanders do not intervene to challenge incidents of SH/GBV</td>
<td>Male bystanders support GBV/SH survivors and do not blame them.</td>
</tr>
<tr>
<td>- Male students</td>
<td>Most Male bystanders blame victims and do not offer support</td>
<td>Male bystanders speak out against GBV/SH and hold perpetrators to account</td>
</tr>
<tr>
<td>- Male teachers</td>
<td></td>
<td>Male bystanders intervene safely to challenge incidents of SH/GBV</td>
</tr>
<tr>
<td>- Male employees</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Male transport workers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Male peers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Male family members</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Female bystanders (witnesses)</strong></td>
<td>Most Female bystanders do not intervene to challenge incidents of SH/GBV</td>
<td>Female bystanders offer support (words, practical help, accompaniment) to GBV/SH survivors and do not blame them.</td>
</tr>
<tr>
<td>- Female students</td>
<td>Most Female bystanders blame victims and do not offer support</td>
<td>Female bystanders speak out against GBV/SH and work together to combat violence and hold perpetrators to account</td>
</tr>
<tr>
<td>- Female teachers</td>
<td></td>
<td>Female bystanders intervene safely to challenge incidents of SH/GBV</td>
</tr>
<tr>
<td>- Female employees</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Female transport workers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Female peers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Female family members</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Who are the secondary target groups and behaviours for the CGBV project?

<table>
<thead>
<tr>
<th>Target group</th>
<th>Current behaviour</th>
<th>Future desired behaviour</th>
</tr>
</thead>
</table>
| Community members     | Most Community members do not intervene to challenge incidents of SH/GBV  
Most Community members blame victims and do not offer support  
Most Community members reinforce gender inequalities through their actions and words (e.g. about women and men’s roles, rights, actions) | Community members intervene safely to challenge incidents of SH/GBV  
Community members support GBV/SH survivors and do not blame them.  
Community members model gender equitable behaviours in their actions and words |
| Community leaders     | Most Community leaders do not intervene to challenge incidents of SH/GBV  
Most Community leaders do not speak out to condemn VAW and in support of survivors | Community leaders speak out against GBV/SH and hold perpetrators to account  
Community leaders speak out in support of survivors and urge everyone to support them  
Community leaders model gender equitable behaviours in their own actions and words |
| Community institutions| Most Community institutions do not address cases of VAW or challenge VAW perpetrators.  
Most Community institutions do not provide support to survivors in line with their rights | Community institutions proactively address cases of VAW and hold perpetrators to account  
Community institutions provide survivor-centred informal services to survivors |
### Who are the secondary target groups and behaviours for the CGBV project?

<table>
<thead>
<tr>
<th>Target group</th>
<th>Current behaviour</th>
<th>Future desired behaviour</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>University / college leadership</strong></td>
<td>Most University managers do not speak out to condemn VAW and in support of survivors</td>
<td>University managers speak out against GBV/SH and in support of survivors</td>
</tr>
<tr>
<td></td>
<td>Most SHP Committees do not meet regularly and operate in line with the High Court Directive (HCD)</td>
<td>Universities develop anti-SH policies, code of conduct, complaints mechanism</td>
</tr>
<tr>
<td></td>
<td>Most SHP Committees do not respect survivor’s rights or hold perpetrators to account in line with the HCD</td>
<td>University managers provide support and resources for staff and students to take initiatives to address VAW - including training and campaigning</td>
</tr>
<tr>
<td></td>
<td></td>
<td>SHP Committees follow the HCD, address cases of VAW, respecting survivors rights and hold perpetrators to account</td>
</tr>
<tr>
<td><strong>Factory owners and managers</strong></td>
<td>Most Factory owners/managers do not speak out to condemn VAW and in support of survivors</td>
<td>Factory managers speak out against GBV/SH and in support of survivors</td>
</tr>
<tr>
<td></td>
<td>Most SHP Committees do not meet regularly and operate in line with the High Court Directive (HCD)</td>
<td>Factory managers develop anti-SH policies, code of conduct, complaints mechanism</td>
</tr>
<tr>
<td></td>
<td>Most SHP Committees do not respect survivor’s rights or hold perpetrators to account in line with the HCD</td>
<td>Factory managers resource gender transformative training for all employees (workers and managers) on resource gender transformative training for all employees on preventing and responding to VAW</td>
</tr>
<tr>
<td></td>
<td></td>
<td>SHP Committees follow the HCD, address cases of VAW, respecting survivors rights and hold perpetrators to account</td>
</tr>
<tr>
<td><strong>Transport - Labor and Owners Association</strong></td>
<td>Transport associations do not recognise that SH and GBV take place in public spaces and on transport</td>
<td>Transport associations acknowledge that SH and GBV occurs on public transport and commit to follow the HCD</td>
</tr>
<tr>
<td></td>
<td>Most Transport associations do not take action in response to VAW that occurs on public transport</td>
<td>Transport associations resource gender transformative training for all employees on preventing and responding to VAW</td>
</tr>
<tr>
<td></td>
<td>There is no SHP committee in the Transport Association</td>
<td></td>
</tr>
</tbody>
</table>
### Who are the secondary target groups and behaviours for the CGBV project?

<table>
<thead>
<tr>
<th>Target group</th>
<th>Current behaviour</th>
<th>Future desired behaviour</th>
</tr>
</thead>
</table>
| Deputy Commissioners Office (DCO)        | The DCO does not prioritise VAW prevention and response in its internal or external policies or resourcing  
Most SHP Committees do not meet regularly and operate in line with the High Court Directive (HCD)  
Most SHP Committees do not respect survivor’s rights or hold perpetrators to account in line with the HCD | The DCO develops anti-SH policies, a code of conduct and complaints mechanism for district offices  
The DCO ensures resource are budgeted and earmarked for VAW prevention and response - including staff training  
The DCO ensures that all department of the respective district have SHP and complaints mechanism for their offices  
SHP Committees follow the HCD, address cases of VAW, respecting survivors rights and holding perpetrators to account |
| Local Government Representative (LGR)   | The LGR does not prioritise VAW prevention and response in its internal or external policies or resourcing  
Most SHP Committees do not meet regularly and operate in line with the High Court Directive (HCD)  
Most SHP Committees do not respect survivor’s rights or hold perpetrators to account in line with the HCD | The LGR develops anti-SH policies, a code of conduct and complaints mechanism for local government  
The LGR ensures resource are budgeted and earmarked for VAW prevention and response - including staff training  
SHP Committees follow the HCD, address cases of VAW, respecting survivors rights and holding perpetrators to account |
| Chamber of Commerce and Industries (CCI) | CCI does not prioritise VAW prevention and response in its internal or external policies or resourcing  
Most SHP Committees do not meet regularly and operate in line with the High Court Directive (HCD)  
Most SHP Committees do not respect survivor’s rights or hold perpetrators to account in line with the HCD | CCI develops anti-SH policies, a code of conduct and complaints mechanism for its members  
CCI budgets resources for training of its own staff on VAW prevention and response  
CCI ensures that all department of the respective district have SHP and complaints mechanism for their offices  
SHP Committees follow the HCD, address cases of VAW, respecting survivors rights and holding perpetrators to account |
Analysis of behavioural drivers
Using the Behaviour Change Wheel and COM-B Model

