Violence against Women

Assessing the Situation in Jordan
Acknowledgment

This assessment was made possible because of the interest and commitment of many national and international partners in Jordan who provided information, insight and comments on the situation of violence against women in Jordan.

Special thanks to Ms. Nada Darwazeh, the consultant who conducted this assessment, for her professionalism, dedication and commitment to the advancement of the situation of women in Jordan.

The assessment was made possible with financial support from the UNFPA Jordan Country office who coordinated the process on behalf of and in coordination with UN agencies in Jordan.

It is our hope that it will be one of the important resources used to develop joint programmes between the Jordanian governmental, non-governmental, and UN agencies in Jordan within the framework of the United Nations Development Assistance Framework for the years (2008-2012) to combat violence against women and ensure the right of every woman in Jordan to be treated with dignity and respect.

Luc Stevens
UN Resident Coordinator
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<tr>
<td>CEDAW</td>
<td>Convention against the Elimination of all Forms of Discrimination against Women</td>
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<tr>
<td>CRC</td>
<td>Child’s Rights Convention</td>
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<td>DOS</td>
<td>Department of Statistics</td>
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<td>FDA</td>
<td>Family Development Association</td>
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<td>FPD</td>
<td>Family Protection Department</td>
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<td>GBV</td>
<td>Gender Based Violence</td>
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<td>GDP</td>
<td>Gross Domestic Product</td>
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<td>HCY</td>
<td>Higher Council for Youth</td>
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<td>HPC</td>
<td>Higher Population Council</td>
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<td>JNCW</td>
<td>Jordanian National Commission for Women</td>
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<td>JRF</td>
<td>Jordan River Foundation</td>
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<td>JWU</td>
<td>Jordanian Women’s Union</td>
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<td>MDGs</td>
<td>Millennium Development Goals</td>
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<td>MoARA</td>
<td>Ministry of Awqaf and Religious Affairs</td>
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<td>MoE</td>
<td>Ministry of Education</td>
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<td>MoH</td>
<td>Ministry of Health</td>
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<td>MoJ</td>
<td>Ministry of Justice</td>
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<td>MoL</td>
<td>Ministry of Labour</td>
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<td>MoSD</td>
<td>Ministry of Social Development</td>
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<td>NCFA</td>
<td>National Council for Family Affairs</td>
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<td>NCHR</td>
<td>National Centre for Human Rights</td>
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<td>NGO</td>
<td>Non-governmental Organisation</td>
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<td>PSP</td>
<td>Private Sector Programme for Women’s Health</td>
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<td>SIGI</td>
<td>Sister Is Global Institute</td>
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<td>SGBV</td>
<td>Sexual and Gender Based Violence</td>
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<td>TOT</td>
<td>Training of Trainers</td>
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<td>UN</td>
<td>United Nations</td>
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<td>UNDAF</td>
<td>United Nations Development Assistance Framework</td>
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<td>UNDAW</td>
<td>United Nations Division for the Advancement of Women</td>
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<td>UNDP</td>
<td>United Nations Development Programme</td>
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<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
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<td>UNFPA</td>
<td>United Nations Population Fund</td>
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<td>UNHCR</td>
<td>United Nations Higher Commissioner for Refugees</td>
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<td>UNRWA</td>
<td>United Nation Relief and Works Agency</td>
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<td>UNIFEM</td>
<td>United Nations Fund for Women</td>
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<td>VAW</td>
<td>Violence against Women</td>
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<td>WHO</td>
<td>World Health Organisation</td>
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<td>ZENID</td>
<td>Queen Zein El-Sharaf Institute for Development</td>
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I. Introduction

Following the launching of the Secretary General in-depth study on all forms of violence against women in October 2006, the General Assembly called on United Nations entities to enhance coordination and intensify efforts to address violence against women for a more systematic, comprehensive and sustained approach to the issue.

The Task Force on violence against women working under the Inter-Agency Network on Women and Gender Equality took the leading role in responding the General Assembly’s resolution and was mandated with the overall goal: “enhanced support to national level efforts by the entities of the United Nations system, within their mandate, to all eliminate forms of violence against women.”

The work plan of the Task Force identifies four objectives and several key outputs to achieve the above stated goal including a joint programming on violence against women in 10 pilot countries (Burkina Faso, Chile, Fiji, Jamaica, Jordan, Kyrgyzstan, Paraguay, Philippines, Rwanda and Yemen).

The two co-convenors of the Task force (UNFPA and UNDAW) will closely manage the joint programming process, which consists of three phases: assessment and planning; implementation, monitoring and evaluation; and development of a manual/ guidelines for joint programming.

This report contributes to the joint programming of Jordan as one of the selected pilot countries. It presents the findings of Jordan country assessment in relation to active stakeholders working in the field of Violence against Women (VAW); and summarises the results of the gap analysis in legislation and policies, services provided and capacities available at the national level to combat violence against women.

1.1 Country Profile

The Hashemite Kingdom of Jordan is a constitutional monarchy with a parliamentary system consisting of an elected lower house and an upper house of senates appointed by the King. The Kingdom is situated in one of the world’s most turbulent regions, which has had a direct influence on its population growth and limited resources. Although Jordan is considered as a

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1 Task Force on violence against women (2007) work plan of the Task Force on violence against women: Proposal for implementation
2 Views expressed in this report are those of the author/consultant and do not necessarily reflect the views of the UN system in Jordan.
middle income country (with a GDP of 12.7 US$ billion for the year 2005 and GDP per capita of 2,345 (ppp US$)), regional conflicts, limited natural resources and scarce water supplies are continuous challenges to Jordan’s socio-economic development. The country is urbanised, whereby 72% of the population are concentrated in three main governorates: Amman, Irbid and Zarqa. Administratively, the government, which is appointed by the King, is responsible for

the provision of services. The map hereunder demonstrates the administrative boundaries of the governorates.

Population growth rate remains high at 2.3% and the recent conflicts in the region have led to sudden increases in population to reach in 2006 a total of 5.6 million, of which youth

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constitutes more than 37%\(^6\). Many observers estimate that the population will reach 8 million in 2020 if the current growth rate is maintained\(^7\).

Since its establishment Jordan has showed high commitment towards developing its human resources. Moreover, the political leadership’s commitment to the advancement of women has managed to introduce several positive measures in different fields. In fact, as key indicators in health and education reveal, Jordan has managed to attain its Millennium Development Goals (MDGs) in these two areas. In specific, Jordan has managed to close the gender gaps in education, whereby female enrolment rates in the educational cycle, including at the university level, matches those of males. Illiteracy rate among women has declined from previous years to reach 13.7% compared to 5.1% among males. Similarly, female to male ratio in basic, secondary and university education is 97.1, 102.2 and 102.4 respectively\(^8\).

In the health sector, improved access to health has ensured the delivery of health services to all segments of the Jordanian society. This has had a positive impact on the decline of infant mortality rate to reach 22 children in 1000 in 2002 compared to 28 in 1000 in 1999\(^9\). Improvement in maternal mortality rates have also been noted by recent estimates to reach 61 per 100000\(^10\) in the year 2006. This is consistent with the increased coverage of pre and post-natal care as well as the fact that 100% of births are attended by skilled health personnel\(^11\).

In spite of Jordan’s continuous commitment to human rights and gender equity through ratifying conventions, providing equal opportunities and developing programmes pertaining to women’s advancement, gender gaps still exist in several socio-economic sectors most prominently in the economic, political and administrative fields. Women’s low participation in formal economic activities is one major example that reflects structural and social barriers. Recent statistics in 2006 indicate that merely 11.9% of the Jordanian female population over 15 years are economically active compared to 63.1% of males. More importantly, the unemployment rate among females over 15 years reached 25% compared to 11.9% of males for the same year\(^12\).

With more than 120 women’s NGOs, Jordan has over the past sixty years developed a strong women’s civil society network that has been active in many spheres ranging from humanitarian assistance to economic development. Nevertheless, many challenges still persist towards achieving women’s empowerment and gender equity. This is particularly true given the general economic pressures including budgetary cuts for essential services and high poverty incidence of 14.2%\(^13\) as well as the cultural barriers within the society, which hinder existing efforts to women’s equality. Moreover, as many researchers argue, the conservative patriarchal structure of the society, the gender stereotypes and the centrality of the family within the Jordanian

\(^{6}\) Department of Statistics (2007) Jordan in Figures for 2006  
\(^{8}\) Department of Statistics (2007) Jordan in Figures for 2006  
\(^{9}\) JNCW (2005) Third and Fourth CEDAW Periodical Report  
\(^{10}\) WHO (unpublished 2007) Country Cooperation Strategy for WHO and Jordan  
\(^{12}\) Department of Statistics (2007) Jordan in Figures for 2006  
\(^{13}\) WHO (unpublished 2007) Country Cooperation Strategy for WHO and Jordan
context are also key elements that hinder women’s advancement and access to resources and opportunities.

1.2 Definitions of concepts related to violence against women

Various terms are used by different organisations to refer to issues of violence including: Gender Based Violence (GBV), Domestic Violence, VAW and Child abuse. The term varies in accordance to the mandate of organisations and services provided in the cycle of prevention and protection against violence. Following are the various terms used in this report and their respective definitions.

