

1 • Executive Summary

Ukraine is going through one of the most difficult periods in its history due to the war with Russia that has been going on since 2014 and the large-scale invasion in 2022. This has significantly increased the risks of various forms of violence for women, especially those in the war zones or those who were displaced. Economic instability exacerbates their vulnerability to domestic violence, and limited access to necessary services and support complicates the situation. In addition, the war has led to a redefinition of gender roles and demonstrated the need for society to adapt to new realities. However, there is a serious problem with the lack of up-to-date data on gender-based violence (GBV), which makes it difficult to respond effectively and provide support to victims.

There is also scant data on the level of awareness and prevalence of various forms of GBV among adults and adolescents in Ukraine. Therefore, observations of the social changes caused by the war emphasize the need for a national study on gender-based violence among women, men, girls and boys. In February-May 2024, World Vision and the NGO "Girls" jointly conducted a nationwide study of the understanding and prevalence of various forms of GBV and the effectiveness of the response. The following methodology was used to achieve the objectives of the study:















Desk review and analysis of available data and information on gender-based violence in Ukraine

Focused group discussions (96 participants) with semi-structured questions covering topics reflected in the research objectives and conducted separately for women (aged 18-60), men (aged 18-60), girls (aged 13-17) and boys (aged 13-17).

Interviews with key informants (19 participants) using a semistructured interview questionnaire, which was also used during the focused group interviews. Participants: women and men; community representatives; human rights defenders; representatives of specialized non-government organizations (NGOs); representatives of response actors - educational institutions, police, social services; psychologists working

with GBV survivors

Online survey (2800 respondents), which included men and women (aged 18-60), girls and boys (aged 13-17). The survey questions were based on the results of the key informant interviews (KIIs) and focused group discussions (FGDs) and included the most frequently mentioned answers as response options for survey participants.

Key findings

Participants in focus group interviews (FGI) clearly associate GBV with physical acts such as hitting and beating, due to the commonly accepted perception of it in society and personal experiences. There has been an increase in attention to gender-based psychological violence, which is now being discussed more at the interpersonal level and in the media. This is attributed to the difficult psychological state of people in the third year of the war and to greater awareness of this problem.

Perceptions of GBV vary by age, region and experience of participants. Adolescents have a broader understanding of GBV than adults, while adults are more likely to associate it with physical acts. Women from different regions have different perceptions of GBV, with women from the south and east more likely to associate it with physical acts, while women from the west have a more comprehensive view. Women who have experienced abusive relationships have a deeper understanding of different forms of GBV and tend to view it in a holistic way. Men understand GBV as a violation of human rights and as physical, psychological or social aggression directed at a person because of their gender. Some men see gender-based violence as a form of limiting freedom of choice or imposing stereotypical gender roles on men.

Participants in the FGIs pointed to the significant impact of the full-scale war on their values and views and has prompted them to rethink gender roles and the nature of violence. Women become more sensitive to signs of violence and sexism, and more critical of gender norms and stereotypes. Participants in the focus group interviews are becoming more cautious and attentive to signs of violence in their environment and more likely to respond to suspicious behaviour. They are also becoming more courageous and ready to confront the perpetrator, despite social gender norms. Some men are also becoming more empathetic to victims of gender-based violence, especially after war crimes have been made public. However, other changes in men's traditional gender roles are not reflected.

The study of the impact of GBV reveals that most participants do not have sufficient information about the problem. One third of respondents (36%) are unaware of measures to prevent GBV in their communities, while 24% said that nothing has been done in their communities. Adolescents have better access to information through school lessons and other educational activities. Women, especially those who have experienced GBV, are more active in understanding and discussing the topic with their children. However, even in such discussions, the focus is usually on basic safety concepts and rules, rather than a deeper understanding of gender roles and rights.

Participants in focus group interviews point to **challenges in discussing GBV in families. Barriers include lack of awareness of the problem, cultural and religious restrictions, and lack of communication skills on such topics.** Educational activities in schools are an important source of information about GBV for adolescents, but adolescents report that these activities do not cover all aspects of the topic of violence.

It was found that the recognition of gender-based violence depends on its form and situation. Sexual violence is most often recognised by survivors (27% of those who have experienced it), while psychological and economic violence is often not recognised (12% each). Raising empathy and awareness contributes to the spread of awareness of violence. Women and men recognise violence differently.

The majority of survivors of GBV do not seek help for all forms of violence. Survivors are more likely to seek help in situations of physical violence (24 per cent of those who have experienced it) and sexual violence (24 per cent of those who have experienced it), but less likely in other cases. Men are less likely to seek help, except in situations of sexual violence, and residents of the Western and North-Central regions are less likely to seek help, especially in small towns.

The most frequent reason for not seeking help for GBV survivors is that they do not believe that their appeal will change anything or help them (27%), more often than women and adult respondents. 24 per cent believe that GBV is a private matter and should not be reported publicly. This reason was particularly frequently mentioned by men and participants in the older age group (43-60 years), which indicates a potentially higher level of stigma associated with this issue in these demographic groups.

FGI participants identified several key reasons why survivors of GBV do not seek help: fear and shame of the reaction of their environment, **fear of being judged or not heard, and financial and emotional dependence on the perpetrator.** Stereotypes play a significant role in the silencing of GBV, and lack of awareness and zero tolerance for violence in society exacerbate the situation. Some participants identified a tendency to blame the victim for their unwillingness to change their situation, which reflects deeply rooted stereotypes and lack of awareness.

The study also showed that the problems faced by survivors when seeking help include indifference of those whom they ask for help, bureaucracy, lack of qualifications among specialists and fear of being accused of provocation. Women are more likely than men to report these problems, underscoring the gender-specific challenges associated with GBV.

Among the key causes of GBV, respondents see the impact of the general situation, living conditions (42%); or character/mental traits (40%). These reasons are more often mentioned by adult respondents, aged 18-60. Discussion of situations of GBV points to a wide range of factors that contribute to and normalise violence in society - stereotypes, expectations and prejudices imposed by society in relation to gender roles. It also refers to traditional, patriarchal and religious upbringing, childhood experiences of violence, inequality and power in relationships, as well as the influence of cultural and social factors that contribute to the emergence and normalisation of GBV. Women and girls are more likely to focus on the systemic causes of GBV, such as stereotypes and gender inequality, while men and boys are more likely to emphasize other factors, such as stress or loss of control.

The opinions of the survey participants on the circumstances that can trigger GBV differ according to gender, personal experience and awareness of the issue. Almost half of the respondents indicate bad habits (41%), one third - lifestyle (34%), and the desire for self-assertion (21%). It is noteworthy that 22% of respondents mentioned provocative behavior, and this alternative was more often chosen by men and adult respondents aged 18-60. Some participants strongly believe that there are no specific situations that can trigger GBV, as the perpetrator is to blame.

The level of awareness of protection for GBV survivors is quite low and uneven among the study participants, especially among men. Most FGI participants show a general understanding of the need for legal protection from physical and sexual violence, but the details and mechanisms of this protection remain unclear. Some women are well aware of available resources, while others are not aware of them at all or have limited information. Most men believe that all the information they need can be found on the Internet or by asking relatives, friends or the police, but the perception that legislation and support systems are ineffective remains widespread.

FGD participants pointed to many barriers that complicate access to support services: irrelevant information channels, lack of specialists and services in small communities, and insufficient publicity and advertising about existing services. This results in many potential victims not even knowing about the availability of support or having limited access to it.

Vulnerability to GBV can affect different social, ethnic, age and other categories. These groups include children, adolescents, the elderly, low-income people, ethnic minorities, internally displaced persons, women on maternity leave, unemployed women, women living in rural areas and others. Stereotypes, discrimination and prejudice often make these groups more vulnerable to abuse and violence. **The group that almost half of the respondents believe to be the most vulnerable and in need of additional support is adolescent girls (46%).** The next most vulnerable categories were children in general (32%), a third of respondents mentioned children from low-income families in difficult life circumstances (30%), and a fourth of respondents mentioned LGBTQ+ people (25%). **Vulnerability to GBV can be exacerbated when two or more characteristics overlap. For example, a low-income woman living in rural areas and on maternity leave may be more vulnerable than another woman.**

In summary, the study reveals various aspects of violence and its connection to various demographic and social factors. The main differences in the prevalence and nature of violence were identified by gender, age, region of residence, displacement status and family financial situation. Women are more vulnerable to various forms of violence, including psychological and sexual violence, harassment and persecution, compared to men. Differences in the experience of violence are also observed by age group, where middle-aged people are more likely to have experienced psychological violence and harassment. It was also found that the level of family income and vulnerability directly correlates with the risk of experiencing violence, with low-income and vulnerable people having higher risks of all types of violence.

According to the study participants, any form of violence has a negative impact on the health and psychosocial well-being of victims. It is impossible to say that any form of violence is more or less traumatic, as trauma may not manifest itself immediately but over time. Women show a broader and more comprehensive perception of the consequences of GBV, while men tend to see only one aspect of the consequences. A variety of consequences of GBV are reported, including psychological, physical, sexual and social. For women, the psychosocial health consequences of GBV include the development of mental health problems, loss of trust and social isolation. In general, the first reaction to violence is confusion, but subsequent coping mechanisms may vary depending on the form of violence and the victim's experience. For most men, the consequences of violence do not affect their daily lives, with the exception of sexual violence. For women, the consequences of any form of violence are more significant.

The general opinion of the study participants is that in situations of GBV, it is important to act rather than ignore the situation. At the same time, those who have experienced GBV point out that it is often difficult for survivors to make decisions and take action. The main idea that emerges among the participants is that it is important to acknowledge and accept the problem in the first place. When discussing the next steps in a situation of GBV, there is no clear understanding for everyone about where to go and how to act. According to the results of the quantitative survey, the majority of respondents indicated that they would turn to family members and friends. The third place is given to the police, and less than 10% of respondents would definitely turn to the state services and shelters, but a third of respondents would consider them. There is a certain reluctance to use the services of these organisations.

In general, although there are positive trends in the current response to GBV and the provision of support for victims, there are serious problems. In particular, key informants point out that the situation with regard to GBV in Ukraine is complex, with chaotic responses and a lack of coordination between different actors, including governmental and civil society organisations. Information about available support services for GBV survivors is insufficient, especially in rural areas. Stigma and stereotypes among response and assistance workers themselves also remain a problem. Public awareness of GBV and the availability of free psychosocial support is growing. However, these changes have not yet reached the national level and have not solved all the problems in the system.

Recommendations

Based on these findings, the following are key recommendations for raising awareness of GBV among all members of society and improving the effectiveness of the response system:

Expanding the understanding of GBV:











Deepen discussion and education about psychological, economic and physical, sexual gender-based violence. This is important to overcome stereotypes and increase awareness and capacity to recognize GBV. Training for parents on how to talk about GBV for different ages of children, with specific attention to topics of priority by age group beginning with infants and throughout child development including adolescence. Active educational work with social and behavioral thinking adapted to different socio-demographic groups is necessary to support victims in understanding that violence is not their fault, that it is not normal and that it is not just "part of the culture".

Adaptation of educational programs: Taking into account regional and age differences in the development of educational programs to reach students more effectively. Raising awareness of GBV among the population through educational initiatives that focus on applied knowledge and skills to recognize different forms of GBV.

Increase awareness of and access to support services: Make information about psychological and legal support services more accessible, in particular in rural areas and places of contact with vulnerable populations (e.g., for contact with adolescents - in schools; for contact with women - in stores with goods for women (cosmetics, etc.), perinatal centers, etc.; for contact with older people - in social services, post offices). Increase the visibility and publicity of existing resources for GBV survivors.

Increase empathy and support: Encourage the development of empathy and understanding of the problem of gender-based violence among men and the general population. Promote initiatives aimed at increasing willingness to help and openness to talk about GBV.

Improving the response and support system: Increase coordination between governmental and civil society organizations for an effective response to GBV. Reducing stigma and prejudice among response and support workers.

Increase awareness of the impact of GBV: Increased awareness of the health and psychosocial impacts of GBV. Recognize the complexity of the impacts and develop initiatives to address them.

Increase the efficiency of the judicial system: Ensure that GBV cases are dealt with promptly and fairly, and that the rights of survivors are protected. Increase confidence in the justice system through professional development and further specialization of GBV support workers in specific forms of GBV.



Content

1. Executive Summary	2
Key findings	3
Recommendations	6
Content	8
2. Introduction	10
2.1. Background and context of the study	10
2.2. Overview of GBV in Ukraine	12
2.3. Purpose and objectives of the study	13
3. Study Methodology	14
3.1. Socio-demographic profile of the survey study participants	15
4. Perception on GBV	16
4.1. Perception of GBV by adolescents and adults	17
5. Situational and contextual analysis of GBV	24
5.1. Recognising GBV	25
5.2. Sources of information on GBV	35
5.3. Situations/places of GBV	37
5.4. 'Hidden' GBV	39
5.5. Portrait of the perpetrator	43
5.6. Impact of war on GBV	
5.7. Underlying and Contributing Factors to GBV	48
5.8. Barriers to accessing support for GBV survivors	

6. Prevalence of GBV. Vulnerable groups	58
6.1. Prevalence of different forms of GBV	59
6.2. Vulnerable groups	62
7. Socio-demographic differences and risk factors	66
7.1. Socio-demographic differences in the experience of GBV	67
8. Impact and effectiveness of GBV response mechanisms	72
8.1. Consequences of GBV (assessment of the impact of GBV on psychosocial well-be health status and coping mechanisms)	
8.2. Coping mechanisms	75
8.3. Evaluation of current GBV response mechanisms and their effectiveness	77
9. Challenges and gaps in existing support systems for GBV survivors	82
9. Challenges and gaps in existing support systems for GBV survivors	
	83
9.2. Request to address gaps in assistance to GBV victims	83
9.2. Request to address gaps in assistance to GBV victims	83
9.2. Request to address gaps in assistance to GBV victims	83
9.2. Request to address gaps in assistance to GBV victims	88
9.2. Request to address gaps in assistance to GBV victims	83
9.2. Request to address gaps in assistance to GBV victims	83
9.2. Request to address gaps in assistance to GBV victims	88

2. Introduction

2.1. Background and context of the study

As of May 2024, Ukraine is going through one of the most difficult periods in its history. **The war, which was started by Russia in 2014 and subsequently escalated into a full-scale Russian invasion in 2022, has had a significant negative impact on the entire population.** During this time, more than eight million Ukrainians have been internally displaced, 60 percent of whom are women and girls¹, that put them at risk of exploitation, human trafficking, sexual violence and psychological trauma.

Over the two years of full-scale war, the country has undergone a number of profound social changes that point to the need for a national all-Ukrainian study on gender-based violence (GBV). Among these changes, the following have emerged as the most acute:

War and violence: The prolonged war has increased the risks of various forms of GBV, including domestic violence, sexual exploitation, violence based on sexual orientation and human trafficking.² According to the UN,3 since the beginning of the war, 15% of Ukrainian women have reported sexual violence by the Russian military. Women who remained in the war zones are also at increased risk of domestic violence and abuse.

Economic instability: Reduced household incomes and general economic instability increase the risk of domestic violence. According to the State Statistics Service of Ukraine, the unemployment rate among women in Ukraine in 2023 was 9.7%, which is 1.5% higher than among men.⁴ Women who are unemployed due to business closures or forced displacement are particularly susceptible to violence and exploitation.

Access to services and support: According to the UN⁵, only twenty percent of Ukrainian women who have experienced sexual violence have received the necessary medical care. Women and girls also have limited access to psychological support, education, legal advice, and other necessary services. This study aims to identify gaps in the response to violence and improve support mechanisms.

Role models and gender equality: Due to the war and the mobilisation of women for military service, perceptions of gender roles in Ukraine have changed. Since the start of the full-scale invasion, the number of women who have joined the armed forces to defend Ukraine has increased by 40%. Today, there are 43,000 female soldiers in the Armed Forces, which is almost three times more than in 2014,⁶ says Olena Zelenska. Nevertheless, stereotypical ideas about the role of women in care work are widely held in Ukrainian society. The study examines how these changes affect gender equality and the perception of women's role in society.

- 1 UNDP, War and Humanitarian Impact Assessment (June 2023) https://www.undp.org/sites/g/files/zskgke326/files/2023-09/undp-ua-hia-ukr-2.pdf
- 2 CARE, Rapid Gender Analysis Ukraine (October 2023) https://www.careevaluations.org/wp-content/uploads/RGA_ Ukraine_2023_ENG.pdf
- 3 UNDP, War and Humanitarian Impact Assessment (June 2023) https://www.undp.org/sites/g/files/zskgke326/files/2023-09/undp-ua-hia-ukr-2.pdf
- 4 https://suspilne.media/621631-u-nacbanku-nazvali-kilkist-zareestrovanih-bezrobitnih-v-ukraini/
- 6 https://www.radiosvoboda.org/a/genderna-sytuatsiya-v-ukraini-voennoho-chasu/32696907.html

Vulnerability of the internally displaced people: According to the IDPs Accommodation Coordination and Management Cluster, as of October 2023, more than 111,500 internally displaced persons are living in temporary accommodation with minimal humanitarian standards. Gender-based violence remains a serious risk in these places, which raises the need for measures to prevent and respond to GBV, as well as sexual and reproductive health services.

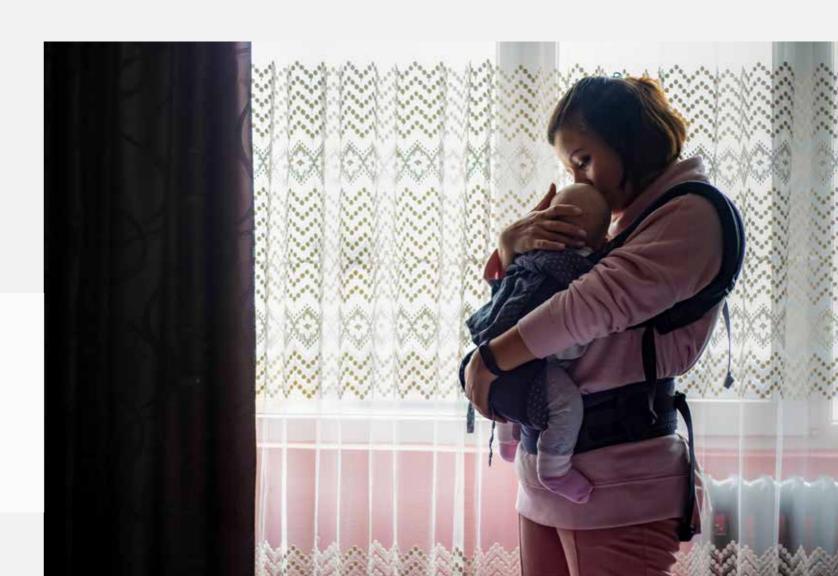
There is also **a lack** of up-to-date data on GBV in Ukraine:

- Awareness and prevalence of various forms of GBV
- The impact of GBV on the psychosocial well-being of survivors
- Experience of GBV among adolescents and men
- Effectiveness and relevance of existing services to the needs of survivors

This problem has a number of consequences:

- It complicates the development and implementation of effective preventive measures against GBV
- It complicates access to necessary support for GBV survivors
- It prevents a full assessment of the scale of the problem and its impact on Ukrainian society

The above points indicate the importance and timeliness of the study, as it is important to provide as much support as possible where we can, and if the hostilities do not end in the near future, at least to reduce the traumatic and tragic experience of gender-based violence, which is increasing as a result of the war. Previous studies have focused on violence against women only, while it is important for us to analyze the understanding and prevalence of different forms of GBV among different groups: adolescents and adults, men and women.



2.2. Overview of GBV in Ukraine

Brief description of the current situation regarding GBV

All these tragic events could not but leave a mark on the topic of violence. I am convinced that today, when Russia commits terrible crimes against civilians and commits violence and murder, we as a society should not tolerate and hide domestic violence in families, said Kateryna Pavlichenko, Deputy Minister of Internal Affairs of Ukraine.

Thus, as of 2023, the number of reports of domestic violence has increased. 'Protection monitoring shows that the risks of GBV for women, men, boys and girls have increased due to lack of independent access to livelihood; violence, harassment and abuse in the family; limited access to specialized services to prevent GBV due to lack of awareness caused by mass displacement, destroyed infrastructure and reduced capacity of public services to provide quality support on sexual and reproductive health.

Gender-based violence (GBV) is a serious problem that has a significant impact on the lives of people, especially women and girls, in Ukraine. Gender-based violence remains one of the most acute problems in Ukraine. According to the UN⁸, 38% of Ukrainian women have experienced physical or sexual violence by a partner in their lifetime. In times of war, the risk of GBV increases significantly.

• Key challenges and issues faced by women and girls, especially in conflict-affected areas

Women and girls in conflict-affected areas face many challenges, including an increased risk of sexual violence and exploitation, limited access to education and healthcare, and systematic violations of their rights and freedoms. As a result, they need effective support and protection to ensure their safety and well-being.

The situation is further exacerbated by the limited humanitarian access in the frontline areas where the fighting continues. Artillery and missile attacks kill civilians and destroy civilian infrastructure, including hospitals, educational facilities, spaces for children, residential buildings and humanitarian facilities, making it difficult for people, especially vulnerable groups, to access essential services and preventing the provision of life-saving humanitarian assistance.

Displacement, escalating violence, military activity and damage to social infrastructure create an environment where women and girls are more vulnerable to gender-based violence in public and private areas. Vulnerable groups that face increased risk include IDP women, refugees, women with disabilities and members of ethnic minorities. In addition, in such situations of mass evacuation, the risks of labor exploitation and trafficking increase.

- 7 Дівоче медіа
- 8 https://news.un.org/en/story/2022/09/1127391
- 9 The NGO Internews Ukraine, with the support of UN Women, conducted an assessment «Виклики, з якими стикаються постраждалі від війни в Україні молоді жінки».

2.3. Purpose and objectives of the study

The purpose of the study is to obtain the necessary analytical basis for the development of targeted programmes aimed at preventing and combating gender-based violence (GBV), including identifying cases of GBV, increasing the number of victims requests for help and providing comprehensive support to adolescents and adults who have experienced various forms of GBV. In addition, the study aims to support the necessary improvements in the GBV response system.

Objectives of the study:

- · To identify current perceptions of forms of GBV among adolescents and adults
- · Perceptions of GBV among adolescents and adults
 - How adolescents and adults currently perceive different forms of GBV in their community
 - How does this differ across different regions of Ukraine (location/urban/rural/socio-economic status/education)?
- Situational/ contextual analysis of GBV
 - What are the different situations associated with different forms of GBV, and how do their dimensions/characteristics and contextual nuances contribute to a general understanding of these situations?
- · Analysis of the prevalence of GBV
 - What are the prevalence rates of different forms of GBV among adolescents and adults, and how do these rates differ across different demographic groups?
- · Risk factors for GBV
 - What factors contribute to increased risk of violence in the community, and how do these factors intersect in the context of GBV?
 - Vulnerable groups at risk of GBV
 - Who are the vulnerable groups in the community that may be more susceptible to GBV and what characteristics/factors contribute to their vulnerability
- The "hidden" nature of GBV
 - Why do victims of different ages and genders not report about violence against them, and what factors contribute to the normalisation of such experience?
- Assessment of support for survivors of GBV
 - What is the level of awareness and perceptions of the target group about existing support mechanisms/infrastructure for GBV survivors, and what are the main barriers to reporting GBV cases?
- Mechanisms for coping with GBV
 - What are the individual coping mechanisms used by adolescent and adult survivors of GBV, and how do age and gender affect these coping strategies?
- The impact of GBV on health
 - How do different forms of violence especially different forms of GBV affect psychological and physical health?
- · Effectiveness of existing mechanisms for responding to GBV
 - How effective are the existing mechanisms for responding to GBV, and how do support needs differ between survivors and perpetrators?

3. Study Methodology

The following methodological tools were used to conduct this assessment of needs:

A desk review and analysis of available data and information on the issue of gender-based violence in Ukraine before and after the invasion, as well as the broader humanitarian situation faced by Ukrainians across the country since the full-scale invasion.