**Capability:** psychological/physical ability to enact a behavior e.g. Capacity for comprehension, reasoning, necessary knowledge & skills

**Motivation:** Reflective and automatic mechanisms that activate/inhibit behaviour e.g. Goals, decision-making, habits, emotional & analytical decision-making; Distinguishes between reflective processes involving evaluations/plans and automatic processes involving emotions/impulses

**Opportunity:** Factors outside individual that make behavior possible (context); should be starting point of intervention design e.g. Physical and social environment and cultural milieu

*FIGURE 1: THE BEHAVIOUR CHANGE WHEEL*
## Behaviour Change Agenda: “Male partners perpetrate IPV”

### CURRENT STATE

#### Current behaviour
Men perpetrate IPV

- Emotional dysregulation / depression
- Poor relationship and communication skills
- Inadequate knowledge of harmful impacts of IPV
- Man’s income is inadequate for the household

#### BEHAVIOUR

##### DRIVERS: CAPABILITY
*Psychological or physical ability to enact change*

- Family and community members do not challenge violence
- Norms that tolerate and normalise IPV
- Norms supporting male control of women
- Economic or other stress in the household
- Women do not speak out or seek help for violence
- Service providers lack capacity and/or will to process and prosecute VAWG cases effectively

##### DRIVERS: OPPORTUNITY
*Physical + social environment that enables change*

- Experiencing or witnessing violence in childhood
- Man holds personal beliefs supporting gender inequality and IPV
- Man feels inadequate with respect to expectations of men
- Man believes he can perpetrate violence with impunity

### FUTURE STATE

#### Desired future behaviour
Male & female partners engage in non-violent communication and discuss and take decisions together; Male partners ask for their female partner’s consent to engage in any sexual act.

- Improved mental health and emotional regulation
- Improved relationship and communication skills
- Improved knowledge of harmful impacts of IPV on woman, man, children and household
- Household income improves

- Family and community members take action against violence + challenge perpetrators
- Social norms that support gender equality and non-violence
- Improved household livelihoods, wellbeing and security
- Women speak out and seek help from support services
- Service providers process and prosecute cases in line with survivor needs and the law

- (Children grow up in violence-free household)
- Men hold gender equitable views and believe IPV is wrong
- Men embrace less rigid ideas of successful manhood
- Man believes there will be negative social and/or legal sanctions for perpetrating violence
Behaviour Change Agenda: “Men perpetrate sexual harassment (SH)”

**CURRENT STATE**

**Current behaviour**
Men perpetrate physical and sexual harassment (SH) against female colleagues, students and employees

- Emotional dysregulation / depression
- Inadequate knowledge of harmful impacts of sexual harassment

**DRIVERS: CAPABILITY**
Psychological or physical ability to enact change

- Family and community members do not challenge violence and blame victims
- Norms that tolerate and normalise sexual harassment
  - Unequal power hierarchies with men in superior positions
- Women do not speak out or seek help for violence
- Public transport is overcrowded and SH is not challenged
- Public infrastructure is poorly designed for women’s safety (e.g. poor lighting, poorly located waterpoints and toilets)
- Service providers lack capacity and/or will to process and prosecute SH cases effectively

**DRIVERS: OPPORTUNITY**
Physical + social environment that enables change

- Man experiencing or witnessing violence in childhood
- Man has personal beliefs supporting gender inequality + SH
- Man's sexual entitlement / subscribes to machism
- Man believes he can perpetrate violence with impunity

**DRIVERS: MOTIVATION**
Reflective + automatic mechanisms that influence change

**FUTURE STATE**

**Desired future behaviour**
Men speak to and about women colleagues and students with respectful, positive language; Men keep a respectful distance and behaviour kindly towards women in public spaces

- Improved mental health and emotional regulation
- Improved knowledge of harmful impacts of sexual harassment on women and society

**FUTURE STATE**

- Improved mental health and emotional regulation
- Improved knowledge of harmful impacts of sexual harassment on women and society

**Desired future state**

- Family and community members take action against SH, challenge perpetrators and support victims
- Social norms that support gender equality and non-violence
- More women in senior positions in institutions
- Women speak out and seek help from support services
- Safer public transport with zero tolerance of SH
- Public infrastructure designed for women’s safety
- Service providers process and prosecute SH cases in line with survivor needs and the law
- Children grow up in violence-free household
- Men hold gender equitable views and believe SH is wrong
- Men embrace less rigid ideas of successful manhood
- Man believes there will be negative social and/or legal sanctions for perpetrating violence
Behaviours Change Agenda: Women survivors do not speak out, seek help or access support services

**CURRENT STATE**

**Current behaviour**
Women survivors of IPV and SH do not report / speak out against the SH they experience; Women survivors do not access the VAW support services to meet their needs

- Low self-esteem and self-confidence
- Women don’t know which services are available / how to access
- Women with mobility constraints unable to access support
- Women do not have the financial means to seek support
- Women lack economic means to support herself / her children
- Women lack examples of others who have spoken out
- Formal and informal service providers do not provide survivor-centred approaches
- Formal/statutory service providers are slow in managing cases
- Lack of temporary shelter for women and her children
- Norms that blame women for provoking violence
- Norms that tolerate and normalise VAW
- Norms that support gender inequality & male control of women
- Lack of support from family members, peers, co-workers etc
- Women hold personal beliefs supporting gender inequality + VAW
- Women fear stigma/backlash from community, families, university or employers if they speak out
- Women do not report for fear of putting themselves in more danger/at risk of further violence by perpetrators
- Belief that speaking out will not create change

**BEHAVIOUR**

**DRIVERS: CAPABILITY**
Psychological or physical ability to enact change

**DRIVERS: OPPORTUNITY**
Physical + social environment that enables change

**DRIVERS: MOTIVATION**
Reflective + automatic mechanisms that influence change

**FUTURE STATE**

**Desired future behaviour**
Women speak up to negotiate consent with their partners; Women survivors speak out, report the SH/GBV they experience; Women access the VAW support services they need for their wellbeing

- Women have high self-esteem and self-confidence
- Women know which services are available / how to access
- Women have the financial means to seek support
- Women have economic means support herself / her children
- Women have examples of others who have spoken out
- Women come together to mobilise against VAW
- Formal and informal service providers provide survivor-centred approaches
- Formal/statutory service providers manage cases efficiently
- Temporary shelter available for women and her children
- Social norms that support gender equality and non-violence
- Family members, peers and co-workers support women survivors to speak out, get help and access services
- Women hold gender equitable views + believe VAWG is wrong
- Women expect positive response from speaking out
- Women believe that speaking out will create change
- Women feel supported and protected from stigma/backlash
**Behaviour Change Agenda: Bystanders intervene to prevent and respond to GBV/SH**

### CURRENT STATE

**Current behaviour**
(Most) male and female bystanders do not intervene to challenge incidents of SH/GBV; (Most) Male and female bystanders blame GBV/SH survivors and do not offer support