Gender Based Violence is: “violence that is directed at a person on the basis of gender or sex. It includes acts that inflict physical, mental or sexual harm or suffering, threats of such acts, coercion and other deprivations of liberty.”

Violence against Women refers to “any act of gender-based violence that results in, or is likely to result in, physical, sexual and psychological harm to women and girls, whether occurring in private or in public.” Within this definition other harmful acts are included such as early marriage, honour crimes and deprivation of inheritance rights.

Domestic Violence is defined in the national literature as: “Various behavioural patterns from a member of the family against other members, which directly or indirectly inflict psychological, physical, verbal or sexual harm.” However, the term limits actions of violence against women to those occurring within the private sphere and does not address VAW within the public sphere.

Sexual violence, including exploitation and abuse, refers to any act, attempt or threat of a sexual nature that results, or is likely to result, in physical, psychological and emotional harm.

Sexual and Gender-Based Violence (SGBV) is used by UNHCR to “recognise that, although the majority of victims/ survivors are women and children, boys and men are also targets of sexual and gender based violence”.

II. Methodology

This assessment is based on data collected through a desk review of existing research, studies and publications as well as an in-depth interview with key stakeholders. The reference list at the end of this report provides a list of documents consulted and examined during the course of the assessment. Annex 2 presents the interview guidelines used and annex 3 provides a list of organisations interviewed.

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14 Recommendation 19 of the CEDAW Committee
15 The Declaration on the Elimination of Violence against Women (1993)
16 Mainly publications and studies made by NCFA, most prominently “The National Framework for Family Protection”
17 UNHCR (2003) Sexual and Gender-Based Violence against Refugees, Returnees and Internally Displaced Persons
Furthermore, the analysis presented in the report relies on discussions with the members of the Family Protection Team held at the National Council for Family Affairs (NCFA) to discuss relevant themes. The thematic analysis under heading III of this report looks closely at existing initiatives addressing VAW (including in the areas of law, service provision, prevention, and data collection), the stakeholders involved and their respective capacities and strengths, the existing data on violence against women, the gaps and challenges to addressing violence against women and the priorities for action.

Hence, information available in this report is based on existing literature as well as interviews made with stakeholders involved in providing awareness, prevention, intervention and protection as well as rehabilitation services to the victims of violence. The report follows the outline developed by the Task Force on violence against women of the Inter-Agency Network on Women and Gender.

**III. Violence against Women**

**3.1 Forms and Incidences of Gender-Based Violence**

There are no available national figures on the incidences of GBV in Jordan. Nevertheless, the recent available studies and publications provide some basic indicators on the prevalence of and forms of violence in Jordan utilising data made available by the organisations providing services to victims of violence.

In general, research on violence related issues has been ongoing since 1998 with an increase during the past few years, which have witnessed the publication of various studies on the prevalence of violence in Jordan. Nevertheless, the data available to monitor the scale and magnitude remains scattered and uncertain. Moreover, the focus of the various studies is on domestic violence rather than GBV. To that extent, the available data on domestic violence:

1. Rely on the records of the organisations that provide services for the victims. Since each organisation uses its own system for registering the cases, there is no common reference system to avoid registering the same victim more than once.

2. Is based on interviewing representative samples from the society to examine certain issues relevant to domestic violence, such as attitudes, general public awareness on the subject or on services providers.

NCFA study entitled “Domestic Violence in Jordan: Knowledge, Attitudes and Reality” published in 2008 is based on a research conducted in cooperation with WHO in 2005. The study seeks to define the term “domestic violence” within the Jordanian society and identify the level of awareness on the subject among the various segments of the society. One of the main conclusions of the study referred to a common perception among the interviewees that domestic violence is mainly related to physical violence.

In addition, the study inferred that one third of the sample population have indicated that they have heard or seen cases of domestic violence. Moreover, nearly 11% of the sample indicated
that they themselves have physically abused their sons, daughters, wife and mother in the 12 months preceding the study. Further questioning within the aforementioned study, indicates that 60% and 40% of the interviewees have verbally and physically abused a member of their family.

According to the CEDAW third and fourth periodical report, 56% of the sexual abuse victims that were registered at the Family Protection Department between the years 2001 – 2004 were females. The percentage is slightly less for physical abuse whereby 50% of the victims were females for the same period. However, it is worth noting that while physical abuse cases registered at Family Protection Department were 100% caused by a family member compared to 7.8% of sexual abuse cases that were caused by a member of the family.

Available literature on domestic violence in Jordan indicates that women are more likely to be subjected to violence than male members of the family. Similarly, studies available provide evidence that forms of violence include a wide range of physical, sexual, psychological, verbal, economic and social abuse, “honour crimes”, early marriages and deprivation of right to inheritance are also practiced in Jordan.

Information on other forms of violence outside the family is rather scarce and studies on violence against women within the workplace and in the public sphere, i.e. sexual harassment and assault and/ or sex trafficking are not available. In fact, as the stakeholders’ analysis section of this report shows that most of the active organisations are working mainly on domestic violence except for the National Centre for Human Rights (NCHR), which considers complaints of migrant labour.

It is expected that the results of the Demographic and Health Survey that was conducted in 2007 would positively contribute to a better and comprehensive understanding of the magnitude and forms of VAW. However, the scope and results of this survey were not available to use during the preparation of this assessment.

Finally, the following are some of the numbers presented in the study entitled “Violence against Women in Jordan” (NCFA, USAID 2008):

- The Family Protection Department’s data for 2006 reported 1764 cases of violence (430 violence against females);
- The Ministry of Social Development data for 2006 reported 1200 cases of violence against women;
- In 2006, the National Centre for Forensic Medicine reported 120 sexual assaults on women including 18 cases classified as honour crimes;
- The Jordanian Women’s Union (JWU) data for 1999 – 2006 registered 775 cases that utilised the shelter services; and
- Sisterhood is Global Institute (SIGI) data for 2007 reported 225 cases for women who requested their legal services.

There are no specific data from the United Nations Higher Commissioner for Refugees (UNHCR) on the prevalence of Sexual and Gender-Based Violence (SGBV) within the refugee community. Nevertheless, according to the interview held with UNHCR, a high number of SGBV incidences are reported through individual interviews with the refugees. This has led, as discussed later in
the report, to UNHCR agreement with national institutes and Non Governmental Organisations (NGOs) to provide the required services for the victims of violence.

On the other hand, a relatively recent study entitled “Educated Housewives: Living Conditions among Palestinian Refugee Women”, which was published by Fafo in 2004 reported that 13.7% of Palestinian Refugee Women were “ever beaten by current husband”. However, the study does not track other cases of domestic violence by other members of the family within the various stages of the female life cycle.

3.2 Existing Policies and Laws on Violence against Women

3.2.1 Commitments to International Human Rights Instruments

Jordan has ratified the major human rights instruments. Most relevant are the Child’s Right Convention (CRC) and the Convention on the Elimination of all Forms of Discrimination against Women (CEDAW), which were ratified in 1991 and 1992 respectively and were published in the official gazette in 2007. Yet, Jordan has made reservations on articles 9 (2), 15 (4) and 16 (1) of the CEDAW convention as well as articles 14, 20 and 21 of CRC. Moreover, Jordan has not ratified the optional protocol to the CEDAW convention that relates to individual complaints. Similarly, Jordan is not a party to the 1951 Convention or the 1967 Protocol on the Status of Refugees; however, UNHCR bases its operations on a Memorandum of Understanding with the Government of Jordan.

The combined third and fourth report on the implementation of CEDAW was presented and discussed with the CEDAW committee in August 2007. The Concluding comments of the committee emphasised the need to consolidate efforts to address issues of VAW in accordance with the committee’s general recommendation 19. Some of these recommendations include urging the government to:

- Enact legislation on violence against women;
- Implement educational and awareness raising measures aimed at law enforcement officials, the judiciary, health care providers, social workers, community leaders and the general public;
- Amend applicable provisions of the penal code to ensure that perpetrators of “honour” crimes do not benefit from a reduction of penalty under article 340;
- Ensure that “honour” crimes are treated as seriously as other violent crimes in regard to investigation and prosecution, and that effective prevention efforts are put in place;
- Establish a sufficient number of accessible shelters and crisis centres for females victims of violence in both urban and rural areas; and
- To replace the practice of protective custody with other measures that ensure the protection of women without jeopardising their liberty, and to accordingly transfer all women currently held in protective custody to the Family Reconciliation Centre or other safe shelters.