Focused group discussions (FGDs) (96 participants) with semi-structured questions covering topics outlined in the study objectives and conducted separately for women (18-60 years old), men (18-60 years old), girls (13-17 years old) and boys (13-17 years old).

- FGD design: During the qualitative stage of the study, a total of 16 FGIs were conducted with boys and girls aged 13-17, women and men aged 18-60, with equal representation of the oblasts of the 3 macro-regions of Ukraine (Kyiv+North (6 FGIs), West+Centre (5 FGIs), East+South (5 FGIs)) and different types of settlements (cities with over a million inhabitants (7 FGIs), cities of oblast significance (6 FGIs), and villages (3 FGIs)). In particular, 3 FGIs were conducted with girls and boys aged 13-17, 3 FGIs with women aged 18-25, 3 FGIs with women aged 26-45, and 1 FGI with women aged 46-60. Also, 1 FGI with men aged 18-25, 26-45, 46-60. (see Table 1: FGD design)
- Selection: The general selection criteria for participation in the FGDDs were applied to fairly represent the views of men, women, girls and boys from different regions, living in rural and urban areas. The focus was placed more on adolescent girls, young and middle-aged women across the study geography, as these social groups are more vulnerable.
- For adolescents, it is mandatory to agree on participation with parents and sign an informed consent

KIIs (19 participants) were administered using a semi-structured interview guide with similar data constructs as in the focused group interviews. The participants included women and men with experience of gender-based violence (6 persons); representatives of community leaders; human rights defenders; representatives of relevant NGOs; representatives of response actors - educational institutions, police, social services; psychologists working with GBV victims (see Table 2: KII design).

Selection: The selection criteria for key informants were based on their experience with GBV and their readiness to discuss it, and GBV specialists with professional background in the field. Regional representation of opinions was also considered. Men who have suffered from GBV are often not ready to share their experience, and that is why KIs were predominantly women. While efforts were made to include diverse perspectives, the gender distribution is not proportional, but men's opinions are still represented.

Online survey (2,800 respondents) A Touchpoll® technology-enabled online survey gathered responses from 2800 men and women (aged 18-60 years old), girls and boys (aged 13-17 years old). The survey questions were informed by the results of KIIs and FGDs, incorporating their frequently mentioned responses as answer choices for the survey participants (see Table 3: Survey design).

Selection: representative data proportional to the population of Ukraine, including IDPs, returnees and non-displaced people in urban and rural areas. The quota was applied according to the age of both adolescents (aged 13-17) and their parents.

23,837,416¹⁰. 1200 for adolescents (aged 13-17), 95% confidence level, 3% confidence interval, total number ~

1600 for adults (aged 18-60), confidence level - 95%, confidence interval - 3%, total number ~

2051174.

Study tools: FGD/KII guidelines and quantitative online survey tools were developed and implemented in Ukrainian and translated into English.

Period: Data collection took place in February and March 2024

In order to count survivors of different forms of GBV, the quantitative survey questionnaire included separate questions for situations of each form of GBV. The questions were formulated as follows: How often have you experienced the following situations in the past year from people of the opposite gender? Use for answer - "never" "occasionally" "frequently". The list of situations for each form of GBV in the questionnaire is provided in Annex. To understand the prevalence of forms of gender-based violence, we formed variables where we grouped respondents' answers about GBV situations. Thus, if at least one situation happened to a respondent "Sometimes" or "Often", we coded this answer as having experienced violence.

3.1. Socio-demographic profile of the survey study participants

Profile of participants in the quantitative phase of the study. A total of 2,800 respondents aged 13-60 were interviewed. The survey sample is evenly represented by gender - 49.9% are women, 50.1% are men. Age groups are also represented: adolescents aged 13-18 - 40%; adults aged 18-60 - 60%. The oblasts of the four macro-regions and different types of settlement structures are equally represented: urban - 70%, rural - 30%.

The survey participants include internally displaced persons (6%), those who have experienced displacement but have returned home (22%), those who survived the occupation and hostilities without leaving their homes (12%), and those who did not leave and did not have any active hostilities at home because they live far from the front line (60%).

The following vulnerable categories are represented among the survey participants: families in difficult life circumstances (15%); families affected by the war (8%), families who lost their homes (3%), families with children with disabilities and special educational needs (3%), and pregnant women (1%). The remaining families (74%) do not belong to the category of vulnerable.

In terms of income, almost half of the respondents have enough money to cover basic and some additional needs (42%), every tenth has insufficient income - not enough to cover basic needs (11%), and only 8% of respondents live in full prosperity.

In terms of marital status, almost half of the adult (aged 18 - 60 years old) survey participants are officially married (46%), live together but are not married (15%), every tenth participant is divorced (10%), single/unmarried (13%), widowed (6%), and single mothers/fathers make up 2%.

In terms of employment status, 32% work in the private sector, 23% in the public sector, 9% own their own business, 12% are unemployed, 10% are studying, 4% are on maternity leave, 3% are single mothers, and 63% of young women/women in the sample are employed.

In terms of education, almost half of the surveyed participants have higher education (49%), 12% have incomplete higher education, 33% have secondary specialised education, and 6% have incomplete secondary education.

Detailed information about the profile is provided in the appendix Diagrams: Sociodemographic profile of the survey study

¹⁰ http://db.ukrcensus.gov.ua/PXWEB2007/ukr/publ_new1/2021/zb_rpn21_ue.pdf

GENDER-BASED VIOLENCE IN UKRAINE AMID WAR:

4.

Perception on GBV

f @lectures4girls

🔀 @godivchata

@godivchata

@godivchata

in www.linkedin.com/company/ngo-girls



NGO Girls is an all-Ukrainian women-led non-governmental organization that has been supporting women and children in Ukraine for 5 years providing a wide range of psychological, legal, and humanitarian assistance, and promoting the visibility of women's leadership in Ukraine.

The main areas of our work in the field of gender-based violence (GBV) are prevention of GBV through comprehensive educational projects aimed at children and youth, advocacy for implementing comprehensive sexuality education in Ukrainian schools, and psychological support for people affected by any form of violence.

The NGO Girls creates and develops safe spaces for women and girls nationwide.

The organisation's psychologists provide comprehensive assistance to girls and women who have experienced various types of violence in person, online, and in the format of mobile teams. The organisation operates a psychological hotline at 0 800 600 044 supplemented by chat support.

To build capacity to combat GBV, NGO Girls conducts training sessions, webinars, and workshops for local authorities, social services, law enforcement, and humanitarian actors.

4.1. Perception of GBV by adolescents and adults

According to the results of focus group interviews, men's and women's spontaneous perceptions of violence are primarily associated with physical violence - hitting, beating, and anything that has visible consequences. The participants explained that they perceive violence in this way because of the generally accepted notion of violence in the society, which is now reinforced by the war and through their own personal experiences.

When further discussing gender-based violence, the participants emphasized psychological violence, noting that psychological violence is now becoming more prevalent, and that it is now more talked about, both at the interpersonal level and in the media. According to the participants, this is due to the difficult psychological state of people in the third year of the war. Some participants, based on their experience, suggest that this may be due to greater awareness - psychological violence is becoming clearer and easier to identify due to wider discussion of the topic. During the FGDs, certain specifics in spontaneous perceptions of violence were recorded, depending on the age, region and experience of the study participants.

For adolescents, the topic of violence is generally broader than for adults. Along with physical violence, adolescents spontaneously mention psychological violence, namely bullying, and emphasize that psychological violence can often turn into physical violence. Girls tend to characterize violence as coercion to actions that result in bodily harm, and pay more attention to personal boundaries. Boys talk about violence as the use of force against a weaker person.

It is typical that adolescents perceive violence as external, and less often associate it with the family. It is noteworthy that boys more than girls immediately associate violence with bullying. They perceive bullying as harassment, humiliation and physical and moral harm that can occur for various reasons, such as physical appearance, nationality or other characteristics. Some boys perceive bullying as synonymous with GBV. Girls are more likely to equate bullying with a form of gender-based violence, when a person is bullied because of their gender or because of the way they behave - 'not like a woman' or 'not like a man'. According to the girls, bullying and GBV are closely related, and they see common features and causes.

For adult participants, violence is primarily and more consistently associated with physical harm, and secondarily with psychological pressure. There is no common understanding of psychological pressure among the participants, and interpretations vary, including aggressive behavior, insults, devaluation, etc. For adults, violence is also associated with the family - partners and parents.

FGD participants from the east and south of the country are somewhat more likely to associate violence with physical acts, while FGD participants from the western regions have a more comprehensive understanding of violence, which is not only physical.

Women who have had (or are currently in) an abusive relationship with a partner have a deeper understanding of violence, know the manifestations of different forms of violence well, tend to consider violence in a comprehensive manner, not limiting it to physical and/or psychological violence, and also mention financial and sexual violence from their partners, namely coercion.

'Before I was single, I thought that violence was only physical. But for the last three years I have been experiencing sexual violence. Whether you want it or not, you have to have sex. When you have to stand with your hand outstretched and say that you need pads. Psychologically, it's when you sit up at two a.m. and don't sleep because your drunk husband has come home and won't let you sleep." - FGD, women, Kyiv and Bila Tserkva, 26-45 years old

When discussing the understanding of gender-based violence, participants are somewhat chaotic in their definitions, namely, in their use of the concepts of sex and gender. There is no stable and spontaneous understanding of what GBV and gender are. This situation is more typical for adult participants, while adolescents are better able to distinguish the concept of gender in the focus groups (see Table 4: Understanding gender by gender, by age).

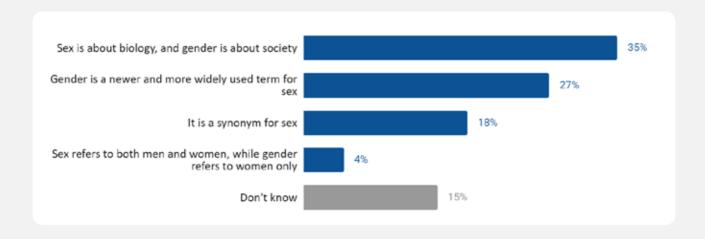
'In short GBV, is something related to gender' - FGD, men, centre, 18-25 years old

According to the survey, **half of the respondents misunderstand what gender is:** 27% believe that gender is a more modern term for sex, 18% believe that sex and gender are synonymous. Another 15% found it difficult to answer the question.

Among respondents, 35% correctly indicated what gender is, there is no difference by gender and age.

Understanding gender

n=2800, single answer



It is noteworthy that women spontaneously define GBV as violence against women, where a man is the perpetrator. Adolescent girls also mention that it can be violence where the perpetrator is a woman and the victim is a man or a woman. Adolescents have a broader understanding of gender-based violence in terms of its perpetrators.

There are also certain **differences in the definition of gender-based violence by women of different ages.** Younger women tend to focus on specific acts of GBV, such as physical violence, psychological pressure or social discrimination. Older women are somewhat more focused on systemic aspects of GBV, such as the impact of gender stereotypes on social structures and institutions, restrictions on rights and opportunities in the professional and social spheres, and the relationship between personal experiences and broader socio-cultural norms.

Men understand GBV as a violation of human rights and as physical, psychological or social aggression directed at a person because of their gender. Some men see gender-based violence as a form of limiting freedom of choice or imposing stereotypical gender roles on men (emphasis on the responsibility to provide for the family). Quite often, in men's opinion, such imposition of views and roles is unjustified. At the same time, younger men tend to understand GBV in terms of sexism and abusive behavior more than older men, who focus on stereotypes of men's role in society.

'It's when someone decides for me what I should do and what role I have in general.' - FGD, men, east-south, 26-45 years old

For boys, the understanding of gender-based violence is mostly focused on the physical aspect. They believe that gender-based violence includes physical violence, where one gender perpetuates violence against the other gender in order to feel powerful or dominant (although they do not exclude discrimination). When comparing perceptions of GBV among adolescents between girls and boys, girls are more likely to pay attention to aspects of gender inequality and discrimination that can be manifested in sexual images, roles and expectations in society. They may be more sensitive to gender issues and more consciously consider them in the context of violence. Boys, on the other hand, focus more on the physical aspect of violence and relationships between the sexes, such as physical subjugation or sexual harassment, and are more likely to consider gender-based violence in the context of the superiority of one sex over the other, although they sometimes also point to socio-cultural norms that define the roles of men and women in society and contribute to inequality and, as a result, violence and humiliation (more often of women).

Some girls and boys indicated that they had a general understanding of GBV, but did not always understand it deeply. In general, their responses indicate that they understand the importance of the topic of gender-based violence, but may have different levels of awareness of the issue.

'I know about this topic, but not in such a deep way. Sometimes, my friends and I raise the topic of gender stereotypes. And for some reason, I noticed that older people usually talk about gender stereotypes." - FGD, girls, west centre

GENDER-BASED VIOLENCE IN UKRAINE AMID WAR:

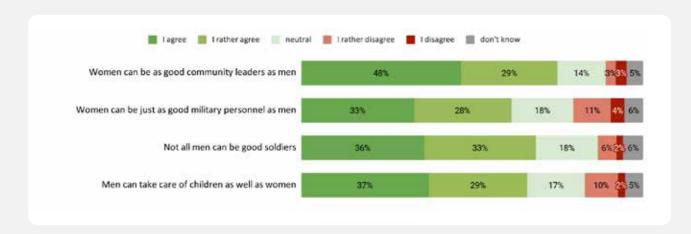
When discussing gender stereotypes at FGDs, women and girls associate them mainly with the female gender, namely that women are more often limited than men in the way they should behave, how to look, what professions to choose and what duties to perform. These limits are manifested in various spheres of life, in the family, among friends, at work, and in public places. Men believe that it is the male gender that experiences more restrictions and imposed expectations in the context of gender stereotypes of perception.

The notion of gender equality is rather unformed for both adults and adolescents in the study. Discussion of gender equality generally goes along the lines of giving various examples of gender stereotypes. The FGD participants mostly try to explain the existence of these stereotypes through the peculiarities of upbringing in the Soviet Union and the instilling of false ideas about the roles of women and men.

According to the survey, the vast majority support the idea that women can be effective in leadership, military service, and men in raising children. However, in practice, these ideas are not reflected to the same extent as in the participants' answers.

Please rate your level of agreement with the following statements

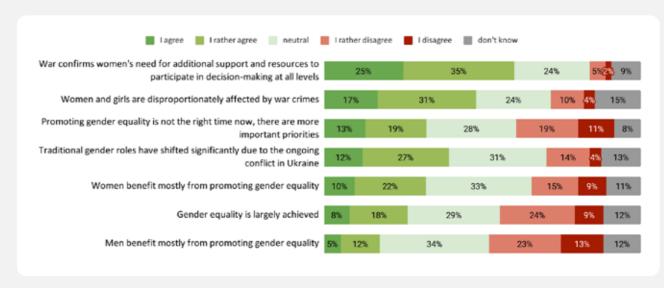
n=2800, one answer in a row



However, the percentage of those who answered 'Neutral' or 'Don't know' reaches almost 50% for statements regarding the situation and changes in gender equality. It is noteworthy that 17% of respondents see benefits of gender equality for men. This is likely due to lack of educational information about the causes of GBV aimed at men, with relevant messages.

Please rate how much you agree with the following statements

n=2800, one answer in a row

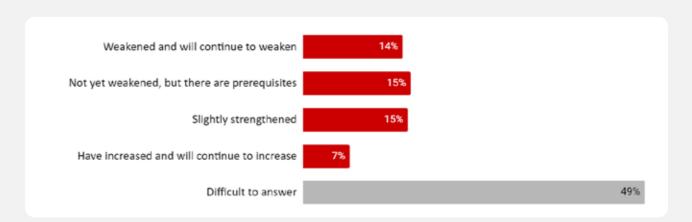


A total of 32% of respondents agree that gender equality issues are not relevant now, there are more important issues, while 30% of respondents rather disagree/disagree with this statement. Men respondents in the regions of the eastern and southern parts of Ukraine, which are currently the frontlines of active hostilities, are more likely to agree that gender equality is not a relevant issue now. At the same time, 60% agree that women need additional support and resources in decision-making at all levels, and almost half agree that women and girls disproportionately suffer from war crimes.

39% of respondents agree or rather agree that traditional gender roles have changed significantly since the beginning of the full-scale invasion. Of these, 49% could not specify how exactly they have changed, it is still difficult to say, and 22% believe that traditional roles have strengthened (15%) and may continue to do so (7%).

How have traditional gender roles changed in your opinion?

% of those who agreed that traditional roles have changed in the previous question, one answer



The participants of the FGD indicate that the full-scale war affects their values and views, in particular, they point to a radical reassessment of their values on various issues. In particular, women say that the war is affecting their rethinking of gender roles and the nature of violence. Women say they have become more sensitive to signs of violence, sexism, and more critical of gender norms and stereotypes.

Among other changes, the participants mentioned the following:

They become more cautious and attentive to possible signs of violence in their environment, and may be more inclined to respond to suspicious behavior or signs of violence. War as an existential threat frees women and girls from the fear of violating social gender norms of being a "submissive, sweet, polite woman/girl", activates the strength to defend their own and themselves - women and girls become bolder, ready to fight back against any offender, although it may not correspond to the gender roles assigned by the environment.

War, according to women, can contribute to increased self-awareness and self-knowledge, which can make women and girls more aware of their rights and dignity, and this can help them identify and respond more confidently to violence in their lives. War can make you question certain behaviors and critically reconsider your attitude towards yourself.

'Many people are beginning to realize that it is wrong and it should not be like this, GBV survivors are supported and not blamed. I don't think there are more of these problems. Survivors have started to realize that they are victims.' - FGD, women, east-south, 18-25 years old

These changes were emphasized more by women than men. Some men mentioned that they had become somewhat more empathetic towards GBV victims, especially after the disclosure of war crimes against women and children in Bucha, a part of Kyiv region. However, they do not mention any other changes in traditional gender roles as a result of war.





AN ASSESSMENT REPORT

5. Situational and contextual

analysis of GBV

World Vision's humanitarian response to the crisis spanned four countries working with partners in Ukraine, Romania, Moldova and Georgia, providing for the needs of over 1.8 million people, almost half of them are children. These include the internally displaced, refugees and host families. A new humanitarian player in Ukraine, World Vision works with 17 partners across 24 regions and has assisted over 1 million internally displaced coming from the frontlines.

World Vision operates in Romania for more than 30 years, and delivered assistance on the first weeks of the war. The response supported more than 319,000 refugees, host families and institutions through 5 partners in 18 districts.

Moldova rose to welcome refugees where World Vision was registered to operate in May 2022. Supported by 9 partners in 33 districts, World Vision assisted over 337,000 refugees and host families and is the sole partner of the World Food Programme's cash program in 18 districts.

World Vision is one of the leading advocates on children's rights in Georgia with over 20 years of work in the country. It has been providing assistance to over 29,000 Ukrainian refugees in four districts.

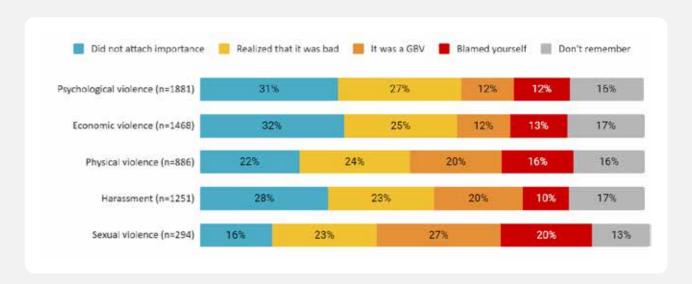
5.1. Recognising Gender-Based Violence

Recognising GBV depends on the form of violence and the situation. If it is rape or bodily harm that may result in bruises, wounds, cuts, other visible injuries and pain, it is generally understood as violence. Recognition of other situations of gender-based violence depends on the processed experience of GBV, as well as on the depth of awareness of GBV, which also depends on the experience of GBV or professional work related to that area.

During the survey, we asked how people who experienced at least one form of gender-based violence (GBV) in the last year perceived these situations. Thus, people recognize situations of sexual GBV best of all (27% of those who have experienced it) and have the greatest difficulty recognizing situations of psychological GBV (12% of those who have experienced it) and economic GBV (12% of those who have experienced it). One third of respondents consider situations of psychological and economic GBV to be commonplace and do not pay much attention to them, while another third understand that it is negative but do not analyze the events in detail. Psychological GBV is the most common form of GBV, but it is difficult to recognize.

Recognising of forms of GBV

% of those who experienced at least one situation of each form of GBV in the last one year, one answer in a row



FGD participants indicate that they track the dynamics of their understanding of different forms of violence. Sometimes women say that they have only recently become aware of other (non-physical) manifestations of violence - through their own experience as victims of violence or through the experience of their friends. Interestingly, there is a similar vector of perception of violence among men but it is typical for the younger group (probably due to greater involvement in the digital environment and contemporary mass culture) and for the older group (probably due to greater life experience).

According to the participants' stories, the following circumstances influence the broadening of understanding of GBV situations:

- General increase in empathy and sensitivity to victims of violence
- · Transformation of gender images from more polar to less polar
- Increased awareness in recent times ('recent times' is not specifically mentioned, they indicate that they mean the last year, and also mention the 16 Days of Activism against Violence campaigns, but here it is more about paying attention and focusing on communication)

Recognition of psychological GBV

Regarding psychological GBV, it was more difficult for the participants to spontaneously identify situations of psychological violence. Generalized ideas dominate - words, behavior that cause moral harm. During further discussions, the participants elaborated on the situations of psychological GBV, prompted by the participants who had their own experience of GBV or examples in the lives of those they know. It is possible to trace the specifics of recognizing psychological GBV depending on age and gender

Women during the FGDs identify psychological gender-based violence as any action or behavior that
leads to a negative impact on the emotional state (perceived as a situational condition), psychological
trauma (perceived as a more complex, long-term condition) and the victim's feelings. It can be
expressed as control, restriction of freedom of choice and expression, devaluation of a woman and
her personal achievements in any way, demanding a certain standard, disparaging comments or
prejudicial actions, such as attempts to force her to change her appearance or behavior/

"Her boyfriend told her, 'You are fat, you need to lose weight. You don't work anywhere." Well, some kind of moral humiliation, some kind of bullying all the time' - FGD, women, centre, 18-25 years old

- Younger women are somewhat more aware of the various manifestations of psychological violence - they may have experienced it in their own lives (or know of it from the lives of their friends), but they are also interested in the topic because of its wider discussion in the Internet environment and popular culture. This behavior is also partly typical for girls (13-17 y.o.) but with less personal experience
- Older women generally have more personal experience of psychological GBV or the experience
 of their relatives they may lack knowledge about recognising certain features of psychological
 violence (for example, they do not always identify certain forms of devaluation or do not know
 what gaslighting is), but because of their experience, they have certain instinctive features of
 identifying a survivor of violence by certain characteristics of her behavior or changes in behavior
 in general.
- Men recognise psychological GBV as a manifestation of emotional pressure, threats, forced imposition
 of will or blackmail. In the context of psychological violence, men talk about situations where a
 woman or society imposes stereotypes and roles that are considered 'correct' for men and do not
 allow for other options of behavior or thoughts. They perceive situations where women require them
 to perform certain roles or stereotypes as a form of violence. Men also mentioned blackmail with
 sexual relations. Men especially note that these are situations when a woman makes a choice for a
 man and demands that he follow it or financial demands.

'Pressure. If a woman says that you owe me something [...] For example, you have to buy me a bag.' - FGD, men, Western Ukraine, 26-45 years old

 Girls and boys identify psychological GBV as manifested through verbal abuse, criticism, specific behaviors, isolation or social vulnerability. These types of violence, in their opinion, exist in the school environment and can also exist in family and social relationships.

However, all participants agree that psychological violence is more difficult to recognise than physical and sexual violence. According to the women, violence can be recognised through the appearance of self-doubt, lowered self-esteem, feelings of helplessness, devaluation and depression, or even aggressive behavior on the part of the victim, but not in the presence of the aggressor, which can lead to deliberate social isolation when a person feels ignored or excluded from social groups, or excludes themselves to avoid this type of violence.