- Inadequate knowledge about the harmful impacts of SH/GBV
- Lack of knowledge and skills on how to safely challenge SH/GBV
- Lack of knowledge of GBV services available to support survivors
- Lack of examples of people who speak out to challenge SH/GBV
- Lack of role models for gender equitable behaviours and non-violence
- Service providers do not process and prosecute SH/GBV cases effectively
- Bystanders hold personal beliefs supporting gender inequality
- Bystanders hold beliefs that SH/GBV is justified in certain cases
- Bystanders fear the consequences for themselves of challenging SH/GBV

### FUTURE STATE

**Desired future behaviour**
Bystanders offer support GBV/SH survivors and do not blame them; Bystanders speak out against GBV/SH and work together to combat violence and hold perpetrators to account; bystanders intervene safely to challenge incidents of SH/GBV

- Knowledge about the harmful impacts of SH/GBV
- Knowledge and skills on how to safely challenge SH/GBV
- Knowledge of GBV services available to support survivors
- Others in their environment who speak out to challenge SH/GBV
- Example of positive role models for gender equitable behaviours and non-violence
- Service providers process and prosecute SH/GBV cases effectively
- Bystanders hold gender equitable views + believe VAWG is wrong
- Bystanders believe they will be accepted or receive positive feedback for challenging SH/GBV

**BEHAVIOUR**

**DRIVERS: CAPABILITY**
Psychological or physical ability to enact change

**DRIVERS: OPPORTUNITY**
Physical + social environment that enables change

**DRIVERS: MOTIVATION**
Reflective + automatic mechanisms that influence change
**Current State**

**Current behaviour**
Persons in authority (leaders) do not speak out to condemn VAW and support of survivors; SHP Committees do not respect survivor’s rights or hold perpetrators to account in line with the High Court Directive (HCD)

**Drivers: Capability**
- Inadequate knowledge about the harmful impacts of SH/GBV
- No awareness of high court directive and how to implement it
- Lack of skills to handle cases in a survivor-centred way
- Lack of knowledge and skills on how to challenge SH/GBV and hold perpetrators to account
- Power hierarchies based on gender and class privilege them
- Leaders hold personal beliefs supporting gender inequality

**Drivers: Opportunity**
- Leaders hold beliefs that SH/GBV is justified in certain cases
- Leaders fear the consequences for themselves of challenging SH/GBV
- GBV/SH perpetrators are peers, colleagues and friends

**Drivers: Motivation**
- Leaders hold gender equitable views + believe VAWG is wrong
- Leaders believe they will be accepted or receive positive feedback for challenging SH/GBV

**Desired Future behaviour**
Persons in authority (leaders) speak out against GBV/SH and in support of survivors; they model gender equitable behaviours and non-violence; they provide support and resources for training and initiatives to address VAW; SHP Committees follow the HCD, address cases of VAW and respect survivor rights.

**Drivers: Capability**
- Knowledge about the harmful impacts of SH/GBV
- Aware of high court directive and how to implement it
- Knowledge and skills to handle cases in a survivor-centred way
- Leaders hold gender equitable views + believe VAWG is wrong

**Drivers: Opportunity**
- More equitable, less hierarchical environment
- Others in their environment who speak out to challenge SH/GBV and model gender equitable behaviours and non-violence

**Drivers: Motivation**
- Leaders believe they will be accepted or receive positive feedback for challenging SH/GBV
Behaviour Change Agenda: Institutions do not implement policies & actions to prevent and respond to GBV/SH

**CURRENT STATE**

**Current behaviour**
Institutions do not prioritise VAW prevention and response in internal or external policies or resourcing; SH prevention committees are not functioning in line with the High Court Directive (HCD) or women’s rights.

- Lack of policies on SH/GBV and how to deal with cases
- Lack of codes of conduct on expected behaviours
- Lack of safe reporting mechanisms for SH/GBV cases
- SHP Committees are inactive or dysfunctional

- Inadequate resources to address GBV/SH in institutions
- Survivors do not speak out to report cases of GBV/SH in institutions
- Service providers do not process and prosecute SH/GBV cases effectively

- Institutions are not held to account for implementing the HCD by government or industry bodies
- Members / workers/ student not demanding action on addressing SH/GBVs
- Institutions are concerned to protect their reputations

**BEHAVIOUR**

**DRIVERS: CAPABILITY**
Psychological or physical ability to enact change

**DRIVERS: OPPORTUNITY**
Physical + social environment that enables change

**DRIVERS: MOTIVATION**
Reflective + automatic mechanisms that influence change

**FUTURE STATE**

**Desired future behaviour**
Institutions develop anti-SH policies, codes of conduct, complaints mechanisms; institutions budget resources for VAW prevention and response - including staff training; SHP committees address cases of VAW, respect survivors rights and hold perpetrators to account

- Clear best practice policy on SH/GBV and how to deal with cases
- Codes of conduct on expected behaviours with positive incentives for students / workers etc
- Safe reporting mechanisms for SH/GBV cases
- SHP Committees are proactive and visible

- Resources allocated to address GBV/SH in institutions
- Survivors speak out to report cases and seek support
- Service providers process and prosecute SH/GBV cases effectively

- Government or industry bodies hold Institutions to account for implementing the HCD
- Members / workers/ student demand action on addressing SH/GBVs
- Institutions feel that their reputation depends on their record on gender equality and non-violence
Analysis of current CGBV interventions to change behaviours
## Amrai Pari Jot - SASA! Together

<table>
<thead>
<tr>
<th>Target group</th>
<th>Current Interventions</th>
<th>Behavioural drivers addressed (COM)</th>
</tr>
</thead>
</table>
| **Community Activists**      | 1. Identify, train and support community activists  
2. Community activists develop and implement local activism strategies - including power posters, community conversations, deeper dialogues - with their family, friends, neighbours and community members - to encourage critical reflection, support women experiencing violence and supporting couples trying to change | - Lack of understanding of GBV and harmful impacts  
- Personal beliefs supporting gender inequality and GBV  
- Poor relationship and communication skills  
- Lack of knowledge and skills on how to safely challenge GBV  
- Lack of knowledge of GBV services available to support survivors  
- Lack of examples of bystanders who have spoken out or challenged inappropriate behaviour  
- Lack of examples of women who have spoken out  
- Lack of role models for gender equitable behaviours and non-violence  
- Survivors do not believe that they will get support if they speak out  
- Survivors fear backlash or further violence from perpetrators if they speak out  
- Bystanders fear the consequences for themselves of challenging GBV  
- Norms that tolerate and normalise GBV  
- Norms that blame women for provoking violence  
- Norms that support gender inequality & male control of women |
| **Community Members** (male potential perpetrators, women survivors, bystanders) | 1. Community members engage in SASA Together activities (e.g. dialogues, events) involving self-reflection, critical thinking, discussion, skills building, and making positive changes |                                                                                                                                 |