The third periodical report on CRC was discussed with the Committee on the Rights of the Child in September 2006. The concluding comments of the committee appreciated the various measures adopted to fulfil Jordan’s commitment to realising children’s rights. However, the committee also called for:
- Prohibiting by law all forms of corporal punishment at home as well as in all other settings, including private and public institutions, and effectively enforce this ban;
- Conducting a comprehensive study to assess the nature and extent of corporal punishment in different settings;
- Sensitising and educating parents, guardians and professionals working with and for children by carrying out public education campaigns about the harmful impact of violent forms of “discipline” and promote positive, non-violent, participatory methods of child rearing;
- Developing a comprehensive national strategy, as part of the National Plan of Action for Children, to prevent and respond to domestic violence, ill-treatment of children and child abuse, and further adopt adequate measures and policies to contribute to changing attitudes; and
- Developing an effective system for the identification, reporting and managing child abuse and ill-treatment cases and strengthen the Family Protection Department to ensure that effective procedures and mechanisms are in place to receive, monitor and investigate complaints, including intervention where necessary, and to investigate and prosecute cases of domestic violence and ill-treatment and abuse of children, including sexual abuse within the family, within a child-sensitive judicial procedure and apply sanctions to perpetrators, with due regard given to protecting the right and privacy of the child.

### 3.2.2 National Policies on Family Protection

Since the late 90s, the efforts of various governmental organisations and NGOs have led to the development of a National Framework for Family Protection in 2005 under the umbrella of NCFA. The National Framework aims to develop a flexible and efficient working approach for various involved stakeholders to ensure efficient responsiveness to the needs of victims of violence.

The framework identifies the various organisations involved in the process of prevention and protection in relation to domestic violence, their roles and responsibilities. The framework provided the bases for an extensive work with three line ministries: Ministry of Education, Ministry of Health and the Ministry of Social Development as well as the judicial council to identify the existing procedures and to develop new procedures and protocols for protecting victims of violence.

The National Strategy for Family Protection (2005 – 2009) was guided by the National Framework and has the following objectives:
1. Identify policies, programmes and action plans relevant to family protection;
2. Enhance the awareness on domestic violence and its impact on the physical and psychological health;
3. Build the institutional capacities and develop human resources of active members in the field of protection;
4. Enhance cooperation and partnership between governmental and non-governmental organisations working on violence issues;
5. Enhance judicial responses to issues of violence through legal amendments and policy formulation;
6. Enhance the quality of research and studies on violence; and
7. Raise funds to implement activities and procedures stemming from the National Strategy.
The National Strategy includes six components (prevention, protection, developing human resources and institutional capacities, legislation and policies, networking and collaboration, and research and studies.) It provides an in-depth action plan for the implementation of the six components, which identifies the implementation and cooperating agencies, timeframe, indicators and estimated cost. Furthermore, the National Strategy clearly identifies NCFA as the managing entity for following up and monitoring the implementation of the action plan and its impact on the Jordanian society.

Although the implementation of the National Strategy has not been officially assessed and documented, the available information through this assessment indicates that some of the action plans and outputs were successfully achieved. Most notably, the Law on Protection from Domestic Violence number (6) for the year 2008, the development of protocols and procedures for family protection and the establishment of special departments on domestic violence in the Ministry of Health, Ministry of Education, Ministry of Justice and the Ministry of Social Development.

Provisions of the Law describe the steps needed to protect family member from domestic violence, which include basic simple measures such as family reconciliation to more rigorous actions such as restriction orders on the abuser. It also expands the role of the Ministry of Social Development and the Family Protection Department in establishing “family reconciliation committees” that are entrusted in supporting the family the reconciliation process among the family members. The full text of the law is available in Arabic with this report.

Article 8 of the law obliges citizens as well as public and private sector service providers to report on witnessed or suspected cases of family violence or child abuse. It places special attention on nurses and doctors at primary healthcare centres and hospitals, teachers in nurseries and schools, as well as social and community development centres. To ensure such cases are reported without fear or reluctance, Article 10 of the law guarantees their protection, as they are not required to identify themselves unless required to give testimony in court.

Furthermore, the law authorises the police to go the location where the abuse is taking place, or suspected of taking place, and take the necessary measures to protect the victim or other family members from the perpetrator. In some cases, the perpetrator can be made to sign a pledge promising not to harm the family, but in more serious scenarios where the threat is believed to be greater, police are authorised to remove the perpetrator from the location for a minimum of 48 hours if no other guarantees can be found to protect the family. The law also authorises police with the right to detain perpetrators of domestic violence for 24 hours to protect the victim. In addition, the court has the right to ban perpetrators from approaching "safe houses" where victims are sheltered in order to guarantee their safety.

Although the law earmarks national efforts to address domestic violence, certain gaps still persist in its text. These are summarised\(^{18}\) as:

- The law considers cases that are only within the domestic sphere emphasising “the family household” as a condition to consider the case as domestic violence;

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\(^{18}\) Information provided here are based on an interview with Lawyer Reem Abu Hassan
The law oblige service providers to inform on abuse cases leaving no room for the victim’s willingness and consent;

- The law only deals with cases of misdemeanour but not felonies.
- The law identifies the committees for family reconciliation with high responsibilities but with no particular code of practice and leave the issue open to the members of the committee; and
- The role of the prosecutor is not clearly identified.

Another regulation was passed in relation to the shelter services provided for the victims of domestic violence. The Family Shelter Regulation (statutory instrument No. 48 of 2004), which discusses shelter services for victims of domestic violence and aims to protect and rehabilitate battered women. The regulations (Arabic version available with this report) designate the Ministry of Social Affairs as the main governmental entity that supervises and regulates shelter services provision. It also calls for establishing a central committee that supervises shelters, which is headed by the Secretary General of the Ministry of Social Development and has representatives from other ministries as well as NCFA and representatives from other Shelters in their personal capacity. The role of the central committee expands to include policy formulation of shelters and their working mechanisms.

Although, the regulation states that the Minister can approve the establishment of shelters by civil society organisations, the only official registered shelter is the one supervised by the Ministry of Social and Development and is discussed in-depth in the section on stakeholders.

### 3.3 The Main Stakeholders and Their Interventions

This section presents the key findings on organisations working on VAW. Annex 1 to this report provides a brief summary on the national organisations and their main area of work in the field of VAW. The presentation hereunder provides information on national organisations along with other organisations working in Jordan including the United Nations Agencies and Other International/ regional organisations.

#### 3.3.1 United Nation Agencies

UN agencies that have particular programme directly linked to VAW are UNICEF, UNIFEM, UNFPA, UNRWA, WHO and UNHCR. The magnitude, form of support, partner organisations and allocated budget for programmes implemented by these UN organisations varies in line with the organisation’s mandate and programme cycle.

**UNIFEM** involvement in VAW programmes started as early as 1998 through supporting JWU media campaign on VAW. In 2002, UNIFEM provided technical support for Family Protection Department to train female officers on how to deal with and handle female victims of violence as well as incorporating concepts relating to the human rights of women in a training manual prepared to train trainers.

In recent years, UNIFEM started paying particular attention to migrant labour working in Jordanian households. The programme entailed activities at a policy level to ensure the protection of migrant labour from abuse (verbal, physical and sexual abuse as well as depriving them from their rights and access to wage, passports, etc). Also, the programme entails
supporting the Ministry of Labour (MoL) to establish and maintain a hotline that receives migrant labour complaints; training the MoL staff on how to handle such cases and promoting a code of ethics for agencies that contract migrant labour.

Finally, as the head of the UN agencies’ trust fund on VAW, UNIFEM is currently managing a regional programme that supports organisations in their programmes to combat VAW.

**UNICEF** enjoys a strong partnership with many governmental and non-governmental agencies in the area of protection. UNICEF supports the expansion of the Family Protection department services to reach all governorates and helps in building their institutional capacities to address VAW and the girl child. Furthermore, UNICEF has a long standing relationship with JNCW and has supported their efforts for amending legislations to reduce VAW and their awareness building efforts on the impact of VAW on the wellbeing of women, family and children. Moreover, UNICEF has been a partner with NCFA at the policy level to advocate for legislative change and institutional building in support of the national efforts to combat VAW. Currently, UNICEF is cooperating with Ministry of Health to support Family protection committees within 10 public sector hospitals and 2 primary health centres in various governorates. The committees’ role is to detect and respond to cases of violence against children and women and refer these cases to Family Protection Department and other services as needed. UNICEF also supports MoSD efforts to raise awareness among the public on impact of violence on the family and is working towards foster social workers’ capacity to properly respond to violence in collaboration with JRF. It is fortifying JRF efforts to establish a Helpline on violence and prevention programmes to reduce violence at home and in the community. MoE and UNICEF are cooperating in a national wide programme to reduce violence against children and the girl-child at schools.

**UNHCR** is mainly concerned with the asylum seeker/refugee population in Jordan. UNHCR’s response mechanisms include various cooperation agreements with governmental organisations and NGOs, both national and international, which provide educational and primary health services, psycho-social counselling, forensics, and legal aid assistance for women, men, and children. Furthermore, UNHCR provides a safe home and financial assistance to those in need. In terms of prevention, UNHCR conducts extensive training/capacity building programs which is presented to different audiences including Jordanian Government Officials, media, academics, NGOs, and members of the local and refugee community. These programs focus on the promotion of International Human Rights conventions, some of which Jordan is a signatory to, as outlined above, rights and responsibilities of refugees, services provided, and challenges faced by the refugee community. It also looks at best practices and lessons learnt from all stakeholders and provide a forum for discussion on issues related to GBV.