The participants also mentioned situations of financial GBV as psychological GBV, such as selective financial support and prohibition to work.

'After she got married - her husband is handsome, they have a nice family - he forbade her to work' - FGD, women, east-south, 26-45 years old

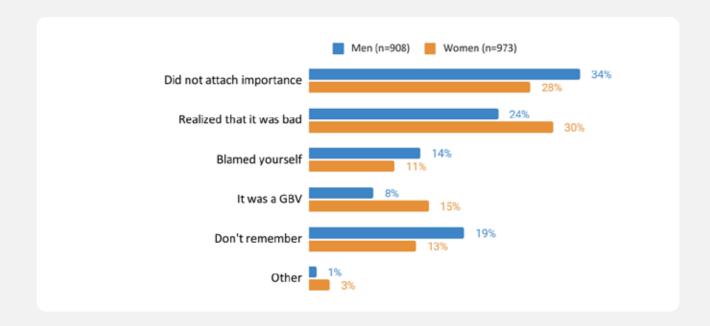
In some cases, women noted the distortion of reality by the abuser to the survivor as a form of psychological GBV after which the victim begins to doubt the adequacy of her perception and distrust her own memory. Informed women even define this as gaslighting. Some women and girls emphasize that a sign of psychological violence is its systematic nature, when it is constantly repeated and develops from smaller to larger, taking over more and more territory of the abuser's psychological control over the victim.

During the survey, 12% of respondents indicated that they perceived the situations of psychological GBV that happened to them as gender-based violence, 31% did not attach importance to the situation, perceiving it as domestic, 12% blamed themselves for provoking physical violence. Women are more likely to perceive such situations as GBV, and men are more likely than women to perceive them as domestic situations, as well as older respondents, 43-60 years old, are more likely than other age groups to perceive psychological GBV as domestic situations (probably influenced by the trauma of living in a totalitarian society where psychological violence - devaluation, harassment, etc. - was part of the state policy) (see Table: Recognising of cases of psychological violence).



Recognising of cases of psychological violence

n=1881, (those who experienced at least one situation of psychological violence), one answer



Recognising financial GBV

FGD participants interpret financial GBV through various situations and patterns of behavior that limit a woman's financial independence, control over her own finances and equality of opportunities in the financial sphere. In the FGDs, participants identify financial violence as wage inequality and restrictions in financial opportunities due to gender stereotypes, as well as control of finances by one partner over the other. It's a kind of 'abuse of finances', where one party controls the financial resources of another and uses them to exercise power over the other party. Refusal of financial support or control over finances, which may include violation of the right to equal participation in financial decisions, refusal to share resources, financial dependence on a partner or even deprivation of one's own finances. There is also a symbiosis of psychological and financial GBV, where financial GBV is more of a tool, but it can also be control of who you talk to, control of interests, etc.

'The money was constantly locked... Everything was locked. And I had no access to it at all.' - FGD, women, Kyiv and Bila Tserkva, 26-45 years old

It can be noted that in the case of the definition of financial GBV, its understanding is mostly the same for women and men. However, situations of financial violence are most often perceived as domestic, not important, when victims blame themselves.

The participants who have experience of GBV point out that financial violence manifests itself when a woman goes on maternity leave or stays on maternity leave for a long time due to the birth of several children. For those who do not have experience of any kind of GBV, this connection is not so obvious. It is noteworthy that in the context of discussing financial violence and maternity leave, the respondents mostly point to the lack of their own money and the loss of qualifications in the labor market due to prolonged maternity leave but do not mention the unequal distribution of unpaid care work, which falls mainly on women. Men in FGDs do not talk about this at all.

'When I was on maternity leave, it was a nightmare, I was completely limited. You have to ask for money for pads or mascara. That's how it was. Even though you get maternity pay, you have to find some additional income, a part-time job.' - FGD, women, east-south, 26-45 years old

Among other situations of economic GBV, participants mentioned the following:

- Stereotypes that a man should earn more than a woman, and therefore a man has more decision-making rights in the family, his decisions are not discussed
- **Reduction of wages** on the basis of gender, which is more often experienced by women. Men also agree with this but again do not elaborate on the reasons for this situation. However, according to men, there are also opposite situations that occur in women's teams when male employees are restricted from receiving additional financial rewards (bonuses).
- Restrictions on access to work/career development or education, it is the husband who may restrict a woman's ability to get an education or have a paid work to keep her dependent on him.
- Unjustified accusations and criticism due to the use of finances, harassment due to material, financial characteristics or lack of financial resources
- Some women and men identify financial GBV as the exclusion of the opposite sex from joint family expenses or insufficient (unequal) participation in them

There are differences in the perception of financial GBV among women of different ages:

- young women aged 18-25 focus situations where a man restricts a woman's income or work due to
 various circumstances, such as maternity leave or a woman's general financial dependence on a man
 in the family;
- women aged 26 to 45 years pay attention to more general aspects of financial GBV, such as control over family finances, unfair distribution of expenses or pressure on the woman because of her income and financial decisions.

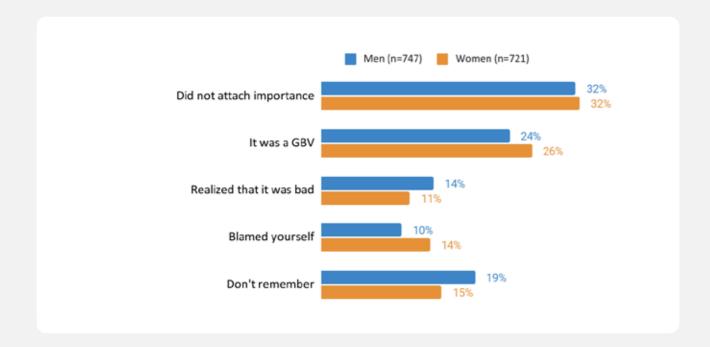
There are also some differences in the understanding of financial GBV between men and boys:

- Boys identify it through situations that do not fit into stereotypical perceptions if a man earns less than his wife, he is a dependent and automatically experiences financial GBV;
- situations of demanding money from a husband by various means explaining that he has it (without focusing on why the husband has it)
- Situations where the wife can spend money on herself while the husband is not allowed to do so because he is responsible for the family
- Men also tend to consider sexual harassment in the workplace as a form of financial GBV, which, in their opinion, is a merging of the two forms of GBV.

12% of respondents indicated that they understood the situations of economic GBV that happened to them as gender-based violence, 32% did not attach importance to the situation, perceiving it as domestic, 13% blamed themselves for provoking financial violence. Women are more likely than men to understand situations such as GBV, but they are also more likely to blame themselves for provoking the situation, and respondents aged 18-42 are also more likely to blame themselves. Older respondents are better at recognizing situations of economic violence than younger age groups (see Table: Recognising of situations of financial violence by age).

Recognising of situations of financial violence

n=1468, (those who experienced at least one situation of financial violence), one answer





Recognition of physical GBV

The participants of the FGD identify physical gender-based violence as **any intentional physical contact or actions that result in bodily harm.**

Women primarily understand such violence as hitting, pushing, pulling hair, stroking without consent. Situations such as controlling behavior, threats and creating an atmosphere of fear are spontaneously mentioned sporadically, usually by those who have experienced GBV. The perpetrator of physical GBV is perceived as a man, while women do not mention situations where a woman can be the perpetrator.

Men consider any use of physical force or control over another person as physical GBV, regardless of gender. Some men point out that physical violence can be used for psychological violence - moral humiliation, imposing opinions or views. Some men emphasize that it is women who use physical GBV in the relationship (sometimes, in their opinion, at the end of arguments in a conflict). At the same time, men perceive such physical violence from women in isolation from the context, mostly without understanding the unequal gender order in society. Also, men do not consider their previous actions, deeds, behavior as provocative for women, while in a situation where a man is the perpetrator, he would say that a woman has provoked him.

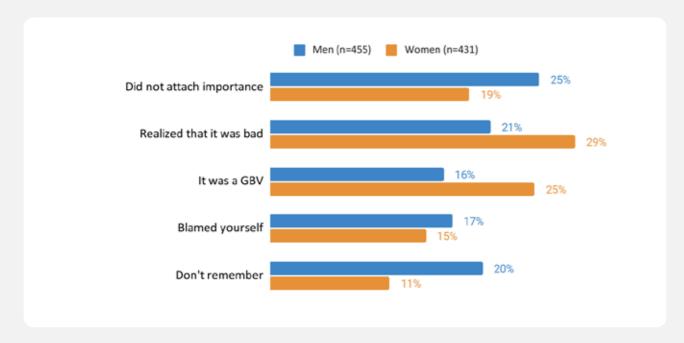
FGD participants did not indicate that inaction can also be physical violence, so it is mostly perceived as an action, a result, the consequences of which are visible, and it is the easiest form of violence to detect. Some participants noted that physical violence can occur not only when there is an injury that is easily noticeable, but also in non-obvious situations, but it was difficult for the participants to give such examples.

In situations of physical GBV, the participants also mentioned unwanted physical contact, even in a joking way, forcing them to act against their will, but they did not give specific examples.

According to the survey results, 20% of respondents indicated that they perceived the situations that happened to them as gender-based violence, 22% did not attach importance to the situation, perceived it as a regular domestic issue, 16% blamed themselves for provoking physical violence. Women more often perceive such situations as GBV, and men more often than women perceive them as domestic situations. The largest share of respondents who recognise physical violence as a form of GBV belong to the 18-42 years old age group. Adolescents are more likely than other age groups to say that they do not remember how they reacted to a situation of physical GBV. (see Recognising of situations of physical violence by age)

Recognising of situations of physical violence

n=886, (those who experienced at least one situation of physical violence), one answer



Recognising harrasment and sexual GBV

Among the key associations with **sexual violence** are **harassment**, **molestation**, **unwanted touching**, **rape**, **forced sexual intercourse and sexual assault**. Women and girls point out that it's unfair to blame the victim in such situations and say that it's her fault, and boys are also aware of this to some extent. First of all, they associate **sexual GBV** with rape and forcing somebody to have sexual intercourse.

'The most important thing is rape. Or when, and everyone remembers it from last year, children at school caught a girl and forced her to have oral sex.' - FGD, men, west, 46-60 years old

FGD participants also mentioned the following situations as sexual GBV:

• Accidental and intentional touching, violation of personal boundaries - unwanted touching, reported only by women and girls

'Unwanted touching is sexual violence, you are around some people, and a stranger starts touching you, accidentally, on the bum, on the legs' - FGD, women, west, 26-45 years old

Participants identify sexual harassment as unwanted sexual proposals, intrusive or forced requests
for intimate relations, initiation of non-consensual sexual acts, as well as virtual sexual violence sending inappropriate messages, photos or videos, blackmailing with sexual content or using social
media to threaten or bully.

- **Emotional/psychological sexual violence** denial of the right to free choice in sexual situations, emotional abuse, psychological pressure or threats of physical violence to perform sexual acts, as well as the use of financial dependence to control sexual acts, such as blackmail or threats of financial loss.
- There is an understanding that this also includes non-consensual sex within marriage, unprotected sex without the consent of the couple, with the possibility of getting pregnant. However, only some participants refer to these situations as sexual GBV.

Girls and women are perceived as victims of sexual violence, primarily. Men talk about sexual GBV more hypothetically than as a relevant experience.

"When men are forced to do certain things they don't like or don't feel good about doing. If we talk about gender equality, we can talk in two directions." - FGD, men, west, 46-60 years old

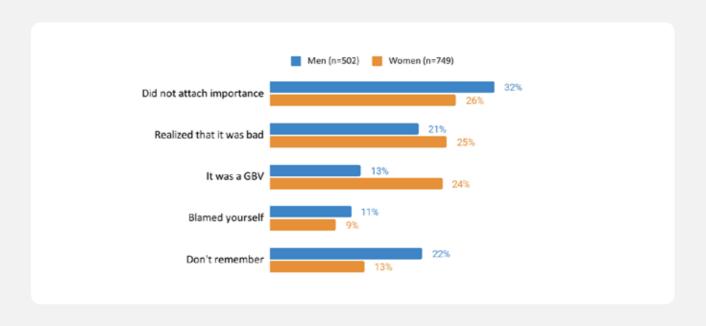
The main differences in the perception of sexual GBV by gender:

- Men and boys tend to focus more on the physical act of sexual GBV, such as the act of rape itself or sexual harassment, while women and girls may consider the broader context of sexual violence, such as the social and psychological consequences, impact on self-esteem and mental health.
- Women focus more on coercive aspects of sexual violence such as being forced to have sex without their consent, while men focus on the act of rape.
- Some of the men's responses pointed to the possibility of sexual violence perpetrated by women against men, but this is less addressed in their opinion. They have not experienced it themselves.

Harassment is recognized somewhat worse than sexual violence, but better than psychological and economic GBV. 20% of respondents who had experienced harassment indicated that they understood these situations as GBV, 28% did not attach any importance to the situation. In this case, the least often (compared to other forms), victims consider themselves guilty and provocateurs in the situation (10%). Women are much more likely than men to understand such situations as sexual gender-based violence, and men - as domestic situations, or did not remember their feelings in a situation of harassment. Adolescents are somewhat more likely to say that they do not remember how they perceived the situation.

Recognising of situations of harassment

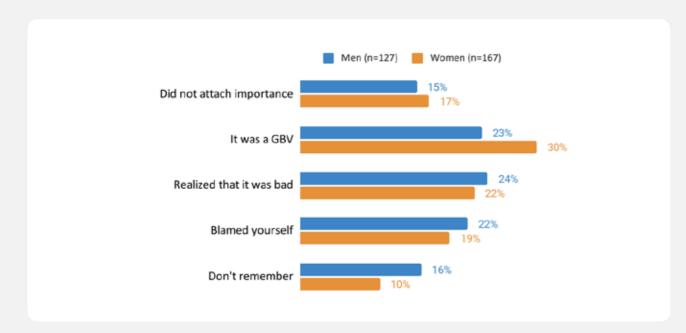
n=1251, (those who experienced at least one situation of harassment), one answer



27% of respondents who have experienced sexual GBV at least once in the last one year indicated that they understood situations of sexual GBV that happened to them as gender-based violence, 16% did not attach importance to the situation, 20% blamed themselves for provoking sexual violence. Women are more likely than men to understand such situations as sexual gender-based violence, while adolescents are more likely than other age groups to blame themselves for provoking a situation of sexual violence. It is noteworthy that men are more likely than women to indicate that they do not remember how they perceived the situation, or probably did not attach importance to it.

Recognising of situations of sexual violence

n=294, (those who have experienced at least one situation of sexual violence), one answer





5.2. Sources of information on GBV

The FGD participants who had experienced GBV intentionally sought information about the causes, forms, and how to recognise it. All the others did not seek detailed information about the problem, did not understand it, except for adolescents, who periodically receive lessons and lectures on this topic in educational institutions.

According to the results of the quantitative survey, one third of respondents (36%) are unaware of measures to prevent GBV in their communities, while 24% indicated that nothing was done in their communities. Men and older people are somewhat more likely to be aware of this. Therefore, more than half of the respondents have not been professionally informed about the problem of GBV.

Adolescents have relatively better access to information - they receive information about GBV at school lectures (21%). Information campaigns on social media are known to 15% of respondents, more often among women 18-42 y.o.. Information events and training organized by NGOs are known to 10% of respondents, mostly women. Outdoor social advertising was mentioned by 10% of respondents, mostly young people. The data itself shows the level of visibility of preventive measures against GBV among people. These indicators do not indicate whether respondents attended these events (see Tables Measures to prevent gender-based violence have been taken in the community/city in the last year).

We also discussed at the FGD whether and how respondents discuss gender-based violence at home. Some FGD participants indicated that they have discussed GBV with their children and consider it necessary to discuss this topic from an early age, and are open to discussing their children's issues. Men, like women, also believe that it is most effective to start talking about GBV with children from an early age, but, for example, from the age of 6-8. Some say that it is better to have such conversations later, from the teenage years when they are around 14 years old. At the same time, men also point out the importance of a gradual approach to this topic.

However, the examples of discussions of gender-based violence that participants give are more about basic things, namely, "not to fight", "not to hit girls", "not to go out at night", but there are also conversations about freedom of choice - that there are different toys, regardless of the child's gender, the color of clothes - whatever one likes. Less frequently, they give examples of topics about boundaries, their own and other children's, respect, diversity, and the rule of underpants. And there is a certain gender peculiarity of such conversations with children - boys are told that they cannot fight, girls are told about risks, dangerous situations, and intimidation as a means of protection.

Women with experience of GBV have a somewhat different attitude to discussing various topics with children, emphasizing the importance of understanding their boundaries and rights.

"They don't always teach girls and maybe boys to understand their boundaries: what you can allow to do to yourself and what you can say: no, stop, I don't want to do that.", KII, victim of GBV

The participants note that it is difficult to explain (some of them did not discuss GBV with children aged 3-6) what GBV is due to the young age of children, although they emphasize that a visual example is also very important. They agree that it should be explained from the age of three, but they do not know how to do it properly, in an age-appropriate way, and what important points about GBV should be conveyed to children, apart from the fact that fighting is bad.

There were also cases of avoidance of discussing the topic of gender-based violence in participants' families. The following barriers to discussion can be:

- Lack of awareness of the problem in general parents did not understand or did not consider it important to discuss GBV, which is likely to be related to a lack of awareness of the problem, the relevance of the topic (such as 'it does not concern my child, it will not affect him/her') or refusal to talk about unpleasant topics;
- **Cultural or religious restrictions: in some families,** discussing the topic of GBV is limited by cultural or religious factors, and is considered shameful;

• Lack of communication skills on complex topics: in some cases, parents simply do not have sufficient communication skills to effectively talk to their children about such difficult topics, and feel uncomfortable or unsure about communicating with their children on these topics. In turn, some adolescents may also feel uncomfortable with the timing and do not support such conversations - it is likely that discussing this topic may be unappealing or uncomfortable for some girls due to the general taboo nature of these topics in the society or in their environment

Adolescents mentioned discussing GBV at school or college in classes or events designed to educate on the topic. Lessons are taught in school that teach about GBV, how it can manifest itself, and how to seek help or support. Such activities in schools may include lectures, workshops, discussions with psychologists or law enforcement officials, as well as other forms of education and awareness-raising. For boys, school is the main source of information about GBV. Most of the boys who participated in the FGDs received information about GBV at school, during civic education lessons, training, classes or from a psychologist. However, judging by the examples given by the boys, it is likely that most of these activities were focused on bullying and wartime violence rather than gender-based violence.

Some girls note that school educational activities on this topic are usually not interesting for adolescents and do not cover all the important aspects of the topic - the importance and prevalence of the problem is not emphasized; there are not enough examples of everyday situations.

'They came to school to talk about it, but I wouldn't say it was great. I would say it was boring, uninteresting. They didn't tell us the scale of it, they didn't tell us that every person faces it every day' - FGD, girls, centre

In general, girls expressed the opinion that it is best to tell adolescents about GBV in an informal way and with examples from specific life situations - they noted that it is important to talk about different forms of violence and how they can manifest themselves in real life. They believe that it is necessary to explain what violence is and how to counteract it, as well as how and where to seek help if necessary. They also suggested that such educational activities should be conducted in schools earlier than in high school.



5.3. Situations/places of GBV

Based on the FGDs, the following situations and places can be identified where women may experience or have experienced GBV:

- At home, in family relationships: Being beaten by her husband (or another man in the family), conflicts arising at the domestic level, psychological pressure in the family, emotional devaluation, even in the presence of other family members, physical or sexual harassment.
- At school, in clubs (adolescents): teachers make comments about clothing and behavior, peer
 pressure and inappropriate comments and actions by boys.
- At the workplace (adults): situations at work where there is any form of violence from colleagues or management
- **In public places:** in public places (including clubs, bars, cafes), at certain public events, where psychological pressure, devaluation, humiliation, harassment, voyeurism may occur. In case of negative interactions with others, in particular when communicating with strangers or visiting public places
- Internet environment, social networks (spontaneously mentioned by adolescents), dating sites: cyberbullying, online harassment
- Army mentioned only by some men (not military)

But in general, there is a perception that one can experience GBV anywhere

"Anywhere. On the street, in transport, in... I don't know. In a clinic, in a shop. Anywhere where we can come into contact with other people and have some kind of interaction with them." - FGD, women, centre, 18-25 years old

Having a personal experience of violence, these women have a deeper understanding of what GBV means and what its consequences can be for victims. They are likely to be more vulnerable to GBV and more sensitive to its manifestations in various aspects of their lives. Their experience of violence has changed their perspective on the causes and consequences of GBV, making them more aware and empathetic. Sometimes, the experience of GBV in relatives and friends also works in this way descriptions of specific situations and events of GBV help to better understand what is happening in their own real life situations.

For some FGD participants, **the change in perception of GBV** and the realization that it is necessary to change something if it happened directly to you **came when the perpetrator involved a child in the process of GBV** - either as a witness, or by inflicting violence on a child (intentionally or accidentally), or by the child's reaction to the GBV they witnessed.

"The last straw was when my ex-husband pushed my child very hard and pulled me by the hair in front of the child. That was the last straw." - FGD, women, Kyiv and Bila Tserkva, 26-45 years old

Regarding the places where respondents encountered situations of gender-based violence, most often all forms, except for harassment, occurred at home. However, for women, economic, physical and sexual violence is more common at home than for men. Harassment is most often experienced by respondents in a public place, in the online space.

Situations/places of GBV

% of those who have experienced situations of violence, multiple choice

Place (for men)	Psychological violence	Economic violence	Physical violence	Harassment	Sexual violence
Base	n=907	n=747	n=455	n=502	n=127
At home	50%	64%	44%	22%	32%
In a public place	23%	16%	23%	25%	16%
At school	21%	13%	26%	18%	14%
Online spaces/ Internet	15%	11%	9%	26%	16%
At work	17%	12%	8%	18%	16%
In public transportation (in city)	9%	5%	10%	10%	11%
On a visit	7%	6%	4%	8%	8%
Community centers	5%	5%	7%	6%	13%
Intercity transportation (train, bus)	3%	3%	4%	6%	13%
In a shelter for temporary stay of IDPs	1%	2%	4%	4%	11%
Places of worship	2%	1%	1%	2%	1%
Refuse to answer	6%	7 %	11%	12%	16%

Place (for women) Psychological Economic Physical Harassment Sexual

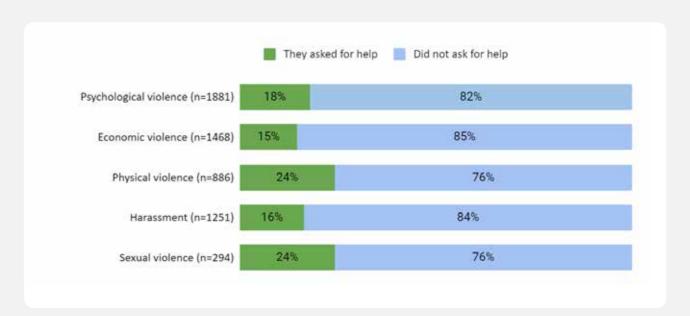
Place (lot wolliell)	violence	violence	violence	Hurussinent	violence
Base	n=973	n=721	n=431	n=749	n=167
At home	51%	67%	56%	21%	50%
In a public place	22%	13%	19%	31%	17%
At school	22%	11%	20%	13%	10%
Online spaces/ Internet	19%	9%	5%	37 %	9%
At work	13%	9%	5%	15%	10%
In public transportation (in city)	10%	6%	6%	16%	7%
On a visit	8%	6%	5%	6%	7%
Community centers	3%	2%	3%	5%	9%
Intercity transportation (train, bus)	3%	2%	2%	3%	4%
In a shelter for temporary stay of IDPs	1%	2%	2%	2%	4%
Places of worship	1%	1%	1%	1%	4%
Refuse to answer	5%	5%	8%	8%	11%

5.4. 'Hidden' GBV

According to the survey, most victims do not seek help, and this applies to all forms of violence. Victims are somewhat more likely to seek help in situations of physical and sexual violence (24% each), while in other cases, less than 18% seek help. Men are less likely than women to seek help in all forms of violence except sexual violence. **Residents of the western and north-central regions are less likely to seek help than residents of other regions.** By type of settlement, differences were recorded only for situations of harassment and sexual violence - **residents of small towns are more likely to seek help** (see Seeking help in cases of violence, by gender, region, type of settlement), according to the KIIs these are areas that lack sufficient services to cover their populations and would benefit from expanded support and service. It is important to note that the proportion of people seeking help in villages is not significantly lower than in large cities.