<table>
<thead>
<tr>
<th>Target group</th>
<th>Current Interventions</th>
<th>Behavioural drivers addressed (COM)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Community Leaders</strong> (elected,</td>
<td>1. Identify, train and support community leaders</td>
<td>- Lack of understanding of GBV</td>
</tr>
<tr>
<td>traditional, religious, business,</td>
<td>2. Community leaders reinforce SASA Together! ideas and leverage their roles,</td>
<td>- Lack of understanding of harmful impacts of GBV</td>
</tr>
<tr>
<td>teachers)</td>
<td>platforms and influence to shape new norms - using leadership leaflets,</td>
<td>- Lack of knowledge and skills on how to safely challenge GBV</td>
</tr>
<tr>
<td></td>
<td>community talking points etc</td>
<td>- Lack of knowledge of GBV services available to support survivors</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Lack of role models for gender equitable behaviours and non-violence</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Personal beliefs supporting gender inequality and GBV</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Norms that tolerate and normalise GBV</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Norms that blame women for provoking violence</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Norms that support gender inequality &amp; male control of women</td>
</tr>
<tr>
<td><strong>Community Institutions</strong> (service</td>
<td>1. Identify, train and support institutional allies</td>
<td>- Inadequate resources to address GBV in institutions</td>
</tr>
<tr>
<td>providers, ministries, NGOs etc)</td>
<td>2. Institutional allies analyse and work to strengthen how their institutions</td>
<td>- Service providers do not process and prosecute GBV cases effectively</td>
</tr>
<tr>
<td></td>
<td>prevent and responds to VAW- using powerpoint presentations, institutional</td>
<td>- Norms that tolerate and normalise GBV</td>
</tr>
<tr>
<td></td>
<td>factsheets, employee conversations, analyse, document and shareback</td>
<td>- Norms that blame women for provoking violence</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Norms that support gender inequality &amp; male control of women</td>
</tr>
<tr>
<td>Target group</td>
<td>Current Interventions</td>
<td>Behavioural drivers addressed (COM)</td>
</tr>
<tr>
<td>-------------</td>
<td>----------------------</td>
<td>-----------------------------------</td>
</tr>
<tr>
<td><strong>Women partners</strong>&lt;br&gt;(potential victims, survivors)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>1. Social empowerment / gender transformative curriculum</strong>&lt;br&gt;- Critical reflection, communication, negotiation, and cooperation skills.&lt;br&gt;- Exploring expectations and realities of the ideal man and woman, and the implications they have&lt;br&gt;- Family relationships and marriage.&lt;br&gt;- Family and individual health through the lifecycle.&lt;br&gt;- Violence in relationships and sources of support and help&lt;br&gt;- Exploring new skills to change behaviours.</td>
<td>- Lack of understanding of women’s rights, empowerment and GBV&lt;br&gt;- Personal beliefs supporting gender inequality and GBV&lt;br&gt;- Poor relationship and communication skills&lt;br&gt;- Economic or other stress in the household&lt;br&gt;- Lack of examples of women who have spoken out&lt;br&gt;- Lack of knowledge of GBV services available to support survivors&lt;br&gt;- Survivors do not believe that they will get support if they speak out&lt;br&gt;- Survivors fear backlash or further violence from perpetrators if they speak out&lt;br&gt;- Norms that tolerate and normalise GBV&lt;br&gt;- Norms that support gender inequality &amp; male control of women&lt;br&gt;- Norms that blame women for provoking violence&lt;br&gt;- Norms that support gender inequality &amp; male control of women</td>
</tr>
<tr>
<td></td>
<td><strong>2. Economic empowerment / livelihoods strengthening curriculum</strong>&lt;br&gt;- Module 1: Household focus - Household inputs and income; Household budget and spending; savings&lt;br&gt;- Module 2: IGA focus - IGA opportunities, initiating IGAs, market assessment, planning and budgeting, costing and pricing, IGA plans, book-keeping &amp; marketing</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>3. IGA business training</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Male partners</strong>&lt;br&gt;(male potential perpetrators)</td>
<td><strong>1. Social empowerment curriculum</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>2. Economic empowerment curriculum</strong></td>
<td></td>
</tr>
</tbody>
</table>
| | | - Lack of understanding of GBV and harmful impacts<br>- Personal beliefs supporting gender inequality and GBV<br>- Poor relationship and communication skills<br>- Lack of role models for gender equitable behaviours and non-violence<br>- Economic or other stress in the household<br>- Norms that tolerate and normalise GBV<br>- Norms that blame women for provoking violence<br>- Norms that support gender inequality & male control of women
<table>
<thead>
<tr>
<th>Target group</th>
<th>Current Interventions</th>
<th>Behavioural drivers addressed (COM)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Extended family members</td>
<td>1. Social empowerment curriculum</td>
<td>- Lack of understanding of GBV and harmful impacts</td>
</tr>
<tr>
<td></td>
<td>2. Family income analysis</td>
<td>- Personal beliefs supporting gender inequality and GBV</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Poor relationship and communication skills</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Lack of role models for gender equitable behaviours and non-violence</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Lack of knowledge and skills on how to safely challenge GBV</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Lack of knowledge of GBV services available to support survivors</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Lack of role models for gender equitable behaviours and non-violence</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Personal beliefs supporting gender inequality and GBV</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Bystanders fear the consequences for themselves of challenging GBV</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Norms that tolerate and normalise GBV</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Norms that blame women for provoking violence</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Norms that support gender inequality &amp; male control of women</td>
</tr>
</tbody>
</table>
# Amrai Pari Jot - Educational Institutions based interventions (Whole-of-School Approach)

<table>
<thead>
<tr>
<th>Target group</th>
<th>Current Interventions</th>
<th>Behavioural drivers addressed (COM)</th>
</tr>
</thead>
</table>
| **Students** (male potential perpetrators, women survivors, bystanders) | 1. Changemakers toolkit / Capacity Building Training on SH and GBV  
- 3 days training + 1 day orientation for others  
- 30M and 30 F students per tertiary institution  
- Gender sensitivity, consent, sexual harassment, cyber violence, laws, safeguarding, referral, services, advocacy and leadership.  
2. Monthly session on GBV/SH issues - topic each month and action planning  
3. Organising non-traditional events and designing communications e.g. quiz, women’s sports competition, magazines, booklets posters | - Lack of understanding of GBV/SH and harmful impacts  
- Personal beliefs supporting gender inequality and GBV  
- Lack of knowledge and skills on how to safely challenge GBV  
- Lack of knowledge of GBV services available to support survivors  
- Lack of examples of bystanders who have spoken out or challenged inappropriate behaviour  
- Lack of examples of women who have spoken out  
- Lack of role models for gender equitable behaviours and non-violence  
- Survivors do not believe they will get support if they speak out  
- Survivors fear backlash or further violence from perpetrators if they speak out  
- Bystanders fear the consequences for themselves of challenging GBV/SH  
- Student and teachers not demanding action on addressing SH/GBV  
- Norms that tolerate and normalise GBV  
- Norms that blame women for provoking violence  
- Norms that support gender inequality & male sexual entitlement |
| **Teachers** (male potential perpetrators, women survivors, bystanders) | 1. Engage teachers in sexual harassment prevention (SHP) committees and implementing the anti-SH policy  
2. Engage teachers in conducting safety audit and studies on sexual harassment in their institutions  
3. Participation in non-traditional events and engaging with communications e.g. quiz, women’s sports competition, magazines, booklets, posters |
Amrai Pari Jot - Educational Institutions based interventions (Whole-of-School Approach)