UNHCR has also joined ventures with other UN agencies and is part of the UN Task Force teams in order to combat GBV at a national level. While UNHCR’s beneficiaries are refugees and asylum seekers, most of its GBV projects include services to the local
community so as to increase awareness and bridge the gap between the host and refugee community.

**WHO** in Jordan has actively contributed to the development of the National Agenda, the National Health Strategy, and the National Strategy on HIV AIDS, the School Health Strategy, the National Food and Nutrition Policy along with health promoting school tools and guidelines. In addition to its mainstream programme, WHO has a small programme under healthy life style component, which entails support to NCFA in its efforts against domestic violence. On the other hand, WHO supported NCFA as a regional collaboration centre to combat domestic violence. Similarly, WHO supports NCFA in evaluating policies on family protection, defining institutions working on domestic violence and developing a national action plan to improve responses to domestic violence.

Under the Relief and Social Welfare programme, **UNRWA** supports 14 programmes in 28 Community Development Centres (CDC) in Palestinian refugees’ camps in Jordan. CDCs offer a wide range of programmes to women in the Palestinian camps including economic empowerment that enhance women economic opportunities through providing training programmes on traditional and non-traditional skills, income generating programmes and cultural and educational programmes. Within the last component, CDCs were pioneering in providing legal literacy programmes for female Palestinian refugees.

Although, CDCs currently provide legal counselling services for women, the centres cooperate with various national actors such as Family Protection Department, Mizan, JWU and SIGI in implementing its various programmes.

**UNFPA** newly formulated country programme 2008 – 2012 have identified GBV as a key area to work with, whereby GBV is addressed under reproductive health output through a programme entitled “the Gender-based violence detection and counselling within the health system”. The programme aims to enhance the national capacity to develop, update and monitor guidelines and protocols that seek to integrate the prevention and detection of gender-based violence into health services.

Various strategies are utilised to implement this programme including: technical and financial support to JNCW to monitor the progress on the CEDAW convention as well as the implementation of the recommendations presented by the CEDAW committee, technical assistance and institutional support to the National Team for Family Protection to ensure effective policy dialogue development as well as the availability of national endorsed protocols and manuals for health workers on the detection and counselling on GBV. Similarly, the programme will be involved in training and sensitising Ministry of Health middle level decision makers on GBV as well as collaborating with UNICEF in building the capacity of health workers and committees established in 10 hospitals and 2 health centres.

While the above provided a brief on VAW programmes implemented by UN agencies in Jordan few issues are worth considering, specifically in terms of available budgets for VAW programmes, collaboration between UN agencies and human resource capacities to address VAW issues within the UN country team.
The allocated budget for the various programmes implemented by UN agencies is limited compared to other programme components. However, information available does not allow for a comparative analysis between the various UN agencies or to have concrete conclusions. For example, UNHCR allocates on 2% to its SGBV programmes. However, the UNHCR has mainstreamed SGBV within the whole programme component. Moreover, the limited available allocation of resources could be attributed to limitations in the number of organisations that are active in the field and can be supported by UNHCR.

While all of the UN agencies are involved in the thematic groups developed by the UN country team, cooperation in general and commitment to thematic groups is not institutionalised or consistent. Hence, the periodical meetings for thematic groups are rarely held and possibilities of duplication and overlapping exist when implementing activities. Nevertheless, there are areas where some coordination is established although not maintained. For example, UNFPA is coordinating its activities with UNICEF in building capacities of health workers in GBV detection and counselling.

Finally, most of the UN agencies do not have a staff member that works specifically on GBV. Instead, UN programme officers have various responsibilities including the GBV programmes. This has implication on the level of commitment of the staff member and more importantly on the qualifications and expertise available at the UN agencies in the field. Hence, as many UN interviewees have indicated, officers in charge of GBV are strong in programme management and less so in areas related to VAW.

3.3.2 International and Regional Organisations

Within the framework of this assessment two organisations have worked on issues relevant to VAW were interviewed; these are Karama and the Private Sector Project for Women’s health.

As a regional organisation focusing mainly on VAW, Karama has been working with a coalition of 18 NGOs to examine the impact of violence on women in the economic, political, educational, cultural, health, law and media fields.

The 18 organisations were clustered in groups according to their area of work and their interest in the 7 themes. Each group develops a concept paper and an action plan to address VAW in relation to the theme identified. Thereafter, Karama will help the groups to develop proposals and raise funds to support the implementation of the action plan. While the programme aims at supporting a societal awareness against VAW, it also seeks to encourage and support cooperation and collaboration between the involved NGOs. However, up until now, there are no concrete action plans resulting from this effort.

The Private Sector Project for Women’s Health is a USAID funded Programme that focuses on building partnerships and enhancing the private sector’s capacity in responding to women’s health issues. An integral part of this programme is a component on VAW, which cooperates with national organisations to deliver four main objectives: to introduce VAW and its relevant concepts to 59 000 women in Jordan; to strengthen the capacity of health care providers in the private sector; to build the capacity of grassroots organisations in prevention, detection and protection from VAW and to support the National Team for Family Protection in their national efforts at the policy and structural levels.
Under these objective PSP is cooperating with Circassian Charity Association and the General Union of Voluntary Societies to raise the awareness of women on VAW and to introduce to these women tools and mechanisms that prevent and protect them from violence. The process expands on previous partnership with the same organisations to raise the awareness of women on family planning and is based on an outreach approach and involves home visits by 30 social counsellors, whereby they distribute brochures on VAW and raise the awareness of women on issues of rights, types of violence and communication skills.

Similarly, and based on a needs assessment study to examine the level of awareness among private sector hospital personnel (management, doctors and nurses) on issues of violence as well as the policies and procedures available to handle cases of VAW, the PSP project have a component to strengthen private health care workers’ capacity to diagnose and refer victims of abuse. The assessment concluded that there are no policies and procedures adopted by private sector hospitals to protect victims of violence and that 74.3% out of 39 doctors interviewed and 78.1% of nurses interviewed cannot identify victims of violence and do not know how to deal with a victim of violence. This component is being implemented in cooperation with the Institute for Family Health (IFH) and includes working with health providers in 9 private sector hospitals in Amman, Irbid and Aqaba, on the other hand the Institute for Family Health implemented training workshops for 100 medical care providers (G. P and gynaecologists) in 3 sectors (Amman, Aqaba and Irbid). IFH created the medical care providers training manual which contains several chapters which related to GBV or VAW, this manual concentrated on practical steps and skills may help the medical care providers to deal with GBV or VAW survivals.

Freedom House also runs various programmes on VAW with funds from USAID and MEPI in the past. During the years 2004 – 2006, Freedom House focused mainly on supporting national campaigns on VAW including the "16 Days of Activism against Family Violence" implemented by JNCW. Similarly, during the aforementioned period, Freedom House supported an awareness raising campaign based on interactive theatre.

Currently, Freedom House is supporting JNCW in establishing a complaint office for women to handle VAW issues that are mainly occurring in the public sphere. The aim of Freedom House is to ensure an efficient system that register and handle issues of violence and support the availability of a database on these issues that can be utilised in promoting legislative change.

In addition, Freedom House is also supporting the establishment of legal counselling offices for victims of VAW in remote areas through its partnership with the Jordanian National Forum for women, which has offices in field in addition to partnering with other organizations as well. The support provided entails capacity building of staff to screen cases of VAW and make the right referral to other experienced organisations.

3.3.3 National Structures for the Protection of Women from Violence

Four national institutions have a mandate that includes the protection and safeguarding of women and children in Jordan. These organisations are marked as national structures or

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19 Institute of Family Health (unpublished 2007) Survey on awareness among private sector hospitals on issues of VAW
institutions since their establishing laws, roles, responsibilities at the national scene and structures vary from other governmental or NGOs. The Jordanian National Commission for Women, the National Council for Family Affairs and the National Centre for Human Rights are all established by a specific law and their board combines representatives from governmental, NGOs as well as independent experts. On the other hand, the Family Protection Department is part of the Public Security Directorate and has a distinct mandate to investigate and handle cases of domestic violence and sexual abuse.

The Jordanian National Commission for Women (JNCW) is the National Women Machinery and was established in 1992. JNCW’s mandate was revised and broadened in 1996 and as a result of the Beijing Fourth World Conference on Women. The Cabinet, in accordance with the tasks outlined in the Beijing Platform for Action to establish National Machinery, delegated to JNCW the responsibility of defining policies related to women in all areas, and participates in formulating national plans and strategies aimed at fostering development, and the advancement of women in all related sectors.

The recent National Strategy for Jordanian Women 2006 – 2010 developed by JNCW identifies VAW as one of the areas that requires the collaboration of all parties concerned including the government and the civil society. Hence, under the component on human security and social protection, the strategy specifies three main objectives: limiting VAW, developing a multi-disciplinary and institutional approach based on human rights to protect women from violence and to change social attitudes that support VAW.