Seeking help in cases of violence:

% of those who have experienced situations of violence, one answer in a row





FGD participants point to the following main factors that contribute to the normalization of concealment of GBV cases by its victims:

- Lack of awareness as the main reasons why victims may not seek help they do not recognise GBV, blame themselves, have low self-esteem (including thinking they do not deserve help) and lack of awareness of the availability of resources and services for GBV victims.
- **Influence of stereotypes** Perceptions of GBV are largely shaped by gender stereotypes, where women are expected to adopt traditional female behaviors and roles. Stereotypes also influence the way people respond to GBV, predisposing them to blame the victim or deny the problem.
- **Upbringing** emphasizes the role of upbringing and family role models, and specifically domestic violence.
- Lack of awareness among family members and society and, as a result, a lack of support and understanding from society and workers. Victims of GBV often face indifference from their loved ones.
- Lack of trust in the support from law enforcement agencies, which makes people keep silent about their experiences for fear of being judged or not receiving the necessary assistance.

Statements about the reasons why victims of different ages and genders do not recognise violence against them indicate serious socio-cultural problems related to understanding and responding to gender-based violence in Ukrainian society. It is particularly noteworthy that, **according to adolescents, their age group is more likely to keep silent about GBV against themselves.** It is also interesting that among adolescents there are no significant differences in the perception of the reasons for the nonreporting of GBV by its victims (and boys most often mention a female as a victim), while men are more likely to try to imagine themselves in the position of a victim, but can do so not in all types of GBV.

According to the results of the survey, it is impossible to single out a single, strongly dominant reason for non-reporting; it is rather a complex, a combination of problems. The most common reason for not reporting GBV is that survivors do not believe that their reporting will change anything or help them (27%), with women and adult respondents being more likely to report. Almost a quarter of respondents express the viewpoint that GBV should remain private and not be publically reported; This reason was notably favored by men and participants in the older age group (43-60 years old), suggesting a potentially higher level of stigma associated with the issue within these demographics.

For women, even more important reasons are concerns about confidentiality (22%), fear of being negatively judged (22%), fear of the perpetrator (19%), and fear of being blamed (20%). Importantly, adolescents are more likely than adults to choose not to report because they are afraid of talking to strangers (13%) (see Reasons for not reporting about GBV)

Reasons for not reporting

n=2800, multiple choice

When discussing at the FGD the reasons why victims of GBV do not seek help, participants pointed to many different aspects and examples. In general, the discussion was quite emotional. The reasons mentioned by the participants include the following groups:

- Fear and shame of the reaction of those whom you ask for help (family members, friends, community, professionals):
- to be judged for the situation due to biased attitudes towards survivors. The participants also noted that prejudice against GBV survivors exists in their environment, in communities, and depends on the context and type of violence. A victim of GBV, regardless of gender, may receive support and understanding from the community, or face judgment or devaluation, and there is a risk of stigmatization which manifests itself in distancing from the victim, which is more common in rural areas. It is noteworthy that some women during FGD, when reflecting on the causes of hidden GBV, resorted to blaming the survivor to a certain degree, criticizing her for her unwillingness to change anything in life. In fact, such opinions clearly demonstrate the effect of stereotypes and lack of public awareness about GBV, its causes and forms.

'She does not seek help and tolerates it, it is easier for her to play the role of a victim, she is comfortable in this role because she is pitied, because she has some privileges, because she has such a mission, because she is a good person.' - FGD, women, west, 26-45 years old

- not to be heard the problem will not be perceived as important, especially now, during the fullscale war
- to be judged for what you have told. Relevant for teenagers, it can lead to bullying to be called 'a snitch'. And relevant for men are afraid of looking weak, of not conforming to gender stereotypes of a strong man. They may also feel ashamed that they need help and believe that they should cope with their problems on their own
- **fear of retaliation** from the perpetrator if the victim seeks help
- fear that people will not believe the fact of violence and will perceive it as a fabrication or
 exaggeration. More pronounced in the group of adolescents, they believe that adults are
 prejudiced against adolescents based on exemplary or non-exemplary behaviour at school.
 Adolescents also mentioned that the perpetrator may disclose certain secrets that their parents do
 not know about them, either through direct or latent blackmail.
- **Financial dependence** of women on men, especially women on maternity leave. Women who are financially dependent on their abusers may be afraid to leave them because they do not have the means to support themselves and their children, and because of a break in their work (loss of qualifications, experience), they will not be able to find a well-paid job quickly.
- **Emotional dependence:** women may be emotionally dependent on their abusers and believe that they love them. It may be difficult for them to believe that the abuser can harm them. Also, a woman may be frustrated with the relationship and not believe in herself and think that only this man can keep her going this opinion was expressed at the FGDs by men only, or not want to lose her family (husband) or the father of her child this opinion was expressed at the FGDs by boys only.
- Lack of support: Women who live in isolation or do not have support from family and friends may be more likely to remain silent about the violence they experience. Lack of support from loved ones or judgment from others can make people feel alone and unsupported in difficult situations.

• Lack of trust in law enforcement agencies: Women may not trust law enforcement agencies or social services and fear that they will not be helped or even blamed for what happened.

The reasons given by the participants can be summarized as the following problems of non-reporting: lack of zero tolerance for violence in society as a whole; lack of a sense of a lawful society; low awareness of GBV and assistance.

In the survey, to better understand the barriers to reporting, we asked respondents what problems they think victims face when they seek help. The **key problems are the indifference of those to whom the victims turn (33%) and the likelihood of being accused of provoking violence (25%). Women are more likely than men to mention these problems, and adolescents are more likely than older age groups** (see Problems faced by survivors of gender-based violence when seeking help by gender, age)

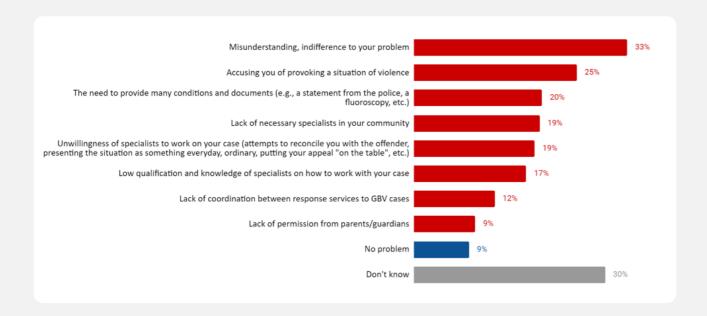
The next set of problems (indicated by similar proportions of respondents) are bureaucracy (20%) (the need to provide many certificates and documents), lack of a necessary specialist in the community (19%), unwillingness of specialists to work with the case, attempts at reconciliation, presenting the situation as a domestic one (19%) and low qualification of specialists (17%). It is noteworthy that most of the problems are reported by women more often than men, and more often by the middle age group (18-42 years).

Those who have experience of harassment and threats are more likely to indicate the problem of being accused of provocation, and those who have experience of sexual violence are also more likely to indicate this problem. Also, those who have experience of harassment more often than others point to the problem of unwillingness of specialists to work with your case (attempts to reconcile you with the offender, to present the situation as something ordinary, common) (see Problems faced by survivors of gender-based violence when seeking help by type of GBV)

One-third of respondents (30%) do not know what problems victims may face, more often among those who have no experience of violence in the last year, as well as among adolescents and the older age group (43-60 years).

Problems faced by survivors of gender-based violence when seeking help

n=2800, multiple choice



5.5. Portrait of the perpetrator

Despite the fact that FGD participants noted that men can also experience gender-based violence from women, the image of the perpetrator in the GBV is generally the same - first of all, participants point out that it is a man. In further discussions, participants also point out that in situations of psychological violence, the perpetrator can be a woman.

'Often, men believe that this is the way they 'teach' their women. They are satisfied that they have asserted themselves, that they have made the right decision.' - FGD, women, Kyiv and Bila Tserkva, 46-60 years old

Regarding the dominant image of the perpetrator in GBV, the FGD participants mentioned different moral, psychological and status characteristics. These images can vary depending on the age of the perpetrator, his/her social status, education, income, etc. However, the general characteristic of the perpetrator, according to FGD participants, is the desire for control, dominance, self-assertion at the expense of others, and power.

Some participants also highlighted the aspect of having a certain social status which makes the perpetrator feel impunity for his actions, he can sort everything out and get away with it because he has financial resources or contacts in law enforcement agencies (the factor of having friends in law enforcement agencies is more pronounced in small towns and villages than in large cities). High social status, according to the participants, can also lead to greater trust in the words of the perpetrator than in the testimony of the survivor.

The participants highlight certain features of the perpetrator in relation to a particular form of violence. In general, in the participants' perceptions, perpetrators of psychological and economic violence are insecure men who seek to assert themselves at the expense of others who are dependent on them; perpetrators of physical and sexual violence are those who normalise physical aggression and violence.

According to the survey data on the perpetrator of violence, there are certain trends in the forms of violence and gender of respondents. Perpetrators of psychological and economic violence are most often current partners, both for men and women. The portrait of the perpetrator by form of violence has the following features:

- In cases of psychological violence, the perpetrators are often friends and colleagues. Men (23%) are somewhat more likely to experience psychological violence from colleagues than women (20%).
- In situations of economic violence against men, the perpetrators are often relatives (30%), while in women, the perpetrator is a former partner (20%).
- In situations of physical violence experienced by men, the perpetrators were more often colleagues (27%), while in relation to women, physical violence is more often committed by relatives (23%) and current partners (20%)
- Both men and women are most often harassed by colleagues or strangers
- Perpetrators of sexual violence against men are most often colleagues (24%), against women relatives (36%), current partner (27%).

Perpetrators of different forms of GBV

% of those who have experienced situations of violence, multiple choice

Abusers (for men)	Psychological violence	Economic violence	Physical violence	Harassment	Sexual violence
Base	n=907	n=747	n=455	n=502	n=127
Current partner	24%	30%	18%	10%	20%
Former partner	3%	17%	2%	2%	1%
Friends (of the opposite sex)	22%	13%	19%	9%	15%
Relatives (of the opposite sex)	19%	30%	19%	15%	21%
Well known person (of the opposite sex)	12%	10%	9%	15%	19%
Colleagues (of the opposite sex)	23%	7%	27%	24%	29%
Stranger (of the opposite sex)	12%	8%	12%	16%	20%
Unknown	10%	6%	10%	25%	18%
Refuse to answer	10%	12%	11%	20%	16%

.....

Abusers (for women)	Psychological violence	Economic violence	Physical violence	Harassment	Sexual violence
Base	n=973	n=721	n=431	n=749	n=167
Current partner	23%	27%	20%	8%	27%
Former partner	3%	20%	1%	2%	2%
Friends (of the opposite sex)	21%	11%	16%	7%	5%
Relatives (of the opposite sex)	20%	29%	23%	16%	36%
Well known person (of the opposite sex)	9%	11%	5%	13%	13%
Colleagues (of the opposite sex)	20%	6%	17%	20%	17%
Stranger (of the opposite sex)	14%	4%	16%	16%	18%
Unknown	13%	5%	11%	41%	15%
Refuse to answer	8%	11%	7 %	20%	5%

5.6. Impact of war on GBV

The women who participated in the FGDs believe **that the war can have a significant impact on GBV, both directly and indirectly,** as there are risks of increased aggression, PTSD and other conflicts, which can lead to an increase in such violence. Some girls, on the contrary, tend to say that during a full-scale invasion, GBV should decrease, as perpetrators and potential perpetrators are preoccupied with defending their homeland and are not focused on GBV. While among adolescents, the frequency of GBV use has increased in these circumstances.

'I think that because of the full-scale invasion most of the men who could theoretically commit such violence are now busy with other things... And right now, teenagers are more likely to be aggressive than adults.' - FGD, girls, Kyiv and Bila Tserkva

Several factors can be identified that may influence GBV in times of war:

• Active hostilities and occupation can lead to stress and psychological exhaustion of people, resulting in behavioral changes and aggression in particular. War makes people more psychologically exhausted, which can lead to a surge in aggression, including GBV. There is also a high risk of various forms of GBV by the occupiers, but this is only reported by men.

'I talk to many parents of the children who come to my training sessions, and I see the difference in how parents react to a particular question, how they communicate with their children now and how they did that before the war. There is a big difference. They have become more aggressive, much more strict and angry, and everyone is like that, you can feel it in people.' - FGD, men, west, 46-60 years old

Moves and displacement: People who used to live in the occupied territories or were forced to
move also experience stress and psychological trauma which can lead to changes in their behavior,
including aggression. Women who have moved with their children are more vulnerable to GBV in
unfamiliar territory. Or in broken families, men who stayed behind when their wives left, persistently
seek attention from the women who are close by.

'Now, when the war started, I started receiving some indecent proposals from men. At first I didn't understand what it was about, and then I realized that their wives are all abroad and they need to spend time with a woman, and they are all writing and calling other women like crazy.' - FGD, women, Kyiv and Bila Tserkva, 46-60 years old

 44 45

• War as a gendered phenomenon that exacerbates gender stereotypes: FGD participants point out that war has gender aspects that can influence the emergence of violence. According to women, war has a masculine character, and men are supposed to be defenders by their social roles, while women need to be protected. This can lead to conflicts in the family, especially when soldiers return home with injuries or psychological issues. There is also a threat that men can feel superior because they defend the country and women - they are automatically perceived as heroes, and this increases their power. Men see this problem from the other side - that women expect them to go and defend their homeland because a man is a defender. But, according to women, there is also a downside to the war as a catalyst for exacerbating gender stereotypes: men reproach women for not being liable for military service and for being free to travel abroad while talking about gender equality.

'Women do not sit in the trenches, they do not risk their lives. War is more masculine, you know. A man is needed in war, he needs to fight, and a woman needs to be protected. A woman is protected, and a man is a defender' - FGD, women, west, 26-45 years old

- Untreated post-traumatic stress disorder (PTSD), lack of proper psychosocial support for those
 returning/who will return from war can lead to GBV, among other things: women and some men
 note that many soldiers returning home from the combat zone may suffer from psychological trauma
 and not receive proper support. This can lead to cases of domestic violence when they are unable to
 effectively cope with their emotions and stress. Some participants also noted that such work with a
 psychologist is needed not only for veterans but also for their family members.
- **Gender-based violence in the military:** Women in the army may face underestimation and disrespect from men, being perceived as less important and less respected than men. Some women emphasize that some male soldiers may not consider female soldiers as equal because of their different experiences during the war. Men look at this issue from the perspective of equality in their view, then women should fight/ be mobilized like men, and view the forced mobilization of men as physical GBV.

'I heard that men do not treat women in the trenches as equals. They have no respect for those women, because they have fixed criteria of femininity. A woman in the trenches might be respected by her close comrades but not by outsiders.' - FGD, women, west, 26-45 years old

- Long-distance relationships, families separated due to women leaving their places of residence: this factor has two sides. On the one hand, the fact of a separated family can exacerbate men's behavior of harassment and intrusive sexual behavior in their immediate environment, or psychological GBV in order to reunite the family reported only by women. The situation also has a reverse side when a woman goes abroad and finds another man. In this case, the husband resorts to psychological violence in various ways the female version or experiences psychological violence through infidelity the male version.
- **Unwillingness to join the Armed Forces:** evasion of the draft officers, according to men, leads to gender-based devaluation, psychological pressure from society, and even physical violence.

'Especially men that avoid joining the army., they are usually despised' - FGD, male, centre, 18-25 years old

 Loss of work, reduction of income, which worsens the overall situation of people's lives and can affect aggressiveness

Interestingly, some FGD participants believe that military operations and service in the military by women can lead to positive changes in the fight against stereotypes, although not to significant ones. That is, women's participation in the army may challenge traditional gender stereotypes but they still remain powerful in society and are unlikely to change.

'It seems to me that on the one hand, the war made no difference, but on the other hand, it showed that women can also be strong and do something, and by these actions... Well, that they can do even better than men' - FGD, girls, Kyiv and Bila Tserkva

It is important to take measures to prevent these negative consequences, including psychological assistance to veterans and their families, and raising awareness. Women place a particular emphasis on the need for psychological support for the military after returning from war. They believe that such support is necessary to help them integrate into society and avoid domestic violence. However, they also note the important role of the family in this process.



5.7. Underlying and Contributing Factors of GBV

The factors underlying and contributing to GBV can be divided into the following aspects:

- Main/root causes are fundamental, deep-seated issues that underpin the occurrence of GBV and are often linked to personal history and ingrained beliefs.
- Provoking/exacerbating factors are immediate, situational triggers that can heighten the risk of GBV in specific contexts.
- Contributing factors are broad, systemic, and often persistent conditions that form a backdrop against which GBV is more likely to occur.









Factors that provoke or exacerbate GBV

Stress: Psychological pressure that can lead to aggressive behavior.

Bad Mood: Temporary emotional states that can trigger violent reactions.

Job Loss and Reduced Income: Financial stress that can increase frustration and conflict.

Dissatisfaction and Jealousy: Emotional responses that can lead to violent behavior.

Intoxication and/or Bad Habits: Influence of substances or habitual behaviors that lower inhibitions.

Deviations from Gender Expectations: Reactions to behaviors that challenge traditional gender roles.

Violent Communication: Use of aggressive or harmful language that can escalate into physical violence.

Maternity Leave: Situations where economic or social pressures during maternity leave lead to conflict.

Appearance of a Girl/Woman: Objectification or inappropriate reactions to women's appearance.

Main/Root Causes of GBV

Life Conditions: Overall living circumstances that create stress or hardship.

Character Flaws and/or Mental Instability: Personal psychological issues that contribute to violent behavior.

Unresolved Childhood and Violent Past: Traumas or experiences that shape one's propensity for violence.

Perception of Gender Norms: Deep-rooted beliefs about gender roles that justify or perpetuate violence.



Factors that Contribute to GBV

Traditional Patriarchal Structures: Societal systems that uphold male dominance and female subordination.

Experience of Childhood Violence: History of experiencing or witnessing violence in childhood.

Substance Abuse: Use of drugs or alcohol that can impair judgment and escalate conflicts.

Social Norms: Societal expectations that reinforce gender inequality and tolerate violence.

Unequal Distribution of Power: Power imbalances in relationships and society that disadvantage women and other marginalized groups.

Main/root causes of GBV

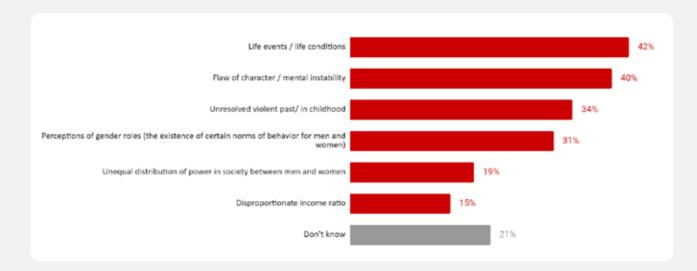
According to the results of the quantitative survey, the main causes of GBV are the influence of the general situation, living conditions (42%); or some character / mental characteristics (40%). These reasons are more often mentioned by adult respondents, aged 18-60 (see Main causes of gender-based violence).

One-third of respondents indicate stereotypes about gender roles as a cause of GBV (31%), and only 19% indicate unequal distribution of power in society. These reasons are more often mentioned by women than men, as well as by middle-aged respondents, 18-42 years old.

21% were unable to identify the causes of GBV, with men and adolescents finding it more difficult to identify the causes.

Main causes of gender-based violence

n=2800, multiple choice



Factors that contribute to GBV

When discussing the causes of GBV, FGD participants pointed out that there are **stereotypes**, **expectations**, **prejudices** imposed by society about how women and men should behave and what roles they should play. And these stereotypes, expectations and prejudices can be the causes of GBV and normalize GBV in society. However, the respondents themselves agree that they cannot always recognise what is an imposed expectation and stereotype and what is not, except in very obvious situations, for example, that women should be weak and submissive and men should be strong and dominant.

FGD participants also pointed to traditional/patriarchal/religious upbringing and the transmission of certain values and role perceptions, and the inheritance of patterns from generation to generation as a reason for GBV. According to the FGD participants, traditional upbringing can lead to the adoption of established gender roles and stereotypes, which in turn contributes to the emergence and normalization of violence in the family and in other spheres of life (behavioral patterns established in childhood, in particular in the family environment or even in preschool institutions). It was noted that GBV can be the result of modeling behavior that is perceived as normal or acceptable in a certain social context, which was, again, formed by upbringing.

The experience of childhood violence was also mentioned by all the participants as a cause of GBV. Victims of GBV add that it is not only the perpetrators who may have had this experience and normalized violence or compensated for it, but also the victims. If a person suffered from GBV in childhood, especially if it was sexual, then his or her chances of being a perpetrator of GBV in the future increases.

Some participants also mentioned the **unequal distribution of power** as a reason. This opinion is more typical for those who have studied this issue. They understand the desire of one person to use another to satisfy their needs or desires, to fulfill their power ambitions or desire for control, to assert themselves at the expense of others. There are two sides to the problem if we focus on the financial basis of the problem. When one's status/income/financial capabilities are low, one 'compensates' by exercising power over others and emphasizing inequality. But, on the other hand, with high status/income/financial opportunities, there is a direct exercise of power by the wealthier. Some men said that it is due to a lack of agreement and, as a result, a desire to dominate.

The participants also emphasized the **influence of cultural and social factors**, such as images, media portrayals, religious practices (elements of submission, patience, redemption) and other environments (school, friends), which can cause and normalize GBV.

Women and girls also add that the atmosphere of **silence and avoidance of punishment regarding GBV issues** that was characteristic of Soviet times, but continues in many cases today, generates widespread tolerance for violence and continues to reinforce gender stereotypes. Women and girls mention the **feeling of impunity** for various forms of violence, which leads to its multiplication. The problem also has a reverse side, when the victim does not trust the police and does not seek their help.

There are certain differences in the opinions of women and men, girls and boys regarding the causes of GBV:

- The systemic nature of GBV: Women and girls highlighted the systemic nature of GBV as the impact of cultural and social norms that promote GBV and the distribution of roles along gender lines as one of the causes of violence. While some men and boys focused more on other factors that happen randomly, such as stress or loss of control, which can also lead to GBV.
- **Inequality and power:** Women and girls were more likely to highlight inequality and power in relationships as contributing factors to GBV. They are likely to be more aware of the social and structural aspects of gender inequality, while men and boys are less likely to talk about it.
- **Following stereotypes and behavioral patterns:** younger participants tended to focus more on learning or modeling behavior as factors influencing GBV.

General trends of certain differences in views on the causes of GBV between women and girls can be found:

- Girls are more focused on their personal experiences, mention their vulnerability due to physical
 weakness, talk about fear of the perpetrator, less often consider systemic causes and mention
 stereotypes and gender inequality.
- Women are more focused on the systemic causes of GBV, often talking about stereotypes and gender inequality and spontaneously mentioning financial factors but less often about fear and mistrust.Women are likely to face gender discrimination and violence more than girls which has led to an awareness of systemic causes and an emphasis on gender stereotypes, discrimination, and inequality.