<table>
<thead>
<tr>
<th>Target group</th>
<th>Current Interventions</th>
<th>Behavioural drivers addressed (COM)</th>
</tr>
</thead>
<tbody>
<tr>
<td>University leaders</td>
<td>1. Incentivise and support establishment of sexual harassment prevention (SHP) committees</td>
<td>- Lack of understanding of sexual harassment, GBV and consent</td>
</tr>
<tr>
<td>(leaders)</td>
<td>2. Incentivise and support development and implementation of the anti-SH policy</td>
<td>- Lack of knowledge of laws and policies which criminalise SH</td>
</tr>
<tr>
<td></td>
<td>3. Engage leaders in conducting safety audit and studies on sexual harassment in their institutions</td>
<td>- Lack of policies on SH/GBV and how to deal with cases</td>
</tr>
<tr>
<td></td>
<td>4. Participation in non-traditional events and engaging with communications e.g. quiz, women’s sports competition, magazines, booklets, posters</td>
<td>- Lack of codes of conduct on expected behaviours</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- SHP Committees are inactive or dysfunctional</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Inadequate resources to address GBV/SH in institutions</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Institutions are not held to account for implementing the HCD by government or industry bodies</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Institutions are concerned to protect their reputations</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Lack of knowledge and skills on how to investigate SH and GBV cases following survivor centric approach</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Personal beliefs supporting gender inequality and GBV</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Norms that tolerate and normalise sexual harassment (SH)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Norms that blame women for provoking violence</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Norms that support gender inequality &amp; male control of women</td>
</tr>
</tbody>
</table>
## Christian Aid Bangladesh - Factory-based interventions

<table>
<thead>
<tr>
<th>Target group</th>
<th>Current Interventions</th>
<th>Behavioural drivers addressed (COM)</th>
</tr>
</thead>
</table>
| **Female and male factory workers**<br>(male potential perpetrators, women potential victims, survivors, bystanders)) | 1. Training for the factory workers on gender equality module and leadership  
- 8 sessions x 2-3 hours, 22 people (7 male, 15 female workers) x 3 factories (out of 250-400 workers)<br>- Content: gender roles/discrimination; definition of SH and abuse; Understanding power hierarchies and gender inequality; High Court Directive; SH prevention committee<br>- Visuals / posters to explain incidents<br>- Invited police family unit + police helpline | - Lack of understanding of sexual harassment, GBV and consent<br>- Lack of understanding of harmful impacts of GBV/SH<br>- Lack of knowledge and skills on how to safely challenge SH/GBV<br>- Lack of knowledge of GBV/SH services available to support survivors<br>- Lack of knowledge of domestic laws and policies which criminalise SH<br>- Lack of examples of bystanders who have spoken out or challenged inappropriate behaviour<br>- Lack of examples of women who have spoken out<br>- Lack of role models for gender equitable behaviours and non-violence<br>- Personal beliefs supporting gender inequality and GBV<br>- Male perpetrators believe they can perpetuate SH with impunity<br>- Survivors do not speak out to report cases of GBV/SH in institutions<br>- Survivors do not believe that they will get support if they speak out<br>- Survivors fear backlash from employers or further violence from perpetrators if they speak out<br>- Bystanders fear the consequences for themselves of challenging SH/GBV<br>- Workers not demanding action on addressing SH/GBV<br>- Norms that tolerate and normalise sexual harassment (SH)<br>- Norms that blame women for provoking violence<br>- Norms that support gender inequality & male sexual entitlement |
| | 2. Quarterly awareness-raising sessions in factory (e.g. some of those trained do sessions with more workers); gender roles/inequality, what is SH, where to report? | |
| | 3. Organise events to stimulate women’s leadership and solidarity e.g. football match on IWD, football club | |
## Christian Aid Bangladesh - Factory-based interventions

<table>
<thead>
<tr>
<th>Target group</th>
<th>Current Interventions</th>
<th>Behavioural drivers addressed (COM)</th>
</tr>
</thead>
</table>
| Factory managers and supervisors (male) (male potential perpetrators, bystanders, leaders) | 1. Initial dialogue with male managers - to select 22 workers + supported safety audit in the factory  
2. Support to review and develop policies to prevent workplace SH and gender equality (e.g. code of conduct, HR policy, SH prevention policy)  
3. Training for the male management  
   - Gender transformative session / gender equality  
   - What is GBV / SH?  
   - Laws, high court directive  
4. Support to set up SHP committee (5 members - outsiders and managers) and develop protocols, how to intervene, support and refer | - Lack of understanding of sexual harassment, GBV and consent  
- Lack of understanding of harmful impacts of GBV/SH  
- Lack of knowledge and skills on how to safely challenge SH/GBV  
- Lack of knowledge of GBV/SH services available to support survivors  
- Lack of knowledge of domestic laws and policies which criminalise SH  
- Lack of role models for gender equitable behaviours and non-violence  
- Lack of examples of management taking proactive measure to prevent GBV/SH  
- Lack of knowledge and skills on how to investigate SH and GBV cases following survivor centric approach  
- Lack of examples of people who speak out to challenge SH/GBV  
- Ignorance of GBV/SH related complaints  
- Personal beliefs supporting gender inequality and GBV  
- Institutions are not held to account for implementing the HCD by government or industry bodies  
- Norms that tolerate and normalise sexual harassment (SH)  
- Norms that blame women for provoking violence  
- Norms that support gender inequality & male control of women |
## Christian Aid Bangladesh - Transport sector interventions

<table>
<thead>
<tr>
<th>Target group</th>
<th>Current Interventions</th>
<th>Behavioural drivers addressed (COM)</th>
</tr>
</thead>
</table>
| Transport workers and associations (male potential perpetrators, women survivors, bystanders) | 1. Awareness raising sessions with the CNG, Bus drivers, helpers and chain masters on women’s safety in public transport and public spaces (bus stand, CNG stand).  
2. Visible materials / stickers on vehicles and campaign  
3. Celebration of international days (16 Days of Activism)  
4. Orientation/refresher sessions on a regular basis  
5. Women’s safety audit in public space and recommendations  
6. System of penalties in case of any occurrence proved | - Lack of understanding of sexual harassment, GBV and consent  
- Lack of understanding of harmful impacts of GBV/SH  
- Lack of knowledge and skills on how to safely challenge SH/GBV  
- Lack of knowledge of domestic laws and policies which criminalise SH  
- Lack of knowledge and skills on how to investigate SH and GBV cases following survivor centric approach  
- Lack of examples of people who speak out to challenge SH/GBV  
- Ignorance of GBV/SH in the transport sector  
- Personal beliefs supporting gender inequality and GBV  
- Norms that tolerate and normalise sexual harassment (SH)  
- Norms that blame women for provoking violence  
- Norms that support gender inequality & male control of women |
## Christian Aid Bangladesh - Other institutional interventions