In 2007, JNCW launched a “Network for Combating Violence against Women (Shama’)” as part of the national campaign within the 16 days campaign to combat VAW and in celebration of 60 years for the UN Declaration on Human Rights. Shama’ network aims to:
1. Coordinate efforts to eliminate VAW;
2. Follow up on the implementation of the National Strategy for Jordanian Women (2006 - 2011) in relation to VAW;
3. Collaborate and coordinate governmental and non-governmental efforts in the field of VAW;
4. Enhance the participatory approach in addressing issues of VAW;
5. Monitor and document VAW and relevant existing programmes and projects and make resources available for all concerned parties;
6. Enhance the level of services; and
7. Expand services to reach all areas of Jordan.

Members of Shama’ network include representatives from the Ministry of Social Development, Family Protection Department, Ministry of Health, National Council for Family Affairs (NCFA), representatives from concerned civil society, specialised members, the Arab Network for Women in the Legal Profession.

Shama’ working modalities include working groups under four headings: the committee on awareness raising and training, the committee on legislation, legal and judicial implementation, the committee on services and complaints as well as the committee on information and communication. The committees have recently developed their draft action plans and are in the process of finalising these plans.
The National Council for Family Affairs (NCFA) was established in 2001 as “an umbrella organization that supports, coordinates and facilitates the work of its partners and relevant institutions which are involved and influential in the field of family affairs.” Since its establishment the council has been an active institution working in various fields relevant to family welfare including family empowerment, early childhood development, the National Plan of Action for children, the National Framework for Family Protection and the National Strategy for Family Protection.

NCFA furthermore, acts as the secretariat for the National Team for Family Protection, which was established in 2000 as a multi-agency task force entrusted with limiting domestic violence and sexual abuse. The National Team membership includes representatives from the Security Directorate, the Judicial Council, Family protection Department, Ministry of Social Development, Ministry of Education, Ministry of Health, Ministry of Awqaf, Jordan River Foundation (JRF), JNCW, Jordanian Women’s Union (JWU), Centre for Family Counselling (CFC), National Centre for Human Rights (NCHR), Institute for Family Health, and Queen Zein Al-Sharaf Institute for Development (ZENID). Currently, the National Team has the following tasks:

1. Provides technical consultation to national projects on family protection that are supervised by the members of the team;
2. Supervises and implement the National Framework for Family Protection and the National Strategy for Family Protection and issue relevant reports;
3. Follows up on regional and Arab conferences recommendations that relates to family protection; and
4. Seeks funding for programmes and projects in line with the National Strategy for Family Affairs.

Recently, efforts were made to enhance the role of the National Team and its working strategies. More importantly, the Team meetings provide a venue for the participating organisations to share their experiences as well as discuss topics of mutual interests. However, it should be noted that the National Team role in following up and supervising the implementation of the National Framework for Family Protection remains limited.

The National Centre for Human Rights (NCHR) was established in 2006 by a Law decree number 51 and aims to “protect human rights and disseminate a human rights culture, observe human rights situation and provide consultation and legal assistance, take necessary administrative and legal procedures to deal with human rights complaints and violations in order to put an end to it and eliminate its effects, to conduct studies and research and provide information, in addition to conducting training workshops and seminars, manage and organise campaigns and take stand and issue necessary report and publications.”

One major component of NCHR units is the Complaints and Legal Services Unit which receives and treats individual complaints on human rights, follows up on these complaints up to their final resolution and provides assistance and advice to injured and concerned people on their rights.

NCHR was recently accredited according to Paris Principles and is considered the National Institute for Human Rights in Jordan. Although the mandate of the NCHR, in relation to human rights, is broader than the other two institutes, NCHR, through its Complaints Unit deals with
issues of VAW. Yet, NCHR experience has been mostly in handling complaints that are related to migrant labour human rights.

There are many overlapping areas within the work of the three organisations. This is more true when looking at the work of JNCW and NCFA in relation to issues of women’s advancement in general and VAW in particular. While this is understandable given that women constitute an integral part of the family, it does restrain existing opportunities, on occasion duplicate efforts and hinders the change process.

Certainly, as many of the interviewees have commented, the work of different organisations is appreciated and needed, particularly given expanding demands and the specialised mandate for each institute and its modality of work. However, more specialisation and clarification of roles should be identified in order to ensure the efficient delivery of preventive and protective strategies, particularly in addressing VAW.

The Family Protection Department was established in 1997 as Unit to handle cases of domestic violence and sexual abuse. The main objective of the Family Protection Department is to investigate physical abuse and neglect of children from within the family and sexual abuse for all other victims regardless of the age or sex of the victims or if the abuse was from inside or outside the family. Over the past years, the Unit’s geographical coverage expanded to include six other governorates; also the role of the Unit has expanded to become a Family Protection Department, which as part of the Public Security Directorate, is entrusted with the following tasks:

1. To Provide legal and policing services for victims of violence, which includes receiving complaints and investigating cases of violence utilising video techniques with children and follow up with courts;
2. To provide medical examination and services provided by a forensic medicine doctor;
3. To provide social services including following up with the victim as well as developing case studies on the social conditions that the victim lives in;
4. To provide psycho-behavioural services to support victims;
5. To provide awareness raising and counselling;
6. To build the capacity of police human resources in the domestic violence subject; and
7. To maintain a database and information to study and analyse issues related to domestic violence.

It is worth noting that the FPD has successfully built over the past years partnerships with various other stakeholders. To that extent the Family Protection Department is represented and participate in all relevant meetings including those on VAW. Moreover, the FPD works in cooperation with other national entities. For example, the social support provided for the victims and their family is provided by a staff member seconded from the Ministry of Social Development.

3.3.4 Governmental Organisations

Governmental organisations working on VAW are the Ministry of Education, Ministry of Health, Ministry of Justice, Ministry of Social Development and the Ministry of Awqaf and Religious Affairs (MoARA). Certainly, the involvement of each organisation relates to its field of work and
the services it provides. The following provides a brief description of the work of these organisations.

**Ministry of Health** works mainly through its network of health centres and hospitals. In 2005, an institutional analysis of the Ministry of Health and its policies to protect victims of violence was conducted by an independent expert. As an essential partner in the National Team for Family Protection and within the National Framework for Family Protection the Ministry of Health is assigned with the role to detect and identify victims of domestic violence and follow the national procedures to register cases. Certainly, the health services play a pivotal role in identifying victims of domestic violence and sexual abuse through the expanded network of hospitals and health centres all over Jordan; however, although the Ministry of Health has recently established till now the procedures and protocols as well as relevant training materials and training of staff members at the Ministry of Health is still not finalised. Worth noting that there is no national registrar established at the Ministry of Health to ensure that health service providers in both the public and private sectors register the cases of victims of violence.

Under the Ministry of Health, **Forensic Medicine** services are also vital within the scope of domestic violence and VAW. In fact, Forensic Medicine Directorate was one of the leading organisations working in the field of domestic violence, for example the Directorate was one of the piloting organisations in the National Team for Family Protection. Furthermore, the Forensic Medicine contributes to national awareness raising initiatives.

The **Ministry of Education** area of work within the National Framework is more focused on awareness raising and preventive mechanisms. Although the Ministry of Education has also developed a set of procedures and protocols to receive and refer detected cases of domestic violence, these measures are not being fully implemented and the Ministry of Education maintains utilising the procedures that have been used previously. In fact, the work of Ministry of Education is currently limited to its past activities that entail training school counsellors on enhancing students’ skills in self protection as well as training of core teams at school level to follow up on violence issues particularly school violence and corporal punishment.

Although the **Ministry of Social Development** is regarded as one of the key institutions working on domestic violence, the activities related to its work are rather limited to a programme on family counselling that entail holding workshops for the families of children who are subjected to domestic violence. Most importantly, the Ministry of Social Development was involved in proposing and adopting the Family Protection Law as well as in setting the standards and criteria for 25 public and private institutions that host the elderly, children at risk and women's shelter as well as supervising their work.

An integral part of the **Ministry of Justice** work is to suggest laws and legislation. Certainly, the Ministry of Justice had a pivotal role in passing the law on family protection as well as the role of suggesting legal amendments and laws that protect the family in line with the National Framework for Family Protection. Similarly, the Ministry of Justice and the **Judicial Council** supervise the training of Judges and clerks at national courts on how to deal with victims of violence in cooperation with the Judicial Institute. The cooperation has also led to the introduction of a specialised education curricula prepared for the Judiciary Institute, which targets prosecutors and judges.
Finally the MoARA is responsible through its network of religious clerks to raise awareness on various subjects relating to violence against women including women’s rights in Islam, roles and responsibilities in the family from the Islamic perspective. The MoARA, is also a member of the family protection team under NCFA

All the organisations discussed above are represented in the Family Protection Team and contribute to implementing the National Framework on Family Protection. However, as many interviewees have commented the implementation of the National Framework is slow. That is particularly true in the case of the Ministry of Health, given that the procedures and protocols and relevant materials are not finalised still. But it is also true that other governmental organisations’ adoption of the procedures and protocols developed is also slow, although an entity in each ministry has been established with a mandate to handle issue of domestic violence.

3.3.5 Non-Government Organisations

Policy and Legislation

Although JNCW and NCFA are the two entities mandated to develop national policies and strategies as well as suggest amendments to legislation, many NGOs have been active in the field of legislative amendments. For example, the JWU has had a pivotal role in calling for amendments on marriage legislation to raise the age of marriage.