Factors that provoke or exacerbate GBV

The opinions of FGD participants on situations that can trigger GBV are quite diverse, depending on gender and personal or acquaintance experience of GBV, as well as on awareness of the problem. The spontaneous answers of women and girls to the question often include certain provocative reasons (stress, reduced income, jealousy, bad habits, etc.). However, in each group there were participants who firmly stated that, in principle, there are **no specific situations or circumstances that can provoke GBV**, or that the form of GBV manifestation differs from certain provocative situations. That is, the aggressor will commit it in any case because he is an aggressor. Some women note that they **did not immediately come to this opinion but developed it after becoming more aware of the topic of GBV**.

'When I started deepening my knowledge of psychology, reading books, listening to speakers, and removing these clichés in my head, I had a stable statement in my head: "NO, there are no such situations": - FGD, women, east-south, 18-25 years old

In the FGDs with men, the idea that there are no provocative situations is more likely to be expressed in relation to physical and sexual GBV. Some men believe that **the victim of GBV is to blame,** as she not only provoked, but also did not want to come to an agreement and listen to the other side.

The following situations were mentioned as provoking GBV:

Stress, bad mood, caused by anything in life, but often by not typical behavior of a partner or a hard day at work, financial difficulties: situations when a person comes home from work in a bad mood or has been humiliated at work or in other circumstances, are the factors that especially, in the opinion of women, can lead to conflicts, loss of control and violence.

Job loss, unemployment, decrease/increase in income of one of the partners leads to emotional tension in the relationship and aggressive behavior because of this. The direct provocation is mentioned mainly by men, but subconsciously women also have it in mind, giving various examples during FGDs.

Dissatisfaction or jealousy: general dissatisfaction (with one's achievements, unrealised ambitions, etc.) and dissatisfaction with the actions of a partner regarding certain decisions (for example, refusal of certain proposals) can trigger conflict. According to women and some boys, infidelity in relationships is a significant catalyst for GBV.

State of intoxication (by alcohol or drugs) of both the victim and the aggressor, **bad habits:** Mostly mentioned by girls when asked directly, but based on the assumption that it is easier to commit GBV if the victim is in such a state. However, the girls argue that the responsibility for violence always lies with the perpetrator, and nothing can justify violence, even if a person is intoxicated. At the same time, during the FGDs, women gave examples of their own experiences of GBV where the perpetrator was intoxicated. Men and boys also consider such situations to be provocations for GBV but sometimes they note that it is a woman who can take advantage of a situation when a man is intoxicated.

Deviations from certain gender stereotypes and expectations: Cultural or gender-based expectations of roles and responsibilities can lead to conflict, especially if one of the parties deviates from traditional stereotypes.

It is worth paying special attention to the situation of maternity leave and the appearance of a child. It is noted mainly by women and more often by those who have already had their own experience of having a child. Women emphasize that a woman becomes financially dependent for a rather long time, socially isolated, and has a difficult general emotional state after childbirth. Somewhat less frequently, women mention the increased burden of care work on women, which is still considered the norm. Men also mention maternity leave as a provocative situation, but emphasize the increase in expenses, and some men point to a significant decrease in attention from their wives. Some older men also mention this situation as provocative, not only in terms of psychological or financial GBV but also in terms of physical GBV. Some men believe that there is a certain correlation between the presence of a child in the family and the use of GBV - without a child, they believe, there are fewer cases of GBV.

'The thing is that a man loses some of her attention, and sometimes most of it. As a man, he no longer has the amount of attention he had before the child. And physical and psychological violence begins, more often psychological violence.' - FGD, men, west, 46-60 years old

Only a few girls and boys mention **the appearance of a girl or woman** - they believe that revealing clothing (short skirts, provocative make-up, certain behaviours) can provoke sexual violence, which is especially aggravated when a girl or woman dressed like this walks alone in dark streets - a threat of harassment and rape. Other girls and some boys, on the other hand, argue that clothing cannot be an excuse for violence, and that people have the right to dress the way they want. Some girls note that the idea of 'it's your fault' or 'you provoked him' is common among older people who have a different upbringing.

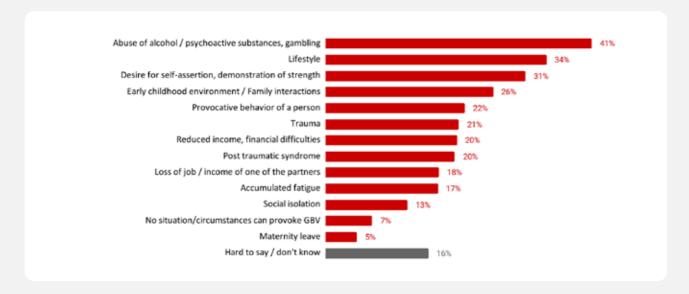
'A common excuse for this is revealing clothing. But I don't think that's the reason. The reason is the person who inflicts violence.' - FGD, boys, centre

In the quantitative survey, the majority of respondents indicated circumstances that could trigger GBV, while only 7% of respondents indicated that no situation or circumstance could trigger GBV. More often it is women than men and adolescents and adults (see Situations and circumstances that can provoke/exacerbate gender-based violence)

Among the circumstances, almost half of the respondents mentioned bad habits (41%), one third - lifestyle (34%), and the desire for self-affirmation (21%). It is noteworthy that 22% of respondents indicated provocative behavior of a person; this alternative was more often chosen by men and adult respondents aged 18-60.

Situations and circumstances that can provoke/exacerbate gender-based violence

n=2800, multiple choice



5.8. Barriers to accessing support for GBV survivors

The overall level of awareness of protection for GBV survivors is rather low and uneven among FGD participants, especially among men. There is a general perception that there should be some kind of law on physical and sexual violence, but FGD participants could not provide more precise information. Some women are well aware of existing support mechanisms and infrastructure, while others are not aware of them at all or have limited information. At the same time, there is a strong perception that the legislation on GBV does not work and the assistance system is not effective.

"Well, I know that there is a phone number of the Verkhovna Rada, you can write a letter..." - FGD, women, Kyiv and Bila Tserkva, 26-45 years old

Women and some men believe that **information about services for GBV survivors is difficult to find,** while girls and boys, on the contrary, do not see any difficulties in this (they have either come across such information or tend to use Internet search engines). Most men have similar opinions, believing that all information can be found on the Internet or by asking relatives, friends or the police, who will also help. According to women and men, many people may not be aware of the existence of free support and resources, and may face financial difficulties that make it difficult to access psychological and legal support services.

According to women, advertising and information campaigns about these services are not widespread enough, so many women do not know about the existence of shelter, crisis rooms, free psychological and legal assistance. **Even those who do know about the existence of these services do not always know how to find them and where to go.** According to FGD participants, information about relevant centers and services is usually available in district clinics, volunteer organizations, the subway, on advertisements and on the Internet, but there is also a lot of inappropriate information on the Internet. However, there are difficulties in finding free psychological and legal assistance services for victims, as **information**

about these services is not widely disseminated and accessible. Even in places where centers for GBV survivors exist, information about them may be insufficient. For example, one of the FGD participants learned about the shelter from women who asked for food outside a store rather than through advertisements or the Internet. Sometimes GBV survivors know that they need to see a psychologist, but do not go to one because they think it is expensive.

Some FGD participants noted that in their cities there are regular advertising campaigns on GBV, but more often communication aimed at women survivors, while there is no communication aimed at men. There is also a lack of communication about specific manifestations of GBV, about which situations are already GBV. Spontaneously, at one of the FGDs, women mentioned the code word for police for GBV victims, "Polina," and the code signs that a GBV survivor can give so that the perpetrator does not understand. But most women do not know what it is.

Respondents noted that not all victims may be aware of existing resources and support mechanisms, which makes it difficult for them to access the assistance they need. They also pointed to the need for more advertising and publicity about support services, as well as the **need to expand the infrastructure that provides assistance to GBV survivors.** Women believe that publicizing information about these resources and services can help reduce the number of potential victims.

Key informants point to the following main barriers to accessing support services:

• Information channels are not always relevant for different population groups, especially for older people who may be more socially isolated

"If we are talking about the older generation, the places where they are, I don't know, the same sovsob, social protection, I don't know, Ukrposhta, somewhere else - there is not a single stand with an advertising or information message.", KII, social worker, woman

Lack of services, specialists and confidentiality issues in small communities and villages

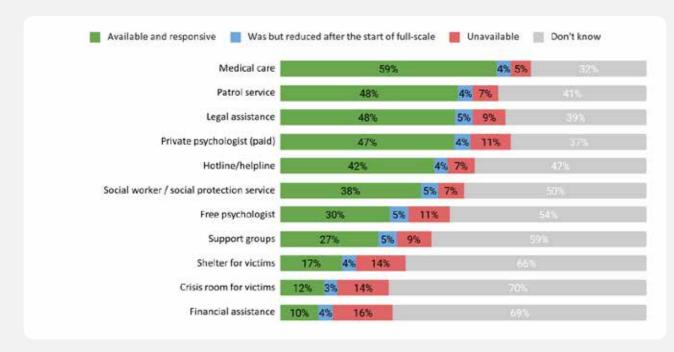
"Communities, there is a need for specialists who would provide assistance from GBV, non-governmental structures were created that could provide everything in one place: psychological, social, legal support.", KII NGO worker, woman

Regarding the availability of specialists and services in communities, according to the quantitative survey, there is low awareness among the participants of the quantitative survey, especially with regard to more specialized services - social worker, free psychologist, support groups, shelter, crisis room, half or more of the respondents do not know.

Relatively better awareness/informed about the coverage of medical care services (59%) and patrol police (48%), legal aid (48%), and paid psychological services (47%). Respondents in the western regions of the country are somewhat better informed about these services. The worst situation with awareness of services is in rural areas. It is noteworthy that crisis rooms and shelters for victims are more often mentioned in small towns, which may indicate better awareness in smaller cities than in larger ones (see Support services for victims of gender-based violence are available in the community)

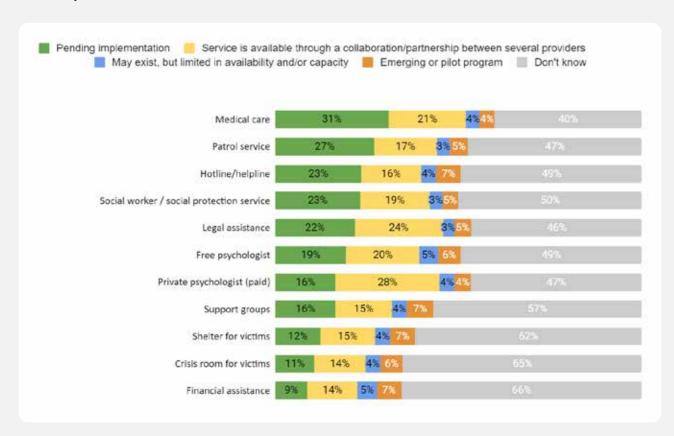
Support services for survivors of GBV are available in the community

n=2800, one answer in a row



Awareness of the work of services in the community

n=2800, one answer in a row





GENDER-BASED VIOLENCE IN UKRAINE AMID WAR:

6.
GBV among vulnerable groups

6.1. Prevalence of different forms of GBV

Discussions with key informants specialized in GBV and GBV related fields covered the prevalence and dynamics of various forms of GBV. The key informants agree that the number of cases decreased significantly at the beginning of the war, before GBV cases began increasing in mid-2023. This seemingly positive trend is actually a sign of concealment of the problem. People fleeing from shelling and evacuating from dangerous areas have no time to report violence in their own homes. Therefore, experts explain the decrease in the number of appeals by evacuation, stress, and overload of law enforcement agencies. In their opinion, victims do not report violence because they do not want to burden the state. The displacement of people from their places of residence has also made it impossible for them to contact law enforcement and various support services.

Experts also point to an increase in reports of domestic violence and GBV, starting in mid-2023. Growing stress, psychological trauma, job loss and other problems faced by people have led to a significant increase in the number of reports of domestic violence. Another important reason is the return of military personnel with an exacerbated psychological condition, which can lead to an increase in domestic violence. The war has not only exacerbated existing problems but also created new ones. Cases of child exploitation have emerged, and cases of gender-based violence among **internally displaced persons** have increased.

"The war started to last longer, there were new challenges, blackouts, other things, many, many, many things, and it turns out that on the one hand there is a lot of, you know, contact between people, constant interaction, and on the other hand there is a feeling of great isolation. This is internal tension, internal aggression", KII social worker, woman, 26-45

Experts also point out the impact on service women. Specifically, they mention the difficulty of adapting to the new environment and performing military tasks, as well as possible manifestations of violence against them.

"We often talk to women in the military, and there are such calls, messages that they have to win their place in the sun first, and then they can fight the enemy.", KII, police officer, woman, 26-45

Experts point out that there is a slight increase in situations of violence and GBV among **adolescents**, **as adolescents are also subject to negative psychological impact**, **but parents often lack the resources to work with children due to accumulated fatigue and stress**. Adolescents remain somewhat without parental control and communication, and may turn to violence, which is further provoked by social media and various flash mobs. Adolescents also see that violence can go unpunished (referring to the actions of the Russian army in the occupied territories). Adolescents also see examples of parents helping their children avoid punishment, examples of how situations of violence are difficult to prove, especially if the victims do not have financial or reputational influence (high-profile cases of rape and sexual violence).

"we faced the fact that there are whole closed groups where they teach, let's call it older abusers teach how to lure, lure children, regardless of whether they are boys or girls, we had more cases of girls", KII, social worker, woman, 26-45

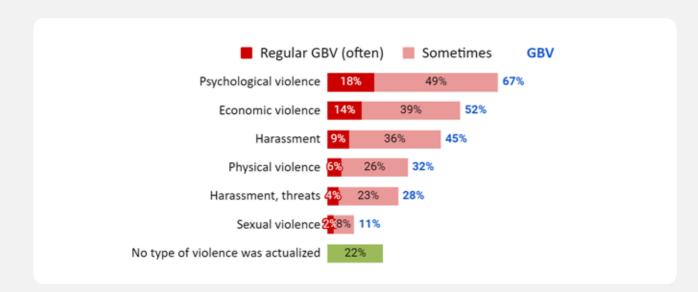
Experts also note that they have encountered new situations of GBV in practice, such as sexual violence in combat zones, and a man's insistence on pregnancy to avoid mobilization.

Thus, among the studied forms of GBV¹¹ two-thirds of respondents (67%) have experienced psychological GBV, 18% live in a situation of regular psychological GBV. Half of the respondents (52%) have experienced economic GBV, 14% live in situations of regular economic GBV.

Less than half of the respondents (45%) have experienced harassment, 9% regularly experience such situations. One-third of respondents (32%) have experienced physical GBV in the last year, 6% experience physical GBV on a regular basis, slightly less than one-third (28%) have experienced harassment and threats, and 5% experience such situations on a regular basis. Regarding sexual violence, 11% of respondents indicated that they had experienced sexual violence in the past year, and 2% experience sexual GBV on a regular basis.

Prevalence of forms of GBV in the last year

n=2800



Socio-demographic differences in the prevalence of forms of GBV are presented in the following section.

Experience of the studied situations of different forms of GBV:

- **Psychological violence:** among the situations of psychological violence experienced by men, the most frequent are getting angry when they talk to women (41%), suspicion of infidelity (38%), and dictation of what they should wear (36%). Women are more likely to experience being humiliated or insulted (42%), being commented on in a disparaging way (40%), being criticized, and being made to feel "weak" or "inferior" (40%). Girls, like women, experience these situations more often than boys (see Tables: The situations of psychological GBV that have happened to respondents in the last year "Sometimes" or "Often")
- Harassment, threats: among the situations of harassment and threats experienced by respondents who have experienced psychological GBV in the last one year, the most common is intentional intimidation, with women (24%) and girls (23%) suffering more often, and threats of harm, with boys (18%) suffering more often (see Tables: The situations of harassment, threats that have happened to respondents in the last year "Sometimes" or "Often").
- **Economic violence:** among the situations of economic violence, the most common practices that respondents face are controlling purchases and criticizing them for spending money on themselves. Men are more likely to face situations where they are criticized for not earning enough money (42%), and where someone decides for them what and how much they need to buy (28%), while women are more likely to face situations where their attempts to work are restricted (18%) (see Tables: The situations of economic GBV that have happened to respondents in the last year "Sometimes" or "Often")
- **Physical violence:** the most common situations of physical violence are pushing and slapping. Boys are somewhat more likely to have experience of being slapped (22%), punched (16%), or hit with their head against something (9%) (see Tables: The situations of physical GBV that have happened to respondents in the last year "Sometimes" or "Often")
- Harassment situations: the most frequent harassment situations are intrusive and offensive comments and questions, inappropriate and indecent advances, and invitations to date. Women and girls are more likely to experience harassment than men and boys (see Tables: The situations of harassment that have happened to respondents in the last year "Sometimes" or "Often").
- **Sexual violence situations:** the most frequent situations of sexual violence are when people are forced to participate in any form of sexual activity, and women have experienced such situations more often. It is noteworthy that 5% of men have experienced situations where someone insisted on sexual intercourse in order to get pregnant. In FGDs, men mentioned the following situations, such as partners trying to get pregnant despite the man's consent. For women, situations of insistence on pregnancy may be a reason for avoidance of mobilization by their partners (see Tables: The situations of sexual GBV that have happened to respondents in the last year "Sometimes" or "Often").

In the quantitative survey, respondents were asked the next: How often have you experienced the following situations in the past year from people of the opposite gender? Use for answer - "never" "occasionally" "frequently". To understand the prevalence of forms of gender-based violence, we formed variables where we grouped respondents' answers about GBV situations (the list of situations for each form of GBV in the questionnaire is provided in Annex). Thus, if at least one situation happened to a respondent "Sometimes" or "Often", we coded this answer as having experienced violence.

6.2. Vulnerable groups

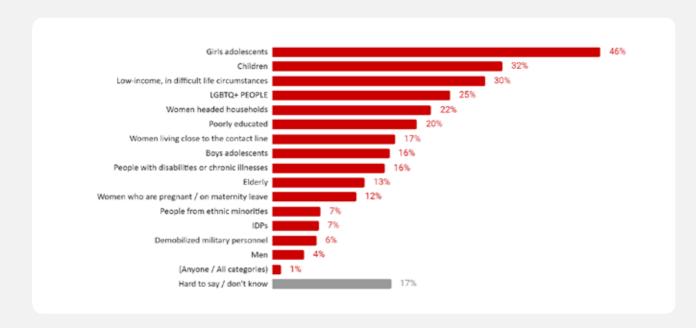
During the focus groups, women and girls noted that the **vulnerability to GBV of a particular group of people is expressed in the fact that they are discriminated against due to stereotypes and prejudices, and do not have enough resources of any kind** (including information and material) to recognise and combat GBV. According to the research participants, the key characteristics of a survivor of GBV are low self-esteem, lack of confidence and fear of expressing their opinions or desires, which makes them easy to manipulate and put pressure on (therefore, women who experienced or witnessed GBV as children or who have had previous experiences of GBV as adults are particularly vulnerable). These general features of vulnerability to GBV are exacerbated by financial or psychological dependence on other people and certain isolation, when they do not have direct access to help and support.

According to the results of the quantitative survey, the group that almost half of the respondents believe to be the most vulnerable and in need of additional support is adolescent girls (46%). Women more often mentioning this group (see Socio-demographic groups vulnerable to GBV). However, during the FGDs, this social group was not dominant among the examples given. The next categories vulnerable to GBV were children in general (32%), a third of respondents mentioned children in difficult life circumstances (30%), and a fourth of respondents mentioned LGBTQ+ group (25%).

The category of **women on maternity leave** was indicated by 12% of respondents. It was indicated more often and by women respondents aged 18-45. Only 1% of respondents indicated that anyone can become a survivor of GBV.

Socio-demographic groups vulnerable to GBV

n=2800, multiple choice



At the FGDs, the participants additionally emphasized the image of vulnerable socio-demographic groups. In general, the opinions voiced at the FGDs on vulnerable groups can be summarized as follows:

1. By gender:

- **Women:** suffer physical, psychological, sexual, and financial violence from men, stereotypes and discrimination make them more vulnerable to abuse. It is noted by absolutely all women and girls in the study, and the first mention of the most vulnerable groups is always women. The most vulnerable women are:
 - pregnant, on maternity leave or raising children especially in cases of psychological and financial GBV. However, when asked directly about vulnerable groups, this segment of vulnerability is hardly ever mentioned, although during the FGDs, cases of GBV perpetrated against women on maternity leave are constantly mentioned or described as a personified image of a survivor. Perhaps, when asked directly about vulnerable groups, stereotypes about happy motherhood and the joy of motherhood are triggered in relation to women on maternity leave, and therefore this social group is in the minority among others.
 - housewives those women who do not work themselves, depend on their husbands
 - women those working in the service sector (especially in cafes and restaurants)
 - women working in male teams
- Men: can become survivors of psychological and financial violence by women. FGD participants gave a lot of examples when a man lost his job or his earnings were lower than a woman's. In fact, here again we are talking about stereotypes a man should earn more and be the breadwinner, but FGD participants do not reflect on this point well. Regarding men as victims of physical or sexual GBV, the spontaneous reaction of all participants is similar they cannot imagine how a man can be a victim of these forms of violence. However, we should keep in mind the spontaneous perception of GBV as primarily beating and rape. When discussing in detail the image of a male victim, participants find examples of both of these forms of violence, but in other situations as harassment, offers of sex, etc.
- **LGBT+** are discriminated against and abused by the heterosexual majority, and their gender identification and sexual orientation make them targets for abuse. Some men at the FGDs showed signs of tabooing this topic, perceiving it as propaganda for LGBT relationships, and mentioned that "it's their own fault".

2. By age:

- Children, adolescents: lack of maturity to understand risks and make informed decisions. They are particularly vulnerable to physical and sexual abuse by adults, and their inability to say no and dependence on adults make them vulnerable. They may be exposed to peer-based GBV due to overweight, non-typical appearance, developmental disabilities, insufficient financial income of their parents and lack of certain clothes and gadgets. Girls emphasize their vulnerability to GBV in the online environment.
- Older people: They may be survivors of physical, psychological and financial abuse by family members or caregivers, vulnerable due to age and dependent on outside help. They have problems accessing information and resources, and feel lonely and isolated. According to the girls, this group overlaps with the group of people with chronic diseases.

'It can be any person, but I think it is more often teenagers or elderly people because they are often unable to defend themselves.' - FGD, girls, east-south

3. By social status:

- Low-income people: financial instability makes them more vulnerable to exploitation and abuse, and, according to women, they may not have the resources to protect themselves from violence.
 Most often, according to the girls, this group lives in unsafe areas and does not have adequate access to quality education, information and medical care.
- People with disabilities or chronic illnesses (including HIV status): can become survivors of physical, psychological and sexual violence. Their physical or mental disability makes them targets for abuse. A sharp deterioration in the health of one of the partners: a severe chronic illness, disability status, etc. can lead to provocation of GBV cases. It is mentioned mainly by men.

'It's not uncommon when a person becomes disabled, a year or two later, conflicts start, and then they get divorced.' - FGD, male, west, 46-60 years old

- Internally displaced persons: are in a situation of uncertainty and vulnerability, they lack support and knowledge of their rights, they do not have their own housing, have limited employment opportunities, and having children, according to women, makes them more vulnerable to violence. Some women emphasize that men who fled abroad during the war are particularly vulnerable to GBV.
- **Children who grew up without parents** remain a vulnerable group, as they are not taught how to distinguish between GBV due to the absence of a close adult. Mentioned only by men.

'Orphans, not exactly children, but adults without parents - people who did not grow up in full families. Usually, these are families when grandmother and mother raise them.' - FGD, men, centre, 18-25 years old

4. On ethnic grounds:

• **Members of ethnic minorities:** may be survivors of discrimination and violence by the ethnic majority, and stereotypes and prejudices make them targets for abuse. Girls believe that they may have problems accessing information and resources, and that their voices are less heard.

5. By place of residence:

• Women living in rural areas: have limited access to help and resources. Women believe that isolation and lack of support make them more vulnerable to violence.