<table>
<thead>
<tr>
<th>Target group</th>
<th>Current Interventions</th>
<th>Behavioural drivers addressed (COM)</th>
</tr>
</thead>
</table>
| **Deputy Commissioner’s Office (DCO)** | 1. Training on GBV / SH to create awareness on workplace based SH and capacity of the employees on gender responsive budgeting to prevent GBV.  
2. National and International Days celebrations  
3. Support to develop key policy on prevention of sexual harassment (SH) in the workplace according to HCD  
4. Strengthening the role of Nari Nirjaton Protirodh Committee to prevent GBV  
5. Strengthening referral mechanism | - Lack of implementation domestic laws and policies which criminalise SH  
- Lack of knowledge and skills on how to investigate SH and GBV cases  
- Personal beliefs supporting gender inequality and GBV  
- Norms that tolerate and normalise sexual harassment (SH)  
- Norms that blame women for provoking violence  
- Inadequate resources to address GBV in institutions  
- Institutions are not held to account for implementing the HCD by government or industry bodies |
| **Local Government Representatives** | 1. Training on GBV / SH to create awareness on workplace based SH  
2. National and International Days celebrations  
3. Dialogue /meeting on gender responsive budgeting  
4. Strengthening the role of Nari Nirjaton Protirodh Committee to prevent GBV  
5. Strengthening referral mechanism | - Lack of understanding of sexual harassment, GBV and consent  
- Lack of knowledge of domestic laws and policies which criminalise SH  
- Lack of knowledge and skills on how to investigate SH and GBV cases  
- Personal beliefs supporting gender inequality and GBV  
- Norms that tolerate and normalise sexual harassment (SH)  
- Norms that blame women for provoking violence  
- Inadequate resources to address GBV in institutions  
- Institutions are not held to account for implementing the HCD by government or industry bodies |
| **Chamber of Commerce and Industries (CCI)** | 1. Training on GBV / SH to advocate for SH free workplace.  
2. National and International Days celebrations  
3. Support to develop key policy on prevention of sexual harassment (SH) in the workplace according to HCD | - Lack of understanding of sexual harassment, GBV and consent  
- Lack of knowledge of domestic laws and policies which criminalise SH  
- Lack of knowledge and skills on how to investigate SH and GBV cases  
- Personal beliefs supporting gender inequality and GBV  
- Norms that tolerate and normalise sexual harassment (SH)  
- Norms that blame women for provoking violence  
- Inadequate resources to address GBV in institutions  
- Institutions are not held to account for implementing the HCD by government or industry bodies |
BCC materials to develop and disseminate
Best practice: How we will design and implement BCC strategies

- Ensure each BCC material is developed to target a specific behaviour(s) of a specific actor(s)
- Ensure it is developed based on understanding the drivers of that behaviour and is designed to influence one or more of those drivers
- Use visuals with culturally appropriate images, symbols and colours wherever possible (even for literate)
- Keep the messaging clear and simple - don’t mix too many messages or types of content.
- Use positive messages wherever possible to reinforce positive behaviour rather than just condemn negative behaviour e.g. ‘Couples with violence-free relationships are happier, healthier and wealthier’
- Ensure there is at least one clear call to action i.e. what are you asking people to do (differently)?
- Combine use of BCC materials with other strategies for maximum impact e.g. BCC materials can be used to reinforce or amplify messages, prompt reflection, motivate change, provide positive role models
- (Preferably) co-develop these materials with the target groups OR pilot with the target groups and revise based on feedback
- Deliver the refined messages via channels which are easily accessible to your target group(s) (e.g. radio, TV, billboards, print material, social media, group dialogues)
### Community level - Couples/families: Which BCC materials will be used and why? (Amrai Pari - Linked to SASA! Together and SOSJ)

<table>
<thead>
<tr>
<th>Material/activity</th>
<th>Target group(s)</th>
<th>Behavioural drivers addressed</th>
<th>Messages</th>
<th>Distribution</th>
</tr>
</thead>
</table>
| “Power” Poster (SASA!) | - Potential male perpetrators  
- Women (survivors)  
- Bystanders | - Attitudes supporting gender inequality and VAW  
- Poor relationship skills  
- Norms that tolerate gender inequality and IPV | - You can use your power positively  
- Men and women can help each other  
- Practical examples of how (Drawings and few words) | Community Activists  
Placed in community centres, mosques, clinics etc |
| Community Poster “Healthy non-violent relationships” | - Potential male perpetrators  
- Women (survivors)  
- Bystanders | - Poor relationship skills  
- Poor mental health and emotional regulation  
- Alcohol and substance abuse | - Characteristics of healthy relationships (e.g. sharing domestic roles, good communication, time out)  
- Results of health relationships (happier adults and children, improve livelihoods, better mental health) (Drawings and few words) | Community Activists + SSOJ facilitators  
Placed in community centres, mosques, clinics etc |
| Community Poster “Self and collective care” | - Potential male perpetrators  
- Women (survivors)  
- Bystanders | - Poor mental health  
- Alcohol and substance abuse  
- Survivor belief that others will not help if she speaks out | - ‘Do’s’ for looking after yourself and managing your emotions  
- ‘Do’s for looking after others (Drawings and few words) | Community Activists  
Placed in community centres, mosques, clinics etc |
| Video shorts - change stories of couples and families | - Potential male perpetrators  
- Women (survivors)  
- Bystanders | - Lack of understanding of harmful effects of GBV/SH  
- Poor relationship skills  
- Norms that tolerate gender inequality and IPV  
- Family and community members do not challenge violence | - Testimony from perpetrators, survivors and family members about past violence, how change happened and the benefits for their relationships | Video showings in community  
Social media  
Community radio (audio version) |
### Community level - Survivors + Bystanders: Which BCC materials will be used and why? (Amrai Pari - Linked to SASA! Together and SSOJ)