Awareness Raising

Most of the organisations interviewed have awareness raising programmes as part of their main activities in the field of women’s rights. These programmes range from a two-hour session to a few days programme. Legal literacy among women is widely used as a subject specifically in the areas of labour and social security laws. Within this framework, VAW issues are addressed and discussed.

What is visible through awareness raising activities is the cooperation among organisations, whereby more experienced/ specialised organisations are requested to lead the awareness raising sessions for other organisations. For example, many of the organisations working in governorates referred to Family Protection Department, Sigl, Arab Women’s Organisation, JWU, Mizan’s support in legal awareness raising programmes that are organised for women in the local community.

Another form of cooperation is when more “experienced organisations” are implementing programmes that include awareness raising activities. Within this framework, experienced organisations engage other less experienced organisations in the process by approaching the target group of organisations that have presence in the governorates.

Undeniably, the direct contact with women in various areas of Jordan through awareness raising activities and programmes has expanded the forms of VAW. For example, most of the NGOs interviewed from the governorates have explained that their awareness raising programmes have led them to identify the right to inheritance as one key manifestation of VAW.
Nevertheless, and although many organisations identify VAW as a main subject for their awareness raising activities, little information is available on what the quality and depth of the awareness raising programme. Therefore, impact of awareness raising programmes in qualitative and quantitative terms remains questionable. This particularly true when, as a recent study conducted by the Jordanian Centre for Social Studies (2007) concluded that 54% of women are not aware of services provided for women victims of violence. This is particularly alarming given the number of NGOs implementing awareness raising programmes on violence.

**Capacity Building**

Capacity building activity is a rather loose term used by the various organisations. On many occasions, the interviewees indicated that what they have under capacity building activities, are more likely awareness raising programmes targeting a specific subject.

A very limited number of organisations actually implement capacity building programmes. However, through information made available during interviews, it was clear that successful capacity building programmes, which entail enhancing knowledge and skills, were mostly targeting either internal staff of one organisation or/and grassroots organisations.

Most notable is the programme implemented by ZENID with funds from the Private Sector Programme for Women’s Health (PSP). The programme aims at building the capacity of six grassroots organisations in the field. The capacity building activities involves organisational development, gender training, communication, conflict resolution and specialised training on VAW (basic psychological and social counselling). The programme expected outcome is enabled organisations that can identify cases of VAW and respond efficiently to the needs of victims of violence. A continuation of the programme entails supporting the six organisations in writing and submitting proposals for a small grant to support projects that address VAW.

Another prominent experience is the experience of the Institute for Family Health (IFH), which has a capacity building programme for its medical and psychosocial staff, regardless of their job description to screen, identify and internally refer victims of violence. Also the Institute is currently implementing a capacity building programme with 9 private sector hospitals and 100 gynaecologists and General Practitioner (G.P) on identifying, referral and handling detected cases of violence.

Other experiences in capacity building are based on long standing relationships between the various organisations. For example, during the establishing phase of the counselling services at the Family Development Association (FDA), Mizan provided substantial technical support in helping the FDA establishing the centre through coaching and training of staff.

**Services**

The term “services” is used in this context to refer to all the support provided for victims of violence and it includes legal (counselling as well as court representation), health including psychological services and counselling as well as social services.

To a large extent, most of the NGOs offering services to victims of violence are based in Amman. Unfortunately, the availability of such services in the governorates remains limited. Moreover,
as the Jordanian Centre for Social Studies (2007) research indicates, only 11% of the victims of violence have requested help from an organisation or association or court.

Similarly, the provision of these services remains below the required standards and lacks specialisation except within some of the organisations interviewed. This also raises series of questions towards what is the impact of these services on women’s access to durable solutions and protection from violence.

Some of the organisations interviewed provide a full range of services, most notably the JWU, which provides along with these services a shelter for women victims of violence (discussed under a separate heading). Similarly, Sisterhood is Global (SIGI) accommodates for various needs of women victims of violence including legal representation in courts. The Family Development Association (FDA) also provides similar services to victims of violence but the provision of these services remains limited to basic provision and referrals to more specialised agencies.

Although the Jordan River Foundation (JRF) main area of work is “Child Abuse”, its experience in service provision offers another example of good practice. Services provided for abused children are mainly channelled through “Dar Al-Aman” shelter for children until the age of 12 for boys and 13 for girls. A comprehensive approach is utilised to offer these children a variety of services as per case including psycho-social counselling and education. JRF also extends its social services to work with the family of the abused child to ensure that the child returns to a safe environment.

On the other hand, Mizan Law Group is more specialised in the area of legal counselling and representation and mainly grants the legal services for women beneficiaries. Another instance is the Institute for Family Health (IFH), which offers a comprehensive health related services including psychological, social and legal counselling. Although, the health services provided within the Institute aims at giving primary health services for women and children and were not meant to detect and handle cases of VAW, the centre gradually developed services to detect and support victims of violence.

Further analysis of the services provided by NGOs leads to identifying some of the issues that face workers in the field. These could be summarised hereunder:

- Even though legal counselling services are concentrated in Amman, it is clear that the legal counselling services provided for victims of violence are well established and are the mainstay of the counselling services.

- Psychological and social counselling remains particularly weak and there is a limited number of professionals with adequate experience working in the field. Furthermore, the distinction between the psychological and social counselling is rather vague and not well defined.

- In general, the available training provided for psychological counselling is inadequate to deal with the various cases handled by the organisations that provide such services. In most cases, the persons in charge have a university degree in counselling or in psychology and have attended basic training programmes on providing counselling for victims of violence, which poses a serious question on the professionalism and quality of support provided to
victims of violence. This is particularly true given the social and value systems that might interfere in the course of counselling.

- Furthermore, family counselling expertises are not available in Jordan, although the focus of the various agencies in recent years has been on domestic violence.

- Nevertheless, there are available experiences in Jordan that are worth considering learning from and building upon. For example, the Institute for Family Health has had an extensive training for its staff members on how to handle these cases by several international NGOs e. g (the Italian association for Women Development (AIDOS) this training was followed by implemented several services (medical, psychological, social and legal) to prevent and to create practical interventions against violence during 2002- 2006 to reach to women empowerment. But the format and scope of the training provides a success story on how to create institutions that are friendly to victims of violence.

Shelter

Jordan’s experience in providing shelters for victims of VAW is rather recent. Three shelters are formally recognised and provide safe houses for cases of violence. However, during the interviews within this assessment it is clear that other organisations, while they don’t have a shelter, utilise available resources to host victims of violence in a safe house. Mizan, SIGI and Family Awareness and Counselling Centre offer such services by either renting furnished flats, or host the victims in their houses.

It is also important to note that Jordan through the Public Security Directorate provides protection for women at risk in the correctional and rehabilitation centres. In 2004, nearly 52420 women were held in protective custody at different intervals. Nevertheless, there have been demands by advocates of women rights to have durable and sustainable solutions for these women without depriving them from their liberty to be part of the society. Although last year has witnessed ambitious programmes to address this issue, little has been made to change the current procedures at the governmental/ official level. However, during this assessment some of the interviews have mentioned that a new programme entitled “A new beginning” has been recently launched in cooperation with the Public Security Directorate to find alternative solutions and shelters for women at risk.

In 2007, “Dar Alwifaq” was established by the MoSD to:
- Provide protection for women victims of domestic violence and their children;
- Achieve Family conciliation between the woman and her family members to consolidate mutual understanding and coexistence in the family;
- Participate in establishing policies and developmental plans that are relevant to family safety through providing the provision of information and the data needed for this purpose;
- Rehabilitate abused women to become capable to plan and to re-join with her family & community, self-determined life free of violence;
- Change perceptions, attitudes and behaviour as well as patterns in the society, which are the breeding ground for domestic violence against women and children; and

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Reinforce values of dialogue based on respect and dignity among family members to promote healthy relationships and prevent future interpersonal abuse.

Dar Alwifaq is managed by the Ministry of Social Development and is governed by regulation 48 for the year 2004. The regulation provides the mandate for Dar Alwifaq and its working structures and mechanisms. Information provided hereunder is based on a recent Needs Assessment conducted by NCFA (draft was finalised in July 2007) to evaluate and assess the gaps within the work of Dar Alwifaq and to identify possible strategies that will address these gaps.

It is clear that most of the referred cases to Dar Alwifaq were either through the Ministry of Social Development or the Family Protection Department with a very limited number of referrals from other organisations. Dar Alwifaq clearly states that it hosts women for a certain period of time (3 – 6 months). Similarly, the procedures to receive individual women without a formal referral involve a special permission from the Ministry of Social Development.