'Those who live in villages and towns and can't leave, find another job, another life or change their environment.' - FGD, women, western Ukraine, 18-25 years old

6. By experience of violence:

- Post-traumatic stress disorder (PTSD)
- Those who were survivors of violence in childhood, in some cases, perpetrate violence themselves when they are adults
- Increased vulnerability to repeated violence

'If a person is constantly exposed to violence, their lifestyle will be shaped in this way.' - FGD, women, Kyiv and Bila Tserkva, 46-60 years old

In the opinion of FGD participants, vulnerability to GBV can be exacerbated when two or more characteristics are combined. For example, a low-income woman living in rural areas who is on maternity leave may be more vulnerable than another woman, or a young girl with a low income and a disability may be more susceptible to GBV than a young girl with a high income without a disability.



AN ASSESSMENT REPORT

7.

Socio-demographic differences and risk factors

7.1. Socio-demographic differences in the experience of GBV¹²

One of the important aspects of the study of GBV is the analysis of the impact of various factors, such as gender, age, region of residence and others, on the prevalence and nature of violence. In this context, gender and age appear to be key factors that correlate with different types of violence. Regional differences also play an important role in the prevalence of different forms of violence. In addition, there are certain population groups that appear to be particularly vulnerable to different types of violence, and there is a direct correlation between the experience of violence and income.

The following differences were identified:

- **Gender differences:** women are more at risk of psychological and sexual violence, harassment and persecution, and threats than men
- Age correlates with all forms of violence, except harassment and sexual violence.
 - Representatives of the middle age group (18-42 years old) more often than others report the
 experience of psychological violence, harassment and threats. All forms of GBV are mostly
 reported by the middle age group, except physical violence which is most often reported by the
 adolescent age group (13-17).
 - Representatives of the older age group are much less likely to experience physical violence
- Region, type of settlement the prevalence of different forms of GBV by region differs somewhat, with the regions of the western region not having significantly higher prevalence rates of the studied forms of GBV. However, this may be due to a higher level of "hidden". This point of view was also expressed by informants during the interviews. In general, the trends by region and settlement type are as follows:
 - Residents of the oblasts of the eastern region and residents of the largest cities (oblast centers) are much more likely to report having experienced psychological and economic violence
 - Harassment, threats and sexual violence are more frequently experienced by residents of the southern and eastern regions compared to other regions
 - There are no differences in the prevalence of physical violence and harassment depending on the region and size of the settlement, the experience is uniform.
- The factor of fragmentation of population groups correlates with all types of violence studied:
 - Vulnerable groups (families in difficult life circumstances; war survivors; families with lost housing; families with children with disabilities and special educational needs; pregnant women) have significantly higher rates of violence experience compared to those who do not belong to vulnerable groups

¹² In the quantitative survey, respondents were asked the following: How often have you experienced the following situations in the past year from people of the opposite gender? Use for answer - "never" "occasionally" "frequently" (GBV situations for each form see Annex: Situations of GBV under study). In this section, data on the experience of each form of violence = if at least one situation happened to the respondent "sometimes" or "often"

• Differences depending on the status of displacement:

- those who have not left their homes in the last two years are much less at risk of violence in general (have lower rates of experience of each type of violence)
- internally-displaced persons more often than "returnees" and "those who did not leave" experienced sexual violence
- those who "left but returned home" experienced economic violence much more often than others

Employment and wealth:

- Those who work in private companies or are unemployed are less likely to face all forms of violence.
- Those who are not working studying, temporarily unemployed, on maternity leave, or freelance face all forms of violence more often
- Family's¹³ financial situation there is a direct correlation between the experience of violence and income:
 - Respondents with low income were significantly more likely than others to have experienced all types of violence that were studied
 - respondents with "below average" income more often than those with "average and higher income" experienced economic violence



¹³ The wealth indicator is based on the question "Which statement best describes your family's financial situation?" (see Socio-demographic profile of the survey study) and the coding logic based on the answers to:

[•] Low income - We don't have enough to cover our basic needs (food, hygiene, basic medical expenses);

Below average - We only have enough for basic needs;

[•] Average and higher - We have enough to cover basic needs and some additional needs or We live in full abundance.

	N=	Psychological	Threats	Economic	Physical	Harassment	Sexual
Men	1400	65%	26%	53%	33%	36%	9%
Women	1400	70%	30%	52%	31%	54%	12%
13-17	1120	67%	27%	48%	37%	45%	10%
18-42	937	70%	31%	55%	31%	49%	13%
43-60	743	64%	24%	55%	25%	38%	10%
West	700	69%	23%	53%	29%	46%	8%
South	700	66%	32%	50%	33%	44%	13%
East	700	71%	31%	57%	34%	48%	12%
North-Center	700	64%	26%	50%	30%	42%	9%
Largest cities	1120	71%	29%	58%	32%	47%	11%
Other cities	840	65%	30%	48%	33%	44%	11%
Villages	840	65%	25%	49%	30%	42%	10%
IDP	165	74%	35%	55%	40%	57%	22%
Returners	613	74%	36%	61%	41%	53%	12%
Who didn't leave	2011	65%	25%	50%	28%	41%	9%
Not vulnerable	2035	64%	22%	48%	26%	40%	7%
Vulnerable	765	77%	43%	65%	47%	58%	21%
Low income	286	76%	46%	66%	47%	58%	20%
Below average	1080	66%	29%	56%	32%	43%	11%
Average and higher	1434	67%	23%	47%	28%	44%	8%
Non-profit/ state company employment	393	69%	28%	57%	28%	45%	13%
Private company employment	527	67%	24%	56%	23%	42%	8%
Temporarily unemployed	190	61%	36%	53%	33%	45%	16%
Self-employed	152	67%	23%	58%	27%	38%	8%
Study	151	71%	38%	49%	40%	57%	16%
Willingly temporary unemployed	136	70%	29%	56%	31%	49%	16%
Freelance	95	76%	46%	70%	41%	52%	19%
Maternity leave	44	72%	30%	51%	39%	59%	16%

8.

Impact and effectiveness of GBV response mechanisms

8.1. Consequences of GBV (assessment of the impact of GBV on psychosocial well-being, health status and coping mechanisms)

All FGI participants agree that any form of violence has a negative impact on the health and psychosocial well-being of survivors. It is impossible to say that one form of gender-based violence is less traumatizing than another. The difficulty is that trauma may not be immediately clear to a person, but it manifests itself over time. Women see the consequences of GBV more broadly and comprehensively, while men see it as one aspect. Among the possible consequences of GBV, the participants mentioned the following:

- Psychological consequences: GBV can lead to mental health problems such as depression, anxiety and low self-esteem. Women experience fear, helplessness and loss of control over their lives, withdraw from others, and this affects their self-esteem and confidence the most, according to women. The most acute conditions are depression and suicidal thoughts, which can also have physical health consequences over time.
- Physical consequences: Physical violence can result in injuries, lacerations, scratches, bruises
 and other bodily harm that require medical attention and treatment. Or it can have prolonged
 consequences, including other types of GBV that do not appear immediately, for example of neurosis.
- Sexual consequences: Sexual violence can lead to the risk of transmitting sexually transmitted
 diseases. In addition, it can cause psychological and emotional trauma related to the violation of
 intimacy and loss of trust, including suicidal thoughts and suicide.
- **Social impact:** Women experiencing GBV lose trust in others, including close family and friends. This can lead to feelings of isolation and alienation from the social environment.

Most women report that the first reaction of a survivor of GBV is always confusion. The subsequent stages and coping mechanisms depend on the survivor's awareness, personality and experience, but the initial reaction is almost always the same, especially when it is the first time such violence occurs.

Consequences of GBV on Men's Psychosocial Health:

- Confusion, loss of self-confidence, anxiety, and trust issues.
- Fear and obsessive thoughts from physical violence and harassment.
- Guilt, self-blame, and suicidal thoughts from sexual violence.
- Higher abuse of alcohol / psychoactive substances from sexual violence
- see Table: The impact of GBV on men's psychosocial health

Consequences of GBV on Women's Psychosocial Health:

- Higher confusion, anxiety, and decreased confidence.
- · Fear, obsessive thoughts, depression and suicidal thoughts from sexual violence.
- Sleep and self-care impacts from economic and psychological violence
- see Table: The impact of GBV on women's psychosocial health

Consequences of GBV on adolescents's Psychosocial Health:

- · Higher confusion, fear, feeling ashamed and fearing judgment from others
- · Loss of self-confidence from psychological, physical and sexual violence
- Sleep and Obsessive thoughts or memories of experience from physical and sexual violence
- Higher abuse of alcohol / psychoactive substances from sexual violence.
- see Table The impact of GBV on adolescents's psychosocial health.

According to the quantitative survey, almost half of the men who suffered from the forms of violence studied indicated that all types of violence, except for sexual violence, do not affect their daily lives. With regard to sexual violence, one third of male survivors indicated that it does not affect them in any way (seeThe impact of GBV on men's daily lives). For women, the impact of all forms of GBV, except for harassment, on their daily lives is more significant (see The impact of GBV on women's daily lives).

Thus, less than a third of male survivors indicated that as a result of GBV situations, they find it difficult to spend quality time with others, have a desire to withdraw, and a third of sexual GBV survivors have difficulties/indifference in taking care of themselves (indifference). For female survivors, the situation is similar, with the most common consequences being difficulties in spending time with others, a desire to isolate themselves, and difficulties/indifference in taking care of themselves.



8.2. Coping mechanisms

In general, the participants of the study give different examples of how to act in a situation of gender-based violence, all of whom say that it is necessary to act, not to keep silent about the situation. However, those who have experience of GBV emphasize that it is often difficult for survivors to navigate and act in such situations. Therefore, the FGD participants agree that first of all, it is important to recognise and accept, analyze the situation: one of the most important stages of behavior on the way to overcoming GBV. This is an important step, as denying the problem only makes the situation worse. Some girls also talk about the importance of this logic of behavior in the situation of GBV.

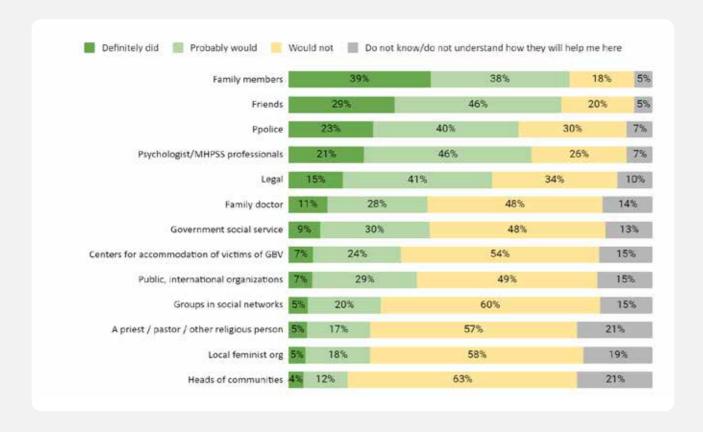
However, when discussing the further logic of behavior in the situation of GBV, there is no clear understanding for everyone what to do and where to go. The reason for this situation is a set of factors similar to the reasons for not reporting GBV - low awareness, fear, distrust of others and institutions, etc. (see section 'Hidden' GBV). In general, the participants spoke somewhat chaotically about the following behavior in the situation of GBV:

- The first reaction should be to contact law enforcement agencies. Interestingly, many girls and boys
 believe that this is the right thing to do (sometimes after contacting their parents), especially in cases
 of physical GBV or the threat of it. However, many believe that the police cannot always help in cases
 of GBV.
- Other participants emphasized that it is important to seek **psychological help first.**
- But, women, girls and boys say that they will first of all seek **support from loved ones**, parents, friends, family members. Some men say they will also turn to friends, and there is a prejudice among the male audience against the work of psychologists (they believe they can cope with their problems on their own).
- In some cases, FGD participants indicated that they would seek legal assistance to bring
 perpetrators to justice. This may include filing a report with the police or contacting lawyers. The
 experience of the women who participated in the FGDs shows that the assistance of a private lawyer
 was faster and more effective than the state services.
- Some FGD participants indicate that they will try to change the behavior of their abuser through therapy, family counseling or other methods. This can be a difficult process, and does not always yield successful results. Some girls also consider the option of talking to the perpetrator about their behavior.
- According to the FGD participants, making the decision to stop communicating, end the
 relationship, move away or limit the relationship with the abuser may be the best solution for their
 safety and emotional well-being

According to the results of the quantitative survey, as in the FGD, the majority indicated that they would turn to family members and friends. The third place was taken by the police, but here a third would not turn to them. Less than 10% of respondents would definitely turn to state services and shelters, but a third would consider them. There is a certain distance to the services of these organizations.

In a situation of gender-based violence, who would you turn to for help?

n=2800, one answer in a row



While the majority of respondents indicated that they would seek help from family members, focus groups revealed that men and adolescents have much less experience discussing GBV in their own environment. Some adolescents expressed shame or embarrassment about discussing GBV with their parents, especially when it came to aspects of sexual violence. They believe that it can be difficult to talk about GBV with parents because of possible misunderstanding or judgment from parents, and it is better to go to a specialist with your problem. However, there are also opinions among boys that such conversations can be useful for developing awareness and understanding of the problem of GBV.

In the quantitative survey, we asked those who had experienced different situations of violence what kind of help they needed. For all situations, except for sexual violence, respondents were more likely to say that they did not need help, and men were more likely than women to share this opinion (men also more often perceive situations as domestic, except for sexual violence).

Among the specific options for assistance, men in situations of psychological and physical violence most often needed to talk to someone and receive support that it was not their fault (32% and 26% respectively). In situations of sexual violence, they needed help from a specialist (27%). Almost half of women with experience of economic GBV said they did not need help. In the case of psychological violence, women more often needed support that they were not to blame (48%). In the case of sexual violence, more women than men needed protection from the perpetrator and support that it was not their fault (see What kind of help was needed for affected men and What kind of help was needed for affected women).

8.3. Evaluation of current GBV response mechanisms and their effectiveness

Existing mechanisms for responding to GBV were discussed during key informant interviews. Participants noted that it is currently difficult to assess the adequacy of prevention, the level of services for survivors and the uniformity of coverage. The situation is somewhat chaotic at the moment - a full-scale war, the activities of a large number of international NGOs, Ukrainian NGOs, and a subjective factor at various levels - psychologists, social workers are involved in helping victims of hostilities (evacuees, those rescued from shelling, rubble, those who were able to leave the occupied territories or were released from captivity), there is a lack of staff and time for "traditional" work, and priorities are changing. Therefore, experts say that the level of assistance is obviously insufficient, but it is difficult to assess exactly how much and in what way. As for the coverage of assistance, key informants agree that it is insufficient in rural areas, small towns, and in frontline areas.

'In particular, frontline cities, where large hubs of humanitarian aid are concentrated, but are support services for GBV survivors working so well there?', KII, lawyer, woman, 26-45

Key informants from cities in the frontline areas confirm that the mechanisms for responding to GBV are currently insufficient. There is simply no possibility and no point in creating a crisis room, it can be destroyed at any time, and there is a shortage of state employees to deal with this particular issue.

'We need a psychologist, we can't even dream of opening a psychological centre, even in the 50-kilometre zone. Because it will fly", KII, administrative services, man, 26-45

The key informants say that the trends are rather positive:

- A lot of work is being done to inform the population about GBV, the forms, the importance of reporting, and there are results. In particular, according to informants, the number of reports has increased, as awareness is gradually increasing and Ukrainians are learning to understand that certain situations are not normal. However, this is not yet a nationwide trend in terms of recognising and understanding cases of GBV. The worst situation with awareness and understanding of GBV is in rural areas, as there is less access, no regular communication and only one-off events, such as the 16 Days of Activism against Violence, but this is not enough.
- The number of psychosocial support specialists who can be contacted free of charge and confidentially has increased. This also, to a certain extent, reduces the stigma of seeking psychosocial health care and reduces barriers to access, as many specialists provide services online. However, there is a problem of informing the wider population about such services.

The changes that have taken place are related to the work of the public sector and international organizations. Key informants agree that the state policy on combating and preventing GBV is currently 'not up to date', despite the ratification of the Istanbul Convention. According to informants, the ratification of the Istanbul Convention remains without the adoption of a number of necessary laws and bylaws to make the provisions of the Convention work.

In general, in terms of the **effectiveness of legislation**, informants believe that the legal framework is fundamentally effective, but point out a number of problems with the effectiveness of legislation:

- the current Criminal Code needs to be improved, as it sometimes causes conflicts in the application of the law, i.e. the legislation exists and it is just necessary to practice its application taking into account the interests of the victim
- **cyberviolence is not criminalized,** and it is children and adolescents who are exposed to it quite often, they are exposed to this type of risk because children spend a lot of time using gadgets, are registered on various social networks, where they meet and communicate, and accordingly there is no practice, no norm that would establish responsibility for such violence
- there are gaps in the practice of proving sexual violence, in particular, proving the lack of
 voluntary consent. Also, law enforcement officers often link cases to the presence of physical injuries,
 which may not exist. According to informants, rape does not always entail physical resistance,
 a person may not offer physical resistance, but this does not mean that rape did not take place.
 Therefore, there are moments in proving sexual violence.

Regarding the work of response actors, informants noted the following points:

- Problems of coordination and interaction:
 - no processes of intersectoral work have been established, most of them rely on personal
 contacts rather than systematic processes. This means referrals, reporting on the results of work
 with victims, and further patronage of victims and perpetrators.
 - In practice, there is a **certain chaos in coordination** and areas of responsibility who is responsible for what, who has to submit and sign what documents.
 - regulations are developed without taking into account the situation on the ground, without discussion and building best practices
 - the issue of specialization of human rights defenders has not been resolved, they should have a specialization in dealing with GBV situations
- Lack of safe spaces: lack of safe places for victims, centers, spaces where victims can receive the necessary support and assistance services
- Insufficient work with families in difficult life circumstances to prevent possible GBV
- Lack of training to build capacity to detect and respond to GBV all informants noted that the number of training for response actors on GBV, recognition of GBV and the importance of recording cases of GBV has increased. However, according to the informants' experience, this is not enough, and there is still a problem of stigma and stereotypes among responders and those assisting GBV survivors.

Another problem with the work of social services was pointed out, namely the decline in service provision during the period of reforms, changes in the structures of social services, for example, in 2023, the reform of children's services took place, and accordingly, the persons responsible for coordinating domestic violence changed. For some time, functions were transferred, and the work of relevant specialists, usually new professionals, often without experience, was established. This led to additional chaos and a lack of response.

The professional experience of one of the key informants sheds some light on the situation, which explains why the participants of the FGDs communicated the problem of vulnerability of women on maternity leave, while in the general quantitative research this problem was not so much highlighted. Thus, the informant highlights the problem of the stereotype of pregnant women or women who have given birth - they are automatically perceived as a happy family.

'We wanted to leave booklets about GBV in the perinatal center. The management did not allow us to do this, because there are pregnant women here, they came to give birth, so it means automatically a happy family, as if they were castrated before the message", KII, social worker in an NGO, woman, 26-45

At the same time, FGD participants noted difficulties in finding free psychological and legal assistance for victims of GBV (no specifics by socio-demographic factors were recorded). Information about such services is not accessible to everyone, as advertising is limited to some channels, such as the official websites of charitable organizations.

At the same time, women believe that information about support services for GBV survivors should be more widely disseminated and accessible. This may include more aggressive advertising through various channels that would be accessible to a wider audience. According to women, this would help to make such services accessible to all who may need help and ensure more effective access to resources. The role of NGOs was particularly highlighted, with women stating that NGOs such as Crisis Psychological Care Centres play an important role in providing assistance to GBV survivors. However, not everyone may be aware of their work and services. In general, some mentioned several organizations that provide support for survivors of GBV, such as crisis rooms, shelters and organizations that provide psychological and legal assistance.

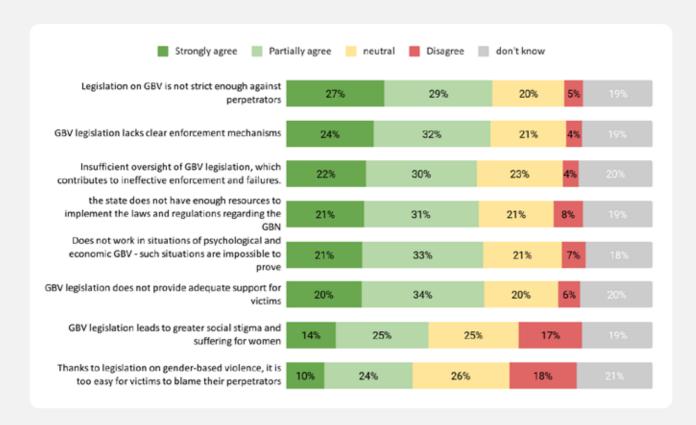
There is a general consensus that it is better to seek advice from NGOs than from state organizations. The difference in preference between state and NGOs may influence the choice of a survivor. Some believe that government organizations are more trustworthy, while others believe that NGOs can provide faster and more effective assistance.

'The right question here is: who will provide assistance faster and who will have it free of charge. Because in 90 per cent of cases, survivors of violence have no money, they flee with only one bag at most.' - FGD, female, east-south, 18-25 years old

On average, half of the respondents in the quantitative survey consider legislation on GBV to be ineffective. The biggest gaps, according to more than half of the respondents, are the mechanisms for punishing perpetrators, which are insufficient (58%) and the lack of clarity of mechanisms for dealing with GBV cases (56%). The smallest gaps, according to the respondents, are the unfriendliness of legislation towards women (39%) and the fact that it is very easy for victims to blame perpetrators (34%).

Assessing the effectiveness of legislation

n=2800, one answer in a row

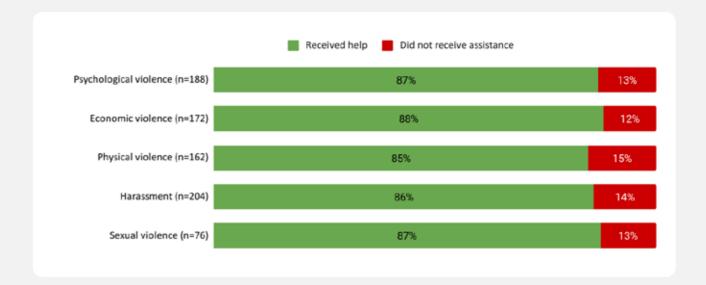


Those who have sought support in situations of GBV (in the study, this included the experience of contacting psychologists, social workers, and hospitals) say they received help and felt safe. With the exception of the respondent who went to court and did not receive help.

On average, 86% of the respondents who applied received support (remember Seeking help in cases of violence, see 'Hidden' GBV). Thus, the majority of victims of various forms of violence who have requested assistance have received it. In general, requests for support are not ignored and survivors of any form of violence are able to get help. As the data does not significantly differentiate between men and women, this suggests that assistance is provided regardless of the victim's gender (see Diagram: Experience of receiving assistance by gender).

Experience of receiving assistance

% of those who experienced situations of violence and seeking help, one answer in a row





9.

Challenges and gaps in existing support and accountability systems for GBV survivors

9.1. Identify challenges and gaps in existing support and accountability systems for GBV survivors

Key informants identified a number of challenges and gaps in existing support systems for GBV survivors that require attention and improvement, including

Availability of qualified personnel:

- The outflow of specialists in frontline areas (e.g. social workers, social psychologists and psychologists - they have gone abroad) and the lack of specialists to cover community issues, including gender-based violence.
- Low salaries in the public sector, low financial motivation of employees, but a significant amount of work, in addition, this work has a lot of paperwork and emotional stress (a specialist faces different segments of the population, faces grief, emotions of others).
- Insufficient motivation and responsibility of those who are responsible for the problem of GBV in villages, usually there are no separate specialists, and the functions are combined with other duties. e.g. community heads are also responsible for combating violence.
- **Insufficient, irregular training for professionals** on the problem of GBV, how to recognize violence and response mechanisms. Regular training for police, social workers, and school staff is important.
- Stereotypes, beliefs and stigmas of perpetrators they can react to survivors in a supercilious, humiliating way.