<table>
<thead>
<tr>
<th>Material/activity</th>
<th>Target group(s)</th>
<th>Behavioural drivers addressed</th>
<th>Messages</th>
<th>Distribution</th>
</tr>
</thead>
</table>
| **Community Poster**  
“Stopping domestic violence: What you can do” | - Potential male perpetrators  
- Women (survivors)  
- Bystanders | - Lack of knowledge and skills on how to intervene safely to stop domestic violence  
- Lack of knowledge and skills on how to help a survivor  
- Survivor belief that others will not help if she speaks out  
- Man believes he can perpetrate violence with impunity | - How to intervene safely to stop domestic violence - do’s and don’t’s from friends and family  
- How to help a survivor of domestic violence - do’s and don’t’s from friends and family (Pictures and words) | Community Activists  
Placed in community centres, mosques, clinics etc |
| **Community Poster**  
“How to get help for domestic violence” | - Women (survivors)  
- Bystanders | - Lack of knowledge and skills on how to help a survivor  
- Lack of understanding of GBV/SH services available  
- Survivor belief that others will not help if she speaks out | - Description, location and contact for each service provider  
- Detail of referral process | Community Activists  
Placed in community centres, mosques, clinics etc |
| **Radio dialogues with service providers** | - Potential male perpetrators  
- Women (survivors)  
- Bystanders | - Lack of knowledge and skills on how to help a survivor  
- Lack of understanding of GBV/SH services available  
- Survivor belief that others will not help if she speaks out  
- Man believes he can perpetrate violence with impunity  
- Service providers have the capacity and will to support | - Conversations with key service providers about what help they can offer and how to access it | Community radio |
<table>
<thead>
<tr>
<th>Material/activity</th>
<th>Target group(s)</th>
<th>Behavioural drivers addressed</th>
<th>Messages</th>
<th>Distribution</th>
</tr>
</thead>
</table>
| Poster “What I am doing to stop gender-based violence” | - Potential male perpetrators  
- Women (survivors)  
- Bystanders | - Lack of positive role models  
- Attitudes and norms supporting gender equality and tolerating GBV  
- Lack of knowledge and skills on how to intervene safely to stop domestic violence  
- Lack of knowledge and skills on how to help a survivor  
- Survivor belief that others will not help if she speaks out  
- Man believes he can perpetrate violence with impunity | - List of commitments of what will do to prevent and respond to GBV  
- Space to insert picture of person  
- Space for them to insert a personal message (Pictures and words) | Placed in leader offices, mosques, clinics etc |
| Radio dialogues with community leaders | - Potential male perpetrators  
- Women (survivors)  
- Bystanders | - Attitudes and norms supporting gender equality and tolerating GBV  
- Lack of knowledge and skills on how to help a survivor  
- Lack of understanding of GBV/SV services available  
- Survivor belief that others will not help if she speaks out  
- Man believes he can perpetrate violence with impunity  
- Service providers have the capacity and will to support | - Conversations with community leaders about GBV in their community and discussing what they are doing and others are doing to prevent and respond to it | Community radio |
<table>
<thead>
<tr>
<th>Material/activity</th>
<th>Target group(s)</th>
<th>Behavioural drivers addressed</th>
<th>Messages</th>
<th>Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Leaflet / poster and online post ‘What is sexual harassment?’</td>
<td>Students (potential perpetrators, survivors, bystanders) - Teachers - College leaders</td>
<td>- Lack of understanding of sexual harassment and consent - Lack of understanding of harmful effects of GHV/SH</td>
<td>- Simple definitions of what is sexual harassment - Harmful impacts of SH for women, men and others</td>
<td>College mail, buildings Social media posts</td>
</tr>
<tr>
<td>Booklet / online post ‘How to get help for sexual harassment’</td>
<td>Students (women survivors, bystanders) - Teachers - College leaders</td>
<td>- Lack of understanding of GBV/SH services available - Survivor belief that others will not help if she speaks out</td>
<td>- Description, location and contact for each service provider - Detail of reporting mechanism + referral process - Role of SHP committee</td>
<td>College mail, buildings Social media posts</td>
</tr>
<tr>
<td>Poster / online post ‘Responding to sexual harassment: What you can do’</td>
<td>Students (women survivors, bystanders) - Teachers - College leaders</td>
<td>- Lack of knowledge and skills on how to intervene safely to stop sexual harassment - Lack of knowledge and skills on how to help a survivor</td>
<td>- How to intervene safely to stop SH - do’s and don’t’s - How to help a survivor - do’s and don’t’s</td>
<td>College mail, buildings Social media posts</td>
</tr>
<tr>
<td>Video testimonies - experiences of victims and perpetrators</td>
<td>Students (women survivors, bystanders) - Teachers - College leaders</td>
<td>- Lack of understanding of SH and consent - Lack of understanding of harmful effects of GBV/SH - Norms that normalise sexual harassment - Men’s sexual entitlement - Women do not speak out about violence</td>
<td>- Testimony from reformed perpetrators and survivors about past violence, how change happened and the benefits for them and their peers</td>
<td>Campus viewing Social media posts</td>
</tr>
</tbody>
</table>
### Factories: Which BCC materials will be used and why?
(Christian Aid - linked to work in factories)

<table>
<thead>
<tr>
<th>Material/activity</th>
<th>Target group(s)</th>
<th>Behavioural drivers addressed</th>
<th>Messages</th>
<th>Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Poster “A safe work environment for all’</strong></td>
<td>- Factory workers&lt;br&gt;- Factory managers&lt;br&gt;(potential perpetrators, survivors, bystanders)</td>
<td>- Gender inequitable attitudes&lt;br&gt;- Norms that support gender inequality and Sexual harassment&lt;br&gt;- Lack of examples of positive behaviour</td>
<td>- What are the features of a safe work environment?&lt;br&gt;- What can you do to achieve this?&lt;br&gt;(link to training)</td>
<td>Posters in factory, common room, toilets etc</td>
</tr>
<tr>
<td><strong>Leaflet and poster ‘What is sexual harassment?’</strong></td>
<td>- Factory workers&lt;br&gt;- Factory managers&lt;br&gt;(potential perpetrators, survivors, bystanders)</td>
<td>- Lack of understanding of sexual harassment and consent&lt;br&gt;- Lack of understanding of harmful effects of GBV/SH</td>
<td>- Simple definitions of what is sexual harassment (link to training)&lt;br&gt;- Harmful impacts of SH for women, men and others (link to training)</td>
<td>Leaflet for each worker, posters in factory, common room, toilets etc</td>
</tr>
<tr>
<td><strong>Booklet and poster, Stickers ‘How to get help for sexual harassment’</strong></td>
<td>- Factory workers&lt;br&gt;- Factory managers&lt;br&gt;(potential perpetrators, survivors, bystanders)</td>
<td>- Lack of understanding of GBV/SH services available&lt;br&gt;- Survivor belief that others will not help if she speaks out</td>
<td>- Description, location and contact for each service provider (link to training)&lt;br&gt;- Detail of reporting mechanism + referral process&lt;br&gt;- Role of SHP committee</td>
<td>Leaflet for each worker, posters in factory, common room, toilets etc</td>
</tr>
<tr>
<td><strong>Booklet and Poster ‘Responding to sexual harassment: What you can do’</strong></td>
<td>- Factory workers&lt;br&gt;- Factory managers&lt;br&gt;(potential perpetrators, survivors, bystanders)</td>
<td>- Lack of knowledge and skills on how to intervene safely to stop SH&lt;br&gt;- Lack of knowledge and skills on how to help a survivor&lt;br&gt;- Lack of examples of people who speak out to challenge SH/GBV</td>
<td>- How to intervene safely to stop SH - do’s and don’t’s&lt;br&gt;- How to help a survivor - do’s and don’t’s&lt;br&gt;(link to training)</td>
<td>Christian Aid</td>
</tr>
</tbody>
</table>
Transport sector: Which BCC materials will be used and why? (Christian Aid - linked to work with transport associations)