Services and programmes provided by Dar Alwifaq include:

1. **Residential services**: provides safe and secure accommodation, food, clothing, health services and counselling for women and children seeking safety and support after leaving an abusive situation.
2. **Emergency services**: domestic violence victims and their children may be transported to the Shelter for intake on a 24 hour basis.
3. **Counselling program**: Social counselling services/Psychological counselling services/Family conflict resolution /Legal counselling/Heath counselling/Religious counselling\(^{21}\).
4. **Therapeutic children services program**: The special needs of children are addressed through therapeutic childcare; individual, family and group counselling sessions; parenting support; and art and recreation opportunities.
5. **Referral services**: provision of legal, economic, medical or any other needed services for free. A network was created from governmental and NGOs organisations.
6. Transforming family's social study to the relevant department in MOSD to get financial aid appointment.
   - Refers women to vocational rehabilitation centres or to NGOs providing such services.
   - Provide legal services for a free through networking with the NGO’S.
   - Provide medical services through networking with MoH.
7. **Men's Crisis Service**: help men to plan for a non-abusive lifestyle and accept responsibility for past behavioural problems. The purpose of the Men's Crisis Service is to increase women's safety by providing immediate counselling for them and their partners.
8. **Family's Reconciliation**: The concept of family reconciliation aims to reduce family conflicts and to achieve family cohesion in a non-abusive way.
9. **Community Awareness**:
   - Provide and circulate brochures and booklets about domestic violence issues such as violence/abuse, power and control, conflict in relationships, self-esteem, communication, healthy expression of feelings, and a portion of the groups focus on skill-building.

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\(^{21}\) Religious counselling: supporting the victim by utilising religious teaching
The JWU has been accommodating a shelter for victims of violence since late 1990s. Certainly, the premise of JWU in providing this service for women is rather different in scope and mechanism when receiving a woman victim of violence. Hence, JWU receives cases from various agencies and provides a set of services for the victims including occupational rehabilitation.

The shelter provided by JWU presents a model for immediate responses and accessible to female victims of violence. On the one hand, the long experience has helped JWU earn credibility among various actors and hence receive referrals from various organisations including Family Protection Department and other governmental entities. Moreover, the shelter services provided at the JWU, given its NGO nature makes it more accessible to victims of violence and less bureaucratic.

Worth noting the experience of other organisations, which do not have a formally acknowledged shelter but nonetheless, provide temporary protection for women victims of violence. Certainly, these experiences while rather informal and not institutionalised within a clear system, still provides an adequate, immediate response to victims of violence.

In order to ensure sustainable and professional shelter services these informal mechanisms need to be institutionalised and standardised. Nonetheless, the available regulations governing shelter homes legally requires further development to provide registration procedures and identifying the activities these shelters are allowed to implement.

**Referral**

Most of the organisations working on VAW refer victims of violence to other specialised organisations. The referral system is in many cases informal and based on existing personal/ professional networks. For example, the FDA, although has a counselling centre and offers psychological, social and legal counselling, usually refer victims of violence to Mizan for further legal counselling and court representation, Al-Rashid Psychiatric Hospital for psychological counselling and the Family Protection Department for further investigations. The case is similar with other organisations such as the Family Protection Department, which used to refer women victims of violence to the shelter hosted at the JWU for protection.

The National Framework for Family Protection also provides a clear system for referral between governmental organisations. Nevertheless, the procedures and protocols of the National Framework require further institutionalisation before yielding any positive results.

On the other hand, the referral system established by JRF is clear in scope and mechanisms, whereby JRF has signed several agreements with relevant organisations to ensure smooth referral mechanisms and efficient follow up on the case at hand. Within this context, JRF has signed agreements with the JWU, Mizan, ZENID, and the ministries of education, health, social development, labour and interior as well as the security forces.

Following the initial interview with the victim of violence, JRF, pending on the case, fills in a referral form identifying clearly the services required and refers the victim to the appropriate agency. Therefore, given JRF limited involvement in VAW, usually transfer the victims to the
JWU either to use the shelter services or for other services provided at JWU. JRF also keeps track of the victims and follow up on the results of their referral through communicating with the hosting agency and using the follow up form.

Hotline

Organisations providing hotline/ helpline for victims of violence are rather limited in number. Services provided over the hotline vary in scope and quality reflecting the already existing gaps in psychological and legal counselling capacities. Hence, telephones that require legal counselling are usually handled efficiently and the caller receives the information requested. However, the services provided for callers requesting other services, such as psychological counselling or immediate need of support to handle a specific situation relevant to violence remains very limited.

Only the hotlines managed by the NCHR and Family Protection Department receive calls 24 hours a day. Most of the available hotlines are operating for 8 hours daily. However, as clarified by professionals interviewed that the existing expertises who are respond to the telephone have limited technical capacities and cannot cater and respond to the various requests and needs of the callers, specifically in the areas where immediate intervention is required. Certainly, this raises concerns on the impact of these hotlines services and support they provide for the victims, whereby sometimes the availability of an inefficient service might do more harm than good.

Advocacy Campaigns

Few organisations are involved in advocacy and/ or organise campaigns on issues relating to VAW. In fact, advocacy campaigns are merely initiated by national institutions and strongly established NGOs. Relevant to VAW, the largest campaign was conducted by JNCW in 2007 commemorating 16 years for the 16 days campaign on VAW. The campaign celebrated Jordan’s achievements in combating VAW and the network “Shama” was one of its major outcomes. Other NGOs have either contributed to or initiated smaller campaigns on issues of early marriage and other issues.

Research, Publications and Reports

As discussed in previous section of this report, there are many research and publications produced in relation to VAW. However, most of these publications are concerned with domestic violence rather than VAW.

On the other hand, it is worth noting the experience of Kenana Association for Women in Irbid, which provide periodical report on the situation of women workers at the Qualified Industrial Zones including working hours, wages, access to social security and health insurance and utilise these reports to promote better living conditions for working women.

Furthermore, many of the publications, including this one, produced were providing the same information and within a short duration intervals. Also, all of the studies produced have come with the same outcomes and conclusions. For example, nearly all of the studies have pointed
out the lack of credible data on the prevalence of VAW in the Jordanian society, which pause serious questions on what added value these studies make.

**Screening and Outreach**

Outreach programmes, which entail household visits in various areas of Jordan are implemented by the different organisations active in the field of VAW. Most notably, the Institute of Family Health, which covers the area of Northern Amman with house visits that aims at introducing basic concepts on VAW. Similarly, is the Makana programme implemented by ZENiD, which also includes house visits to introduce concepts on VAW as well as basic training for women on how to prevent and protect women from violence.

The outreach programmes achievements extend beyond allowing organisations to introduce concepts on VAW and raise awareness on the subject to provide the organisations with the opportunity to screen and identify potential cases of VAW. This is particularly true in the activities of both of the organisations mentioned above, whereby during the house visits the organisation’s representatives also detect cases of violence and work with the victim for further protection measures. Similar screening activities were recorded following awareness raising programmes implemented by NGOs.

**Networks**

As noted earlier in the report, the two available networks on domestic violence are Shama’ established under JNCW and the Family Protection Team hosted by NCFA. Nevertheless, there are many informal networks established between organisations. These networks provide support for the various organisations involved, including referring cases of violence, sharing experiences and cooperating at various levels. Nevertheless, coordination remains limited among the various actors and requires strengthening and institutionalisation.

**3.4 Resources Available**

As different parts of this report have indicated, many of the organisations active in the field of VAW are highly dependent on donors funding to implement their programmes and activities. This is particularly true when examining NGOs that provide services to victims of violence. The available funds for Family Protection Departments in line ministries established under the National Framework for Family Protection are within the overall budget allocated for the ministries or through support provided by the international community.

A distinct example on budget available for ministries is what was documented in the Study on Violence against Women (NCFA 2008) on the budget allocated for the Ministry of Social Development to implement awareness raising programmes on family counselling, which does not exceed 5000 Jordanian Dinars. However, it could be argued that the support provided by UNHCR and PSP to Dar Al-Wifaq increases the MoSD available resources in relation to VAW. On the other hand, the Ministry of Health is cooperating with various international donors to implement and enhance its service delivery in relation to VAW.

As discussed earlier in this report, the capacities within the organisations active in VAW field are strong in the field of legal advice but rather weak on other psycho-social and family counselling.
3.5 Capacities to Address Issues Related To Gender-Based Violence

This section sums up the key findings made available through this assessment and it will focus mainly on capacities at the policy formulation and legislation level, activities implemented by the various organisations and service provision as well as a short discussion on cooperation and networking.

I. Although the recent years have witnessed the publication of various research and studies on the subject of violence, the available data does not provide a comprehensive measurement on the prevalence of domestic violence. Certainly, the results of the Demographic and Health Survey are potentially a good baseline that provides reliable data. Nevertheless, the relevance of the data provided for policy formulation depends highly on the questions raised. Moreover, there is limited information on the incidence of VAW in the public sphere and the workplace.

II. There have been strong steps toward protecting women and children from domestic violence. This has been visible through newly introduced legislation. Nevertheless, as explained earlier, the legislation requires more explanatory notes to bridge the gaps and enhance the various provisions of the law. Moreover, there are other laws that require further examination and development.

III. The National Framework for Family Protection and the National Strategy for Family Protection are two important instruments for prevention as well as protecting family members from domestic violence. As of yet, the two instruments have not been fully realised. Hence, although the Ministries of Education, Health and Justice and Social Development have established a section in the respective Ministries to handle issues of domestic violence, these sections are still not fully functional; so far none of the ministries adhere to the developed protocol and procedures under the National Framework.