Infrastructure to help victims:

- Lack of crisis centers, safe spaces for women, including information for women and adolescents (girls and boys).
- Insufficient coordination between different support services and organizations can lead to duplication of efforts or gaps in meeting the needs of victims. Chaotic response system, coordination, interaction and feedback in practice, there is no clarity on who is responsible for what.
- Lack of services and unresolved algorithm of actions for the population of rural areas.
- Lack of a single place, organization where victims can receive the necessary information and assistance in one place.

Resources for GBV education and prevention:

- Insufficient education on GBV adapted for different social demographic groups and with an
 emphasis on practical things, not just theoretical (everyday examples of GBV situations for better
 recognition).
- Insufficient sexual education of children and adolescents as a prevention of GBV.
- Accessibility of information many potential survivors do not have sufficient information about the
 availability and mechanisms of access to support. Low awareness may prevent them from identifying
 situations of violence and seeking help.

System gaps:

- The existence of existing laws and policies related to the protection and support of survivors of violence, as well as their implementation, may be incomplete or uneven across regions.
- The judicial system is not victim-friendly.

GENDER-BASED VIOLENCE IN UKRAINE AMID WAR:

- As for work with victims, there is still a lack of a mechanism for retraining and vocational
 education to return to the labor market and provide for themselves, retraining should be
 coordinated with the time, demand and capabilities of victims, it cannot be general standard
 programs.
- **Programs for working with perpetrators** need to be changed and improved, as noted by both informants and FGD participants. There are always two parties in the situation of GBV, and it cannot be that work is carried out with only one of them, it is ineffective. Problems of existing programs of work with perpetrators, mentioned by informants:
 - **Insufficient** there is no systematic work at the state level to create and improve programs for working with offenders.
 - **Formal** often those programs that exist are formal, there is no serious commitment to undergo these programs.
 - **Stigmatization** programs/program specialists often stigmatized offenders, which will further reduce the proportion of those who take them.

Addressing these challenges and gaps in support systems requires a comprehensive approach that includes improved policies, increased funding, improved access to information and services, as well as staff training and public awareness.

Some of the women who participated in the FGD claim that some help centers do not provide qualified support, which makes people unwilling to seek help in the future. They believe that the existing services are useful and accessible, but many FGD participants do not trust the psychologists and psychotherapists working in these centers. Men also noted that there is a lack of trust in psychologists, and people confuse psychologists and psychiatrists, believing that the patients of the former are people with mental illnesses.

Among the FGD participants, there were several who had gone through some form of support - from staying in shelters and using help of charitable foundations to using state and private lawyers - who remained dissatisfied with their help and disappointed with both the process and the outcome it led to.

Key gaps in the work of the response actors according to the FGD participants:

- Insufficient qualification of specialists, negative experience with psychological support:
 cases have been identified where support centers or organizations do not provide qualified help,
 provide only superficial consultations and cannot provide effective support. There is a distrust of
 psychologists and specialists who conduct training, believing that it can only do harm. There is also
 a certain distrust of psychologists' support in messengers such as hotlines (Viber, Telegram), and a
 prejudice that a free psychologist cannot be a qualified specialist.
- Lack of response from law enforcement agencies: the police response can be formal, the police can only draw up a report and release the offender. Many women believe that in a situation of GBV, the perpetrator is often not punished it is very difficult to prove his/her guilt and there are many obstacles for the victim to overcome. In general, the level of trust in law enforcement agencies in situations of GBV is very low. Women most often believe that the police behave incompetently, and sometimes it is even more difficult for a victim to communicate with them because of their biased attitude.
 - Girls tend to have more trust in the work of the police, although they say they have heard of cases where the police acted inappropriately. But there is a perception among adolescents that such cases are now changing for the better.
- Judgment from service workers who are supposed to help often judging and trying to blame
 the victim for their own suffering, devaluing their feelings and experiences of GBV, considering such
 problems unimportant, which can lead to feelings of helplessness and self-doubt. Those who seek
 help and disclose their perpetrators are considered traitors by their peers and are then bullied.

Communication - respondents noted that their cities regularly conduct advertising campaigns on GBV - they tell about what to report, provide contacts, but this is more often communication aimed at female victims, there is no communication aimed at men. There is also a lack of communication about specific manifestations of GBV, about situations that are already GBV.

9.2. Request to address gaps in assistance to GBV victims

During the FGDs, participants also discussed their vision and expectations regarding prevention and assistance to victims. The key thing that FGD participants emphasized is to increase awareness. We need to explain what GBV is, how it can be recognised, why the survivor cannot be the one to blame, how to behave in case of GBV and where to go, etc. Women and girls (men - partially) express the need for more information about available resources and services for survivors. They believe that training, lectures and awareness campaigns are needed to make more women aware of these opportunities. This is important not only for potential victims, but also for those who are in the same environment as the perpetrators of violence (examples include the workplace).

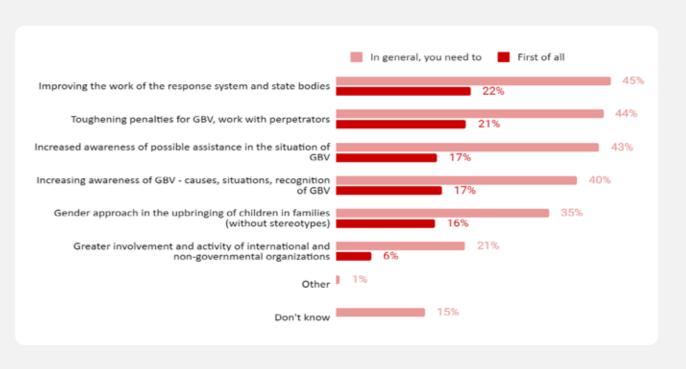
In the quantitative survey, respondents did not identify a single solution to reduce gender-based violence; it should be a combination of measures. The respondents see the following actions as necessary: improving the response system (45%), toughening penalties, working with perpetrators (44%), raising awareness and increasing information (43%).

The gender approach in childrearing was not a priority and was ranked only 5th in the statistics, which may be due to respondents' lack of understanding of this type of measure and its effectiveness, as well as certain prejudices against the name "gender approach".

All programmes were more often chosen by women than men, with adults (18-60) and residents of large cities being the most likely to choose them (see What is needed, first of all, to reduce the level of gender-based violence in Ukraine

What is needed, first of all, to reduce the level of genderbased violence in Ukraine

n=2800, multiple choice (in general) / one answer (first of all)



When discussing important steps to help GBV survivors, the following priority needs to address GBV:

- **1. Safety and Support** safe shelters and protection measures. Women and girls feel the need for safety and psychological support. They point to the need for real protection measures against violence, safe shelters, and protection for survivors, where they can rest, calm down and receive support in a stressful situation. The men point to roughly the same priorities.
- **2.Medical and Psychological Support** Competent and psychological advice, adequate, specific advice from a competent doctor in case of physical or sexual violence, as well as psychological support, including confidentiality and provision of a quiet place to rest.
- **3.Legal and Law Enforcement Measures** competent legal aid. **Legislative regulation and effective work of law enforcement agencies** are also about ensuring security but from a different perspective. The need for a quick response from the system, state institutions, law enforcement agencies (severe punishment for the crime effective work of law enforcement agencies)
- **Punishment of perpetrators:** Women demand tough punishments for perpetrators of gender-based violence. They believe that without real punishment for perpetrators, victims will not feel protected.
- **Legal aid:** legal advice on survivors' rights and legal protection
- **4. Social Services and Support Centers (with qualified staff and decent wages)** psychologists, social workers, doctors, lawyers, and children's specialists in shelters. All participants believe that it is important to have the necessary qualified specialists in the shelter centers, including psychologists, social workers, police representatives, doctors, lawyers, nutritionists, children's specialists, and nannies. The presence of feedback and the quality of services are considered important (also mentioned by men) women have fears that a victim in crisis can be taken advantage of in some way, but for some, it is not important for a psychologist to have a specialized education. Accordingly, there is a demand for more information about services for survivors of GBV: Women point out the importance of informing about the work of social services and psychological support for women facing violence.
- **Patronage of state institutions** (e.g. social services) over the family where GBV was reported, development of social services: importance of quick access to such services on the ground.
- Anonymous groups/support centers at NGOs
- **5.Monitoring, Accountability and PSS for Perpetrators/** They believe that it is necessary **for perpetrators** (the method also depends, according to women, on the type of GBV):
- To be more liable before the law: there is a need to change legislation to make perpetrators more accountable for their actions. This may include harsher punishment, community service, large fines, the obligation to pay for the survivor's psychological rehabilitation and their own mandatory psychological rehabilitation. Especially important in cases of physical and sexual GBV.
- **Psychological support for perpetrators:** it is important for perpetrators to receive psychological support to identify and understand the causes of their aggressive behavior. This can help to prevent recurrence of violence and rehabilitate perpetrators. Relevant for all types of GBV.
- **Monitoring the perpetrator** the person who is often complained about in relation to GBV. Some women say that such people should be closely monitored so that they feel it and cannot escape punishment if they commit GBV.

Focus on Adolescents - Assistance for adolescent survivors. Educational materials and sex education. There is a perception among girls that adolescents need more attention and assistance in dealing with GBV situations because their psyche is still in the process of formation.

Expectations from services for adolescent survivors of GBV (prevention and work with the consequences of GBV), in addition to those for adults, which are also relevant for adolescents:

- **More information:** posting information materials on gender-based violence on school blackboards or in other places where adolescents can read them, introducing sex education classes at school. This will help raise awareness and understanding of the problem among adolescents.
- **Awareness campaigns for parents:** it is necessary to explain the manifestations of GBV among adolescents, how to recognise it, how adolescents should react, etc.
- Awareness raising events in schools: Conducting awareness raising events and training in schools for adolescents on gender-based violence, its prevention and actions to take in case of such a situation.
- **Holding supportive events in an informal way** (art therapy, concerts with relevant stories): it would allow for more information about GBV cases to be shared and processed in a less traumatic way.
- **Availability of psychologists** in each school who conduct diagnostics, testing, identify GBV in adolescents, work with possible consequences of GBV
- Creation of safe spaces: development of programmes and initiatives to create places where adolescents can seek support and assistance in cases of GBV. This can include school spaces or specialized centers for adolescents. The girls specifically mention that psychologists in such places should be separate for adolescents and children not the same as for adults.



10. Conclusions

Thus, in contemporary Ukrainian society, we live in a gender order that still has significant patriarchal influences. Patriarchal influences in the modern gender order are reproduced (maintained), among other things, through the culture of violence, which is why these topics are so closely intertwined. Patriarchy (inequality based on gender and age) affects gender socialization, the resources and opportunities we have access to, gender expectations (images, roles), and ultimately, as a result, gender inequality and gender discrimination.

I am very pleased that this patriarchy is much less evident in the younger generation, that women do not reproduce it as often as they used to (which was about the same as men). But it is still very important to keep in mind that answers, assessments of other people's experience or self-assessments of one's own experience by men and women come from different, unequal positions - they cannot be equalized, comma-separated, generalized, that's what I want to warn you about!

Awareness of gender-based violence is quite stereotypical for the study participants, especially men - they understand and recognise extreme forms of violence with visible consequences to a greater extent. At the same time, there is an increase in attention to psychological violence. Perceptions of GBV depending on the age, region and experience of the participants. For example, women from different regions have different perceptions of GBV, and adolescents and adults have different perceptions of the concept. Participants note that the full-scale war has a significant impact on their values and views, prompting them to rethink gender roles and the nature of violence.

Most participants do not have sufficient information about the problem, especially in rural areas. Discussing GBV in families is complicated by a lack of awareness of the problem, cultural and religious restrictions, and a lack of communication skills on these topics. According to adolescents, school can be a source of accurate information about GBV, but the format needs to be adapted to make lectures more interesting and practical.

The study of different forms of GBV revealed that the majority of respondents had experienced psychological and economic GBV, as well as harassment. Gender, age and region of residence have an impact on the prevalence of violence. Women and younger people are more likely to experience psychological violence, while physical violence is more common among middle-aged people. Regional differences are also observed, with higher rates of violence in cities and some regions. Vulnerable groups, such as displaced persons and low-income families, are particularly exposed to violence.

Most victims of GBV do not seek help, especially in small towns. The main reasons for this are a lack of faith in change through reporting (27%), a perception that GBV is a private matter (24%), fear of repercussions from others and financial dependence on the perpetrator. Stereotypes and lack of information complicate the situation. Problems with reporting include indifference, bureaucracy, low qualifications of specialists and fear of being accused of provocation. Women are more likely to face these problems, highlighting the gendered aspect of GBV.

Respondents see the main causes of gender-based violence in the general situation and personal characteristics (42% and 40% respectively), especially often mentioned by adult respondents. The discussion of GBV points to the impact of stereotypes and inequality, traditional upbringing and cultural factors on the normalization of violence. Women and girls focus more on the systemic causes of GBV, while men are more likely to mention stress and loss of control as factors. Study participants report low levels of awareness of protection for GBV survivors and many barriers to accessing support. Different social and demographic groups, including children, adolescents, people with low income and LGBTQ+ people, are perceived as particularly vulnerable to GBV. The study shows that gender, age, displacement status and family financial situation influence the level and nature of violence.

The study participants are convinced that any form of violence has a negative impact on the health and psychosocial well-being of victims. Women are more likely to understand the wide range of consequences of gender-based violence, while men usually see only one aspect. A variety of consequences are noted, including psychological, physical, sexual and social. Participants emphasize the importance of acting in situations of violence, but point to the difficulty of finding help. Many point to a lack of coordination of services and insufficient information about support services. Although awareness of gender-based violence is growing, problems in the system have not yet been resolved.

11.

Recommendations

Recommendations for targeted program development to prevent and address GBV based on research findings

Expanding the understanding of gender-based violence (GBV):

- Deepen discussion and education about psychological, economic and physical, sexual genderbased violence. This is important to overcome stereotypes and increase awareness and capacity to recognize GBV.
- Training for parents, educators and support groups on how to talk about GBV for different ages of children.
- Active educational work with social and behavioral thinking adapted to different socio-demographic groups is necessary to support victims in understanding that violence is not their fault, that it is not normal and that it is not just "part of the culture".
- Presentation to the GBV cluster and the advocacy working group to further enhance recommendations and generate support.
- Initiate a call on local and international donors to increase funding for GBV programs in Ukraine.

Adaptation of educational programs: Taking into account regional and age differences in the development of educational programs to reach students more effectively. Raising awareness of GBV among the population through educational initiatives that focus on applied knowledge and skills to recognize different forms of GBV.

Increase awareness of and access to support services: Make information about psychological and legal support services more accessible, in particular in rural areas and places of contact with vulnerable populations (e.g., for contact with adolescents - in schools; for contact with women - in stores with goods for women (cosmetics, etc.), perinatal centers, etc.; for contact with older people - in social services, post offices). Increase the visibility and publicity of existing resources for GBV survivors.

Increase empathy and support: Encourage the development of empathy and understanding of the problem of gender-based violence among men and the general population. Promote initiatives aimed at increasing willingness to help and openness to talk about GBV.

Increased awareness of the impact of GBV: Increased awareness of the health and psychosocial impacts of GBV. Recognize the complexity of the impacts and develop initiatives to address them.

Recommendations for advocacy for necessary improvements in the GBV response system

- It is important to **advocate for increased funding for the GBV program,** as only 1% of funding in 2023 in Ukraine is allocated for GBV programs, which is only 33% of the needs in the field of GBV, while at least 2.5 million people need support in 2024.
- It is important to actively advocate for urgent decisions to implement the provisions of the Istanbul Convention

Recommendations for policy changes and interventions to combat GBV effectively

- Efforts should be aimed at **building independent institutions** and ways to obtain assistance and protection at the community level to address the problem of victim helplessness due to a sense of impunity and the involvement of the perpetrator in the authorities (not just law enforcement).
- Increase the efficiency of the judicial system: Ensure that GBV cases are dealt with promptly and fairly, and that the rights of survivors are protected. Increase confidence in the justice system through professional development and specialization of specialists.
- **Improving the response and support system:** Increase coordination between governmental and civil society organizations for an effective response to GBV. Reducing stigma and prejudice among response and support workers.

Recommendations for further research

- **Developing and testing communication on GBV** for different target audiences to achieve the goals of broadening the understanding of gender-based violence
- The study is representative of the proportions of people affected by different forms of GBV to further understand the problems and their solutions
- **Conducting the second wave of the study** (approximately in 5 years) to track trends among different target populations



12.

Annex: Diagrams and tables



Table 1: **FGD design**

Macroregion	Region	Target	Girls	Women	Women	Women	Boys	Men	Men	Men
			13-17	18-25	26-45	46-60	13-17	18-25	26-45	46-60
North-Kyiv	Kyiv (+ Bila Tserkva, Obukhiv, Fastiv, Vasylkiv)	3	FGD		FGD	FGD				
	Zhytomyr, Chernihiv, Poltava	2		FGD				FGD		
	Villages	1					FGD			
West- Center	Lviv	2		FGD			FGD			
	Volyn, Zakarpattia, Ivano-Frankivsk, Rivne, Khmelnytskyi, Ternopil, Chernivtsi, Vinnytsia, Kirovohrad, Cherkasy	2	FGD		FGD					
	Villages	1								FGD
East- South	Dnipro, Kharkiv, Odesa	2			FGD				FGD	
	Zaporizhzhia, Sumy, Kherson, Mykolaiv	2		FGD			FGD			
	Villages	1	FGD							
	In general	16	3 FGD	3 FGD	3 FGD	1 FGD	3 FGD	1 FGD	1 FGD	1 FGD

Table 2: **KII design**

# KII	Key informants	Location	Gender	
KII №1	persons affected by GBV	Bila Tserkva	female	
KII №2	persons affected by GBV	Dnipro	male	
KII Nº3	persons affected by GBV	Ivano-Frankivsk	female	
KII Nº4	persons affected by GBV	Sumy	female	
KII №5	persons affected by GBV	Dnipro	female	
KII №6	persons affected by GBV	Odesa	male	
KII Nº7	legal aid (not gov)	Kyiv	female	
KII Nº8	legal aid (not gov)	Kyiv	female	
KII №9	legal aid (not gov)	Kyiv	female	
KII №10	social worker	Rivne	female	
KII Nº11	social worker	Lviv	female	
KII Nº12	police	Ivano-Frankivsk region	female	
KII Nº13	community leaders	Zytomyr region	female	
KII Nº14	community leaders	Kherson region	male	
KII №15	community leaders	Zakarpattia region	female	
KII №16	school (psychologist, social pedagogue)	Харікв	female	
KII Nº17	school (psychologist, social pedagogue)	Bila Tserkva	female	
KII №18	school (psychologist, social pedagogue)	Kharkiv	female	
KII №19	government	Kyiv	female	

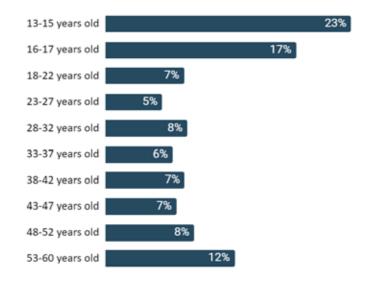
Table 3: **Survey design**

	Largest cities (million+)	Small cities	Villages	Total	Women 18-60	Men 18-60	Girls 13-17	Boys 13-17
East	300	200	200	700	200	200	150	150
West	300	200	200	700	200	200	150	150
North-Center	300	200	200	700	200	200	150	150
South	300	200	200	700	200	200	150	150
In general	1200	800	800	2800	800	800	600	600

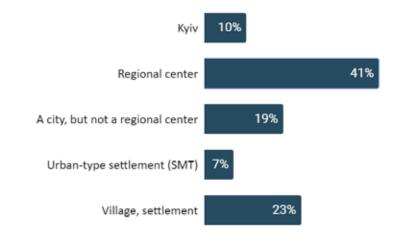
Diagrams: Socio-demographic profile of the survey study

n=2800 (all respondents), one answer

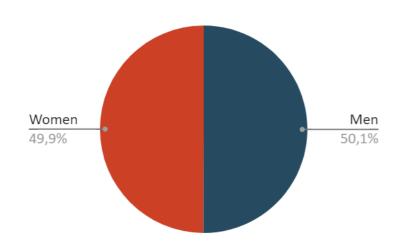
Age



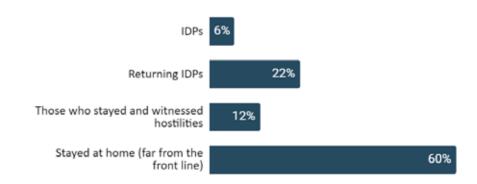
Location



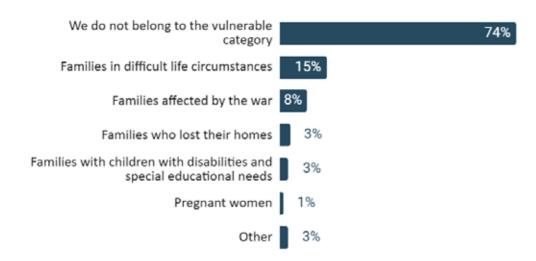
Gender



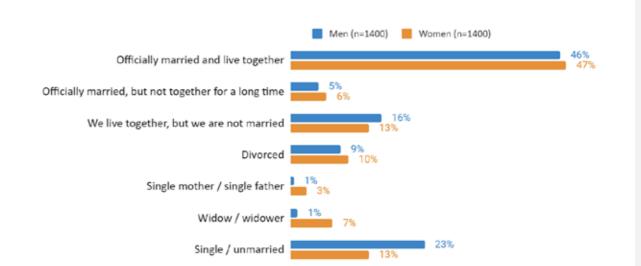
Status



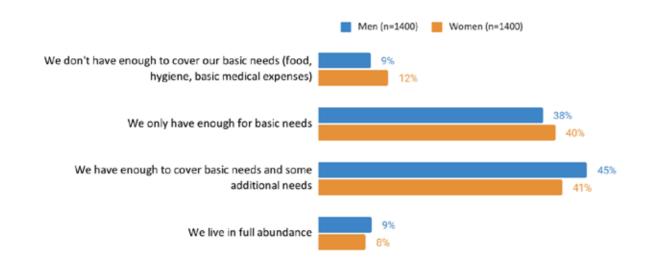
Vulnerable groups



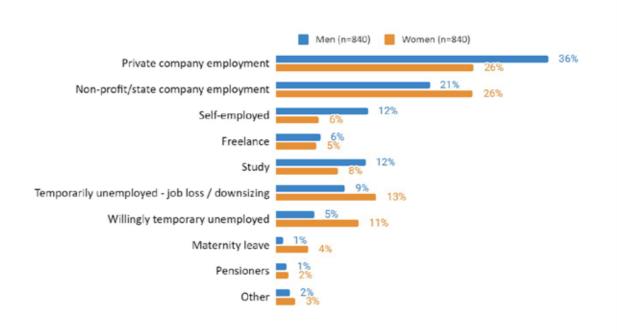
Marital status (only for 18 years old +)



Level of income



Employment (only for 18 years old +)



Education

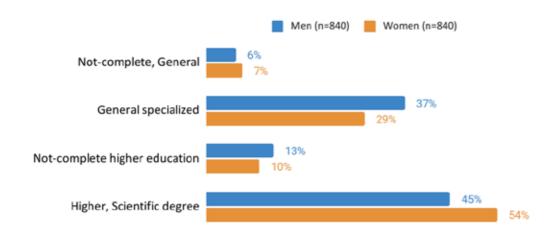


Table 4: Understanding gender by gender, by age

	Boys and men	Girls and women	13-17	18-42	43-60
	n=1400	n=1400	n=1120	n=937	n=743
Sex is about biology, and gender is about society	34%	36%	35%	36%	33%
Gender is a newer and more widely used term for sex	26%	29%	26%	28%	29%
It is a synonym for sex	20%	17%	16%	21%	19%
Sex refers to both men and women, while gender refers to women only	4%	5%	5%	4%	5%
Don't know	17%	13%	19%	11%	14%

Table: Recognising of cases of psychological violence, by age

% those who experienced at least one situation of psychological violence, one answer

	13-17	18-42	43-60
% to the age group	n=751	n=654	n=476
Did not attach importance	28%	30%	36%
Realized that it was bad	26%	29%	27%
Blamed yourself	13%	13%	10%
It was a GBV	13%	12%	9%
Don't remember	20%	13%	15%
Other	1%	2%	2%

Table: Recognising of cases of psychological violence, by age and gender

% those who experienced at least one situation of psychological violence, one answer

	Men			Women			
	13-17	18-42	43-60	13-17	18-42	43-60	
% to the age group of the corresponding gender	n=343	n=306	n=258	n=408	n=348	n=217	
Did not attach importance	33%	32%	37%	24%	27%	35%	
Realized that it was bad	22%	25%	24%	29%	32%	30%	
Blamed yourself	14%	16%	11%	12%	11%	8%	
It was a GBV	9%	8%	7%	16%	16%	11%	
Don't remember	22%	16%	19%	18%	10%	11%	

Table: Recognising of situations of financial violence by age

Base - those who experienced at least one situation of financial violence

	13-17	18-42	43-60
% to the age group	n=542	n=516	n=410
Did not attach importance	32%	32%	33%
It was a GBV	21%	26%	28%
Realized that it was bad	12%	13%	13%
Blamed yourself	10%	15%	10%
Don't remember	23%	13%	14%

Table: Recognising of situations of physical violence by age

%, those who experienced at least one situation of physical violence, one answer

	13-17	18-42	43-60
% to the age group	n=411	n=287	n=187
Did not attach importance to the situation when it happened	24%	19%	23%
Realized that it was bad, but did not analyze it	21%	26%	29%
Realized that it was a situation of gender-based violence	19%	23%	20%
Blamed yourself for provoking the situation	14%	18%	16%
Don't remember	21%	11%	11%
Other	1%	2%	1%

Table: Recognising of situations of sexual violence by age

%, those who experienced at least one situation of sexual violence, one answer

	13-17	18-42	43-60
% to the age group	n=106	n=117	n=71
Did not attach importance	12%	20%	15%
It was a GBV	29%	24%	29%
Realized that it was bad	20%	26%	23%
Blamed yourself	25%	18%	16%
Don't remember	13%	10%	16%

Diagram: Measures to prevent gender-based violence have been taken in the community/city in the last year

n=2800, multiple choice

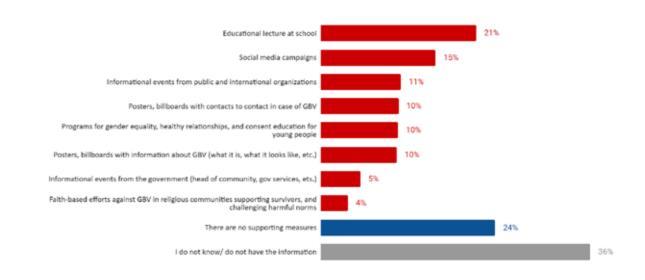


Table: Measures to prevent gender-based violence have been taken in the community/city in the last year by gender, by age

% for all respondents, multiple choice

	Men	Women	13-17	18-42	43-60
	n=1400	n=1400	n=1120	n=937	n=743
Educational lecture at school	19%	23%	34%	15%	8%
Social media campaigns	13%	18%	14%	18%	13%
Informational events from public and international organizations	9%	12%	8%	14%	11%
Posters, billboards with contacts to contact in case of GBV	9%	12%	10%	12%	9%
Programs for gender equality, healthy relationships, and consent education for young people	9%	12%	11%	13%	7%
Posters, billboards with information about GBV (what it is, what it looks like, etc.)	10%	11%	9%	13%	9%
Informational events from the government (head of community, gov services, ets.)	5%	5%	4%	6%	5%
Faith-based efforts against GBV in religious communities supporting survivors, and challenging harmful norms	3%	4%	4%	3%	3%
There are no supporting measures	25%	22%	20%	25%	26%
I do not know/ do not have the information	38%	34%	35%	34%	42%

Table: The situations of psychological GBV that have happened to respondents in the last year "Sometimes" or "Often"

	Men	Women	Boys	Girls	
% to the group of respondents	n=840	n=840	n=560	n=560	
commented derogatorily on your appearance, features, or body structure	31%	40%	34%	46%	
humiliated or insulted you in the presence of other people or in private	33%	42%	32%	39%	
made you feel weak, "inferior" or "incapable of anything" (hypercritical, bullying and harassment)	34%	40%	30%	35%	
get angry when you talk to people of the opposite sex	41%	39%	26%	28%	
decide what things to wear and what not to wear	36%	27%	33%	39%	
suspect you of infidelity	38%	29%			
insisted on knowing where you are in a way that goes beyond normal curiosity	32%	27%	25%	28%	
you were not allowed to see your friends / relatives or tried to limit communication with friends / relatives	25%	23%	23%	29%	
restricted or monitored your use of social media (Facebook, Instagram, etc.)	22%	17%	25%	27%	

Table: The situations of harassment, threats that have happened to respondents in the last year "Sometimes" or "Often"

n=840			
11-040	n=840	n=560	n=560
19%	24%	19%	23%
15%	17%	18%	14%
7%	8%	9%	7%
6%	6%		
4%	6%	6%	7%
5%	6%		
	15% 7% 6% 4%	15% 17% 7% 8% 6% 6% 4% 6%	15% 17% 18% 7% 8% 9% 6% 6% 4% 6% 6%

Table: The situations of economic GBV that have happened to respondents in the last year "Sometimes" or "Often"

	Men	Women	Boys	Girls
% to the group of respondents	n=840	n=840	n=560	n=560
controlled your purchases	34%	34%	31%	34%
criticized for spending money on your needs	37%	37%	30%	28%
decide for you what you need to buy and how much (for example, how many cigarettes to smoke or how many sanitary pads to use)	28%	20%	28%	28%
criticized that you do not earn enough/ do not earn money	42%	30%	15%	15%
restrict your attempts to work/get a job/go to work	14%	18%		
not allowed to use bank cards at your own discretion	12%	11%	19%	16%
take away money	15%	10%	16%	13%
jointly acquired property was not registered in your name, without your consent	6%	6%		

Table: The situations of physical GBV that have happened to respondents in the last year "Sometimes" or "Often"

	Men	Women	Boys	Girls	
% to the group of respondents	n=840	n=840	n=560	n=560	
pushed you or shoved you	22%	24%	30%	31%	
slapped you	16%	10%	22%	12%	
thrown a hard object at you	11%	10%	15%	10%	
grabbed you or pulled your hair	7%	10%	13%	13%	
punched you or beaten you with a hard object or kicked you	11%	8%	16%	8%	
tried to suffocate or strangle you	7%	6%	8%	5%	
beat your head against something	5%	5%	9%	5%	
burned you	4%	3%	5%	5%	
cut or stabbed you or shot at you	4%	2%	5%	3%	

Table: The situations of harassment that have happened to respondents in the last year "Sometimes" or "Often"

	Men	Women	Boys	Girls	
% to the group of respondents	n=840	n=840	n=560	n=560	
intrusive questions about your private life that offended you	21%	30%	17%	28%	
intrusive comments about your appearance that offended you	18%	24%	17%	32%	
inappropriate staring or leering that you found intimidating	12%	25%	14%	34%	
inappropriate advances that offended you on social networking websites (Facebook, Insta, etc.)	12%	27%	15%	28%	
inappropriate invitations to go out on dates	13%	27%	17%	24%	
unwelcome touching, hugging or kissing	14%	23%	17%	25%	
sexually suggestive comments or jokes that offended you	14%	24%	13%	26%	
somebody sending or showing you sexually explicit pictures, photos or gifts that offended you	8%	15%	9%	15%	
unwanted sexually explicit emails or SMS messages that offended you	8%	13%	9%	14%	
somebody indecently exposing themselves to you	7%	8%	10%	6%	
somebody making you watch or look at pornographic material against your wishes	5%	5%	7%	7%	

Table: The situations of sexual GBV that have happened to respondents in the last year "Sometimes" or "Often"

respondents in the last year sometimes of often	Men	Women	Boys	Girls
% to the group of respondents	n=840	n=840	n=560	n=560
has someone made you take part in any form of sexual activity when you did not want to or were unable to refuse	6%	8%	6%	7%
forced you to have sexual intercourse by holding you down or hurting you in some way	5%	5%	7%	5%
have you consented to sexual activity because you were afraid of what might happen if you refused	5%	7%	7%	5%
someone insisted/forced you to have sexual activity with the aim of getting pregnant	5%	2%	4%	5%

Diagram: Seeking help in cases of violence, by gender

% of those who have experienced situations of violence, one answer

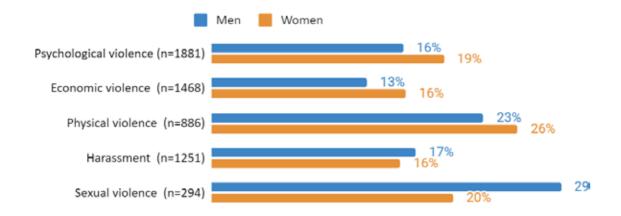


Table: Seeking help in cases of violence, by region, type of settlement

	Psychological violence	Economic violence	Physical violence	Harassment	Sexual violence
База	n=907	n=747	n=455	n=502	n=127
West	16%	15%	25%	17%	31%
South	21%	16%	24%	17%	15%
East	21%	17%	31%	18%	32%
North-Center	12%	10%	17%	13%	22%
Largest cities	18%	13%	23%	14%	17%
Other cities	22%	19%	28%	21%	40%
Villages	14%	13%	22%	16%	17%
Villages	14%	13%	22%	16%	

Table: Reasons for not reporting about GBV

% of the group, multiple choice

But often people do not seek GBV support, do you think / do you know why this happens?	Men	Women	13-17	18-42	43-60
Base	n=1400	n=1400	n=1120	n=937	n=743
Do not believe that seeking help will change anything	23%	30%	21%	29%	31%
It is a private matter	28%	20%	24%	21%	26%
Privacy concerns	18%	22%	17%	22%	23%
Fear of being negatively perceived by others	17%	22%	21%	21%	16%
Lack of knowledge about available services	18%	19%	15%	21%	20%
Fear of the offender's reaction (persecution, revenge)	13%	19%	15%	19%	13%
Fear of being accused of provocation	12%	20%	17%	17%	12%
Lack of knowledge about GBV	14%	14%	15%	14%	13%
Do not identify the GBV	12%	13%	13%	14%	9%
Fear of talking to strangers	9%	13%	13%	10%	9%
Rejection of the need for help	11%	10%	11%	11%	8%
Confidence that they can handle themselves	11%	9%	10%	10%	10%
Lack of services and specialists to contact	7%	9%	7%	8%	9%
Concerns about the competence of specialists	8%	7%	7%	8%	8%
There is no time and energy to seek support	6%	7%	6%	6%	7%
It is believed that only people with disadvantages may suffer from GBV	6%	4%	6%	5%	3%

Table: Problems faced by survivors of gender-based violence when seeking help by gender, age

% of the group, multiple choice

What problems do survivors of GBV face when seeking assistance,

in your opinion or from your own experience?	Men	Women	13-17	18-42	43-60
	n=1400	n=1400	n=1120	n=937	n=743
Misunderstanding, indifference to your problem	30%	36%	32%	34%	33%
Accusing you of provoking a situation of violence	21%	30%	25%	31%	18%
The need to provide many conditions and documents (e.g., a statement from the police, a fluoroscopy, etc.)	16%	24%	14%	25%	21%
Lack of necessary specialists in your community	18%	21%	15%	23%	20%
Unwillingness of specialists to work on your case (attempts to reconcile you with the offender,					
presenting the situation as something everyday, ordinary, putting your appeal "on the table", etc.)	16%	21%	19%	21%	16%
Low qualification and knowledge of specialists on how to work with your case	16%	18%	13%	20%	20%
Lack of coordination between response services to GBV cases	12%	13%	9%	16%	13%
Lack of permission from parents/guardians	9%	10%	16%	8%	2%
No problem	11%	6%	10%	8%	6%
Don't know	31%	28%	35%	23%	30%

Table: Problems faced by survivors of gender-based violence when seeking help by type of GBV

% of the group, multiple choice

What problems do survivors of GBV face when seeking assistance, in your opinion or from your own experience?	Psychological violence	Economic violence	Harassment	Physical violence	Threats	Sexual violence	No type of violence
Base	n=1884	n=1468	n=1252	n=886	n=779	n=294	n=610
Misunderstanding, indifference to your problem	35%	35%	37%	36%	37%	33%	28%
Accusing you of provoking a situation of violence	27%	27%	31%	30%	34%	35%	20%
The need to provide many conditions and documents (e.g., a statement from the police, a fluoroscopy, etc.)	21%	22%	22%	22%	23%	25%	17%
Lack of necessary specialists in your community	20%	21%	21%	21%	21%	15%	19%
Unwillingness of specialists to work on your case (attempts to reconcile you with the offender, presenting the situation as something everyday, ordinary, putting your appeal "on the table", etc.)	21%	21%	25%	23%	27%	30%	13%
Low qualification and knowledge of specialists on how to work with your case	17%	19%	20%	19%	19%	16%	16%
Lack of coordination between response services to GBV cases	12%	12%	12%	11%	13%	15%	13%
Lack of permission from parents/guardians	11%	11%	13%	14%	14%	15%	7%
No problem	8%	8%	9%	10%	7%	9%	8%
Don't know	27%	25%	22%	21%	19%	10%	37%

Table: Main causes of gender-based violence

% of the group, multiple choice

According to you, what are the main root causes of gender based violence?	Men	Women	13-17	18-42	43-60
	n=1400	n=1400	n=1120	n=937	n=743
Life events / life conditions	43%	42%	36%	46%	46%
Flaw of character / mental instability	39%	40%	35%	43%	43%
Unresolved violent past/ in childhood	30%	38%	28%	42%	33%
Perceptions of gender roles (the existence of certain norms of behavior for men and women)	26%	35%	28%	37%	27%
Unequal distribution of power in society between men and women	14%	24%	19%	20%	17%
Disproportionate income ratio	14%	16%	13%	17%	16%
Don't know	25%	18%	30%	14%	17%

Table: Situations and circumstances that can provoke/ exacerbate gender-based violence

% of the group, multiple choice

What situations and circumstances can provoke/exacerbate gender based violence?	Men	Women	13-17	18-42	43-60
	n=1400	n=1400	n=1120	n=937	n=743
Abuse of alcohol / psychoactive substances, gambling	37%	45%	32%	47%	48%
Lifestyle	35%	34%	29%	37%	38%
Desire for self-assertion, demonstration of strength	28%	34%	24%	38%	32%
Early childhood environment / Family interactions	23%	29%	21%	32%	25%
Provocative behavior of a person	24%	19%	16%	26%	24%
Trauma	20%	21%	22%	24%	15%
Reduced income, financial difficulties	19%	21%	12%	26%	25%
Post traumatic syndrome	19%	21%	14%	25%	22%
Loss of job / income of one of the partners	16%	19%	12%	22%	20%
Accumulated fatigue	17%	18%	13%	22%	18%
Social isolation	15%	10%	11%	17%	10%
No situation/circumstances can provoke GBV	5%	10%	11%	6%	4%
Maternity leave	4%	6%	3%	8%	3%
Hard to say / don't know	18%	14%	24%	10%	11%

Table: Support services for victims of gender-based violence are available in the community

% of the group, multiple choice

Available and responsive	West	South	East	North-Center	Largest cities	Other cities	Villages
База	n=700	n=700	n=700	n=700	n=1120	n=840	n=840
Medical care	66%	54%	58%	59%	66%	62%	47%
Patrol service	57%	48%	44%	45%	50%	55%	39%
Legal assistance	54%	43%	47%	46%	58%	55%	27%
Private psychologist (paid)	51%	43%	48%	47%	62%	54%	22%
Hotline/helpline	49%	36%	34%	49%	49%	44%	32%
Social worker / social protection service	48%	31%	41%	34%	45%	41%	27%
Free psychologist	34%	25%	35%	25%	34%	33%	20%
Support groups	36%	24%	21%	25%	32%	30%	15%
Shelter for victims	21%	15%	15%	16%	18%	21%	12%
Crisis room for victims	13%	10%	11%	14%	12%	16%	8%
Financial assistance	12%	11%	9%	9%	11%	11%	9%

Table: Socio-demographic groups vulnerable to GBV

% of the group, multiple choice

Which sociodemographics may be at greater risk of encountering a gendered population?	Men	Women	13-17	18-42	43-60
	n=1400	n=1400	n=1120	n=937	n=743
Girls adolescents	40%	52%	49%	44%	44%
Children	31%	33%	36%	30%	29%
Low-income, in difficult life circumstances	28%	32%	20%	37%	36%
LGBTQ+ PEOPLE	23%	27%	26%	30%	16%
Women headed households	18%	27%	18%	27%	22%
Poorly educated	20%	20%	18%	22%	21%
Women living close to the contact line	15%	19%	11%	19%	24%
Boys adolescents	17%	16%	21%	15%	12%
People with disabilities or chronic illnesses	15%	17%	13%	18%	17%
Elderly	14%	12%	12%	12%	16%
Women who are pregnant / on maternity leave	9%	14%	11%	15%	9%
People from ethnic minorities	7%	6%	7%	8%	6%
IDPs	6%	7%	4%	8%	9%
Demobilized military personnel	6%	6%	4%	8%	7%
Men	6%	3%	4%	6%	4%
(Anyone / All categories)	1%	1%	1%	1%	1%
Hard to say / don't know	19%	15%	21%	13%	14%

Table: The impact of GBV on men's psychosocial health

% of those who have experienced situations of violence, multiple choice

Impact on well-being (for men)		Psychological violence	Economic violence	Physical violence	Harassment	Sexual violence	
Base=	n=907	n=747	n=455	n=502	n=127		
Behavioral reactions/pattern	ns						
Sleep problems	20%	19%	18%	13%	22%		
Obsessive thoughts or memor	ies of experience	19%	12%	12%	12%	14%	
Avoiding communication with	loved ones / friends	14%	12%	12%	9%	10%	
Self-harm	4%	3%	3%	3%	5%		
Abuse of alcohol / psychoactiv	e substances	7%	6%	7%	5%	10%	
Emotional reactions/pattern	os .						
Feeling confused	26%	28%	28%	28%	19%		
Increased anxiety	23%	22%	21%	16%	26%		
Fearful	10%	9%	16%	12%	13%		
Feeling ashamed and fearing j	udgment from others	13%	10%	11%	11%	12%	
Feelings of guilt / self-blame	15%	14%	12%	9%	11%		
Numb / stopped feeling anyth	ing	5%	4%	4%	5%	10%	
Thought reactions/patterns							
Loss of self-confidence	24%	22%	20%	17%	25%		
Loss of trust and general	20%	17%	19%	19%	16%		
Depression	14%	15%	15%	10%	13%		
Believing there is no way out	5%	6%	5%	5%	11%		
Suicidal thoughts	4%	3%	3%	2%	6%		

Table: The impact of GBV on women's psychosocial health

% of those who have experienced situations of violence, multiple choice

Impact on well-being (for women)	Psychological violence	Economic violence	Physical violence	Harassment	Sexual violence
Base=	n=973	n=721	n=431	n=749	n=167
Behavioral reactions/patterns					
Sleep problems	21%	17%	22%	13%	16%
Obsessive thoughts or memories of experience	25%	13%	18%	16%	24%
Avoiding communication with loved ones / friends	16%	11%	14%	10%	13%
Self-harm	7%	4%	8%	3%	14%
Abuse of alcohol / psychoactive substances	5%	3%	3%	3%	8%
Emotional reactions/patterns					
Feeling confused	36%	34%	35%	39%	29%
Increased anxiety	33%	27%	27%	25%	23%
Fearful	17%	13%	31%	24%	30%
Feeling ashamed and fearing judgment from others	20%	10%	15%	14%	18%
Feelings of guilt / self-blame	15%	17%	12%	8%	19%
Numb / stopped feeling anything	7%	5%	11%	7%	12%
Thought reactions/patterns					
Loss of self-confidence	36%	27%	26%	20%	30%
Loss of trust and general	22%	18%	24%	19%	25%
Depression	17%	14%	18%	9%	18%
Believing there is no way out	7%	6%	9%	4%	14%
Suicidal thoughts	5%	3%	8%	3%	10%

Table: The impact of GBV on adolescents's psychosocial health

% of those who have experienced situations of violence, multiple choice

Impact on well-being (for teenagers)	Psychological violence	Economic violence	Physical violence	Harassment	Sexual violence
Base=	n=751	n=542	n=411	n=506	n=106
Behavioral reactions/patterns					
Sleep problems	18%	13%	15%	14%	20%
Obsessive thoughts or memories of experience	22%	9%	12%	15%	21%
Avoiding communication with loved ones / friends	15%	11%	14%	9%	8%
Self-harm	9%	6%	7%	5%	14%
Abuse of alcohol / psychoactive substances	3%	3%	2%	3%	15%
Emotional reactions/patterns					
Feeling confused	33%	34%	32%	35%	20%
Increased anxiety	27%	21%	21%	18%	17%
Fearful	18%	11%	25%	25%	20%
Feeling ashamed and fearing judgment from others	21%	9%	16%	12%	19%
Feelings of guilt / self-blame	15%	13%	11%	10%	13%
Numb / stopped feeling anything	7%	6%	8%	7%	12%
Thought reactions/patterns					
Loss of self-confidence	31%	19%	21%	17%	26%
Loss of trust and general	19%	14%	19%	18%	22%
Depression	12%	9%	9%	6%	11%
Believing there is no way out	6%	4%	7%	6%	10%
Suicidal thoughts	6%	3%	5%	4%	12%

Table: The impact of GBV on men's daily lives

% of those who have experienced situations of violence, multiple choice

Impact on everyday life (for men)	Psychological violence	Economic violence	Physical violence	Harassment	Sexual violence
Base	n=907	n=747	n=455	n=502	n=127
Difficulty to spend quality time and immersing yourself in the environment you are in	27%	28%	26%	27%	31%
Difficulty to take care of myself (hygiene, healthy routine, eating enough, etc.)	20%	20%	23%	22%	31%
Lack of interest for the things I used to do with pleasure (sport, music, reading, church, etc.)	17%	18%	18%	12%	24%
Loss of interest and initiative towards new opportunities, chances for change, career, new experience	20%	19%	18%	14%	18%
Difficulty to focus at work / study	13%	14%	12%	10%	16%
No impact at all	42%	40%	43%	45%	32%

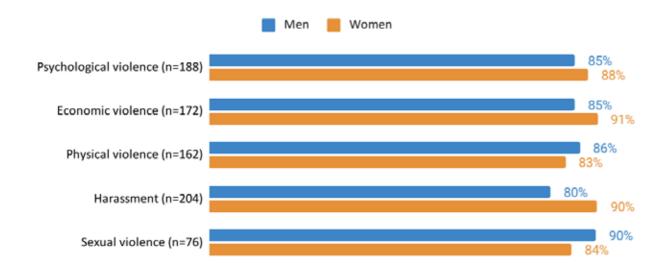
Table: The impact of GBV on women's daily lives

% of those who have experienced situations of violence, multiple choice

Impact on everyday life (for women)	Psychological violence	Economic violence	Physical violence	Harassment	Sexual violence
Base	n=973	n=721	n=431	n=749	n=167
Difficulty to spend quality time and immersing yourself in the environment you are in	29%	26%	29%	22%	31%
Difficulty to take care of myself (hygiene, healthy routine, eating enough, etc.)	24%	23%	29%	22%	37%
Lack of interest for the things I used to do with pleasure (sport, music, reading, church, etc.)	22%	22%	22%	14%	26%
Loss of interest and initiative towards new opportunities, chances for change, career, new experience	21%	18%	20%	13%	25%
Difficulty to focus at work / study	16%	13%	18%	9%	16%
No impact at all	33%	35%	30%	47%	22%

Diagram: Experience of