<table>
<thead>
<tr>
<th>Material/activity</th>
<th>Target group(s)</th>
<th>Behavioural drivers addressed</th>
<th>Messages</th>
<th>Distribution</th>
</tr>
</thead>
</table>
| Sticker “Travel Safely” | -Transport workers (potential perpetrators, bystanders)  
- Transport associations  
- Passenger (potential victims, bystanders) | - Gender inequitable attitudes  
- Norms that tolerate sexual harassment  
- Lack of examples of positive behaviour  
- Lack of understanding of GBV/SH services available | -Visuals + words of expected behaviour of driver and passenger (no smoking, no alcohol, no touchings, no sexual comments)  
- Helpline number | Stickers on minibuses, auto-rickshaws etc |
| Poster “Safe transport for all” | -Transport workers (potential perpetrators, bystanders)  
- Transport associations  
- Passenger (potential victims, bystanders) | - Lack of understanding of SH  
- Gender inequitable attitudes  
- Norms that tolerate sexual harassment  
- Lack of examples of positive behaviour | -What are the features of safe transport?  
- What can you do to achieve this?  
- Helpline number | Posters in transport hubs, pick up points, billboards (inside vehicles if possible) |
| Poster ‘What is sexual harassment and how you can stop it?’ | -Transport workers (potential perpetrators, bystanders)  
- Transport associations  
- Passenger (potential victims, bystanders) | -Lack of understanding of SH  
- Lack of knowledge /skills to intervene safely  
- Survivor belief that others will not help if she speaks out  
- Lack of understanding of GBV/SH services available | - Simple definitions of what is sexual harassment  
-- How to intervene safely to stop SH - do’s and don’ts  
- Helpline number | Posters in transport hubs, pick up points, billboards (inside vehicles if possible) |
| ‘Travel safe’ App (only if budget and time) | -Transport workers (potential perpetrators, bystanders)  
- Passenger (potential victims, bystanders) | - Perpetration of sexual harassment  
- Lack of understanding of SH  
- Lack of examples of positive behaviour | -Rate your experience of travel (add vehicle number + answer 3 questions)  
- Reward for driver of the month + certificate and incentive scheme | Smartphone app, website and screen at transport hub? |
## Other institutions: Which BCC materials will be used and why?
(Christian Aid - linked to work with DCO, local government representatives, CoC)

<table>
<thead>
<tr>
<th>Material/activity</th>
<th>Target group(s)</th>
<th>Behavioural drivers addressed</th>
<th>Messages</th>
<th>Distribution</th>
</tr>
</thead>
</table>
| Poster “A safe work environment for all” | - Employees  
- Managers  
(potential perpetrators, victims, bystanders, leaders) | - Gender inequitable attitudes and practices  
- Norms that support gender inequality and Sexual harassment  
- Lack of examples of positive behaviour | - What are the features of a safe work environment?  
- Your rights and responsibilities  
- What can you do to achieve this? | Office walls, on intranet / website |
| Leaflet + poster / online post “Preventing GBV and SH: Your responsibilities” | - Employees  
- Managers  
(potential perpetrators, victims, bystanders, leaders) | - Lack of understanding of SH/GBV  
- Lack of understanding of harmful effects of GHV/SH  
- Lack of knowledge and skills on how to intervene safely to stop sexual harassment  
- Lack of knowledge /skills how to help a survivor | - Simple definitions of what is SH  
- Harmful impacts of SH for women, men and others  
- Key messages of anti-SH policy  
- Role of SHP committee (as per HCD)  
- Reporting and referral mechanisms | Office walls, leaflet to all employees, in common spaces on intranet / website |
| Booklet / online post ‘How to get help for sexual harassment’ | - Employees  
- Managers  
(potential perpetrators, victims, bystanders, leaders) | - Lack of understanding of GBV/SH services available  
- Survivor belief that others will not help if she speaks out | - Reporting and referral mechanisms  
- Description, location and contact for each service provider  
- Role of SHP committee | Leaflet to all employees, in common spaces, on intranet / website |
| Poster / online post ‘Responding to sexual harassment: What you can do’ | - Employees  
- Managers  
(potential perpetrators, victims, bystanders, leaders) | - Lack of knowledge and skills on how to intervene safely to stop sexual harassment  
- Lack of knowledge /skills how to help a survivor  
- Lack of understanding of GBV/SH services available | - How to intervene safely to stop SH - do’s and don’ts  
- How to help a survivor - do’s and don’ts  
- Reporting and referral mechanisms | Office walls, leaflet to all employees, on intranet / website |
| Poster ‘14 Gender Markers to measure GRB’ | - Employees  
- Managers | - Lack of implementation of laws and policies on gender equality and GBV  
- Gender inequitable attitudes and practices | - How to implement gender-responsive budgeting (GRB) | Office walls, on intranet / website |
Measuring change
Why it is important to measure the impacts of BCC activities

<table>
<thead>
<tr>
<th>Monitoring BCC Activities</th>
<th>Evaluating BCC Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Purpose:</strong></td>
<td><strong>Purpose:</strong></td>
</tr>
<tr>
<td>• To inform</td>
<td>• To demonstrate longer-term impact of project-including BCC activities</td>
</tr>
<tr>
<td>• To correct, re-orient or re-design</td>
<td>• To determine level of change (may include adoption or discontinuation of attitudes or behaviours) as a result of BCC activities</td>
</tr>
<tr>
<td>• To readjust communication activities or messages</td>
<td></td>
</tr>
<tr>
<td><strong>Answers these questions, among others:</strong></td>
<td><strong>Answers these questions among others:</strong></td>
</tr>
<tr>
<td>• What is happening to the target audience?</td>
<td>• What happened as a result of the BCC activities?</td>
</tr>
<tr>
<td>• Why is it happening?</td>
<td>• Which change(s) have taken place?</td>
</tr>
<tr>
<td>• What early signs of progress can we detect?</td>
<td>• Which portion of the target audience adopted the new behaviour and/or discontinued and/or expanded a currently practiced one?</td>
</tr>
<tr>
<td>• What are the short-term effects (in target audience group etc.)?</td>
<td>• Why did they adopt it or continue/expand it and how did they influence others to practice it?</td>
</tr>
<tr>
<td>• To what extent are planned activities actually being realized?</td>
<td>• What was the impact on the target audience?</td>
</tr>
</tbody>
</table>
# How will the impact of BCC interventions be measured?

<table>
<thead>
<tr>
<th>Material/activity</th>
<th>Data to be collected</th>
<th>Why?</th>
<th>How?</th>
<th>Who?</th>
</tr>
</thead>
</table>
| Posters              | -Estimated reach
- Understanding of key messages
- Retention of key messages
- How influenced knowledge, attitudes, behaviours | • How many people were exposed to the messages?  
• Did people understand and retain messages?  
• Did people relate to/agree with the message?  
• Did the message influence their knowledge, attitudes or behaviours? How? Why? | -Integrate questions into programme baseline / endline surveys
- Focus groups with target populations | Implementing partner / evaluation partner |
| Leaflets             |                                                                                     |                                                                      | -Integrate questions into programme baseline / endline surveys
- Focus groups with target populations | |
| Video testimonies    |                                                                                     |                                                                      | -Attendance at community viewings, online views etc
- Before/after surveys of audiences
- Follow up focus groups with audiences | |
| Radio shows          |                                                                                     |                                                                      | -Radio audience estimate, online listens etc
- Before/after surveys of listening groups
- Follow up focus groups with listening groups | |
| Social media posts   |                                                                                     |                                                                      | - Social media views and likes
- Analysis of content of comments
- Short online survey inviting feedback | |
UN Women Bangladesh: Combating Gender based Violence Programme (CGBV)

For more information please contact: Shrabana Datta, UN Women Bangladesh shrabana.datta@unwomen.org