IV. As mentioned in section 3.3.3 above, two organisations are mandated to develop policies and work on legislation amendments. Certainly, other organisations contribute to these efforts either by direct consultation or through support lobbying and advocacy activities. It is clear that NCFA has been at the forefront of these efforts compared to other organisations. While the result of these interventions responds to existing needs, there is a need to clarify the roles of various organisations in relation to their mandate.

V. Available networks stemming from the existing structures, mainly the National Team for Family Protection and Shama’ have a similar mandate and have representatives from the same organisation. However, there are no indication on how having two networks would strengthen the support to victims of violence and efficient response to combating GBV. More specialisation and clarity on the role and added value of each of these networks should be targeted.

VI. There are ongoing efforts to raise awareness within the Jordanian society on issues related to GBV, VAW and domestic violence. However, the awareness raising programmes implemented vary in scope, depth and structure. As the various interviews in this research reveal, another point of concern is also the content of these awareness raising programmes, which is usually based on the acquired knowledge and the values of the
organisation implementing these programme. Certainly, with the absence of a common understanding on GBV related issues, the possibility of conveying messages that do not fall into national priorities and international standards is fairly high.

VII. Shelter services are governed by a special regulation and are supervised by the Ministry of Social Development. Existing experience in Jordan was pioneered by the NGO sector. The recently established Dar Alwifaq also provides a model of a shelter facility managed by the government. Lessons learnt from both experiences provide sufficient ground to better assess and understand the strength and weaknesses of the two management approaches. Certainly, within the protection context, accessibility and immediate response are key factors of success and should be a key denominator for the success of the shelter services.

VIII. Hotlines and helpline are also an issue that require further examination and enhancement. In fact, the services provided under these headings are particularly crucial given the victims accessibility to such services and the need to have quality services.

3.6 Priorities for Actions

Certainly, Jordan has moved with steady steps to more prevention and protection from violence against women. Nevertheless, some gaps still persist hindering effective programming in this field:

1. The various definitions used within the Jordanian context have limited the focus of organisations to discussing merely issues of domestic violence instead of looking at the wider forms of GBV in the public sphere. It is recommended that future programming seeks to be inclusive and address issues of violence in the private as well as the public spheres.

2. Support relevant institutions to build a data base on GBV at the national level. This could be achieved through a) supporting the Department of Statistic to incorporate GBV in their annual surveys and b) developing an efficient system for registering cases of violence that seek the help, support and counselling of various organisations.

3. The process of amending, expanding and explaining existing legislation on violence against women is an integral strategy that will support creating an enabling legal environment to combat VAW. It is recommended to revise and amend legislation that is relevant to GBV.

4. Although various organisations are working on VAW issues, there are many areas that require intensified work and collaboration among the various actors in the field. This is particularly important given the existing competition among the organisations. Nevertheless, identifying the roles and responsibilities among these actors will enhance the quality of work.

5. Expanding the outreach of service provision to reach all areas of Jordan has been identified as one of the persistent needs.
6. Within this context, it is important to build on existing structures and enhancing/supporting their working strategies.

7. Similarly, there is a need to build on successful experiences available in service provision. Examples of such experiences are available in the following organisations: JWU, Mizan, Institute of Family Health, ZENID, JRF and SIGI.

8. It is recommended to enhance monitoring mechanisms to track achievements and follow up on the implementation of national action plans.

9. Although many organisations have been active in providing awareness raising programmes, it is clear that such a strategy is still needed to create a national awareness on the issue of VAW.

10. Key to enhancing the quality and proficiency of services are targeted capacity building activities to enhance the quality of services provided for victims of violence, particularly in the fields of psycho-social and family counselling and hotline/helpline services.
### Annex 1: National Organisations Programmes in Relation to VAW

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<th>Service Delivery</th>
<th>Advocacy and Lobbying</th>
<th>Hotline</th>
<th>Research</th>
<th>Publications</th>
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22 Please note that for the UN organisations this table illustrates the activities that UN agencies support (technically or financially) national organisations to implement.
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Annex 2: Interviews Guidelines

**GENERAL QUESTIONS**

Name of Organisation  
Year of Establishment  
Areas of Work  
Years of working on VAW related programmes  
Does the organisation have a policy paper? If yes, how does the policy paper address GBV/ VAW?  
Is there a regular programme cycle for the organisation? If yes, how does the organisation incorporate GBV/ VAW in its programmes?  
How are issues relating to addressing GBV/ VAW present in your annual plans?  
What is the percentage of GBV/ VAW activities in comparison to your other activities?

**QUESTIONS ON VAW/GBV**

Would you please define for me VAW and GBV? Can you please indicate what are the differences and similarities between these two terms?

**PROGRAMMES RELATED TO VAW/ GBV**

In addressing VAW/GBV, do you focus on the private (domestic) or public sphere?

What are the specific areas of GBV/ VAW you focus on?

- Sexual abuse  
- Physical abuse  
- Verbal abuse  
- Child marriage  
- Sex trafficking in women and girls  
- Crimes of honour  
- Sexual assault and harassment  
- Abuse of older women

What is the nature of your programmes in relation to VAW/ GBV?

- Advocacy  
- Lobbying  
- Provision of Services  
  - Shelter  
  - Legal aid (counselling/ representation in court)  
  - Protection/ reporting/ monitoring...  
- Research  
- Conferences  
- Capacity building  
  - Protection
✓ Rights of Women
✓ General on VAW/GBV
✓ Gender

- Awareness raising
- Policy and legislation
- Funding other agencies

Who are your target groups?

- General public
- Women mainly
- Decision makers
- Grassroots organisations?

**HUMAN AND FINANCIAL RESOURCES**

What are the funds available for your organisation in relation to VAW/ GBV?

How many staff members you have working on VAW/GBV?

What is the expertise available within your organisation working on VAW/ GBV (educational background, work experience, capacity building programmes, etc)?

When delivering your programmes on VAW/ GBV do you use external experts?

In your opinion, what are the strengths and weaknesses of your organisation/ organisations working on VAW/GBV related issues?

In your opinion, what are the strategies that need to be adopted in order to ensure effective delivery of such programmes?

**NETWORKING**

In your VAW/GBV programmes do you coordinate/ cooperate with other local, national, regional or international partners? Please provide examples?
## Annex 3: Organisations Interviewed

<table>
<thead>
<tr>
<th>Organisation</th>
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<td>1 UNIFEM</td>
<td>Dr. Mouna Ghanem</td>
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<td>Ms. Dana Malhas</td>
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<td>2 UNFPA</td>
<td>Ms. Muna Idris</td>
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<td>Ms. Rana Taher</td>
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<td>3 UNCHR</td>
<td>Ms. Rana Ksaifi</td>
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<td>4 UNRWA</td>
<td>Ms. Maha Abdel Hamid</td>
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<td>079-5515867</td>
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<td>5 WHO</td>
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<td>Ms. Tatania Al-Qour</td>
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<td><strong>National Institutions</strong></td>
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<td>8 JNCW</td>
<td>Ms. Asma Khader</td>
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<td>Dr. Haifa Abu Ghazaleh</td>
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<td>10 UNCHR</td>
<td>Ms. Buthena Furehat</td>
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<td>11 DFP</td>
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<td>Dr. Maha Al-Saheb</td>
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<td>15 MoSD</td>
<td>H.E. Mohammed Khasawneh</td>
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<td>16 Sigi</td>
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<td>17 Jordan River Foundation</td>
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<td>Ms. Reem Abu Hassan</td>
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<td>Ms. Nuha Muhreiz</td>
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<td>21 Institute for Family Health</td>
<td>Dr. Manal Tahtamouni</td>
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<td>22 Family Development Association</td>
<td>Ms. Myassar Al-Saadi</td>
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<td>23 Al-Nakeera Society Amman</td>
<td>Ms. Samia Al-Sakran</td>
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<td>Family Care Society Zarqa</td>
<td>Ms. Salam Dajani</td>
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<td>Family Awareness Guidance Center Zarqa</td>
<td>Ms. Kawthar Khelefat</td>
<td>05-3865144</td>
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<td>Ms. Mouna Abu Darwaish</td>
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<td>Jerash Ladies Benevolent Society Jerash</td>
<td>Ms. Enaya Khalil</td>
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<td>Women’s Programs Center – Aqaba (UNRWA)</td>
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<td>Sahab Society for Social Development Amman</td>
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<td>Al-Assera Al-Baydaa Society Amman</td>
<td>Ms. Maha Obeidat</td>
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<td>Electronic Village Society Madaba</td>
<td>Mr. Shadi Al-harout</td>
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<td>Badia Young Women’s Society for Development and Training Madaba</td>
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<td>Ms. Maleeha Qabalat</td>
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<td>Young Women’s Christian Association</td>
<td>Ms. Roula Habiabeh</td>
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<td>Basmit Sunaa Al-Hayat Society Balqa</td>
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<td>Ms. Arwa Bustami</td>
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<td>Freedom House</td>
<td>Ms. Lama Khries</td>
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References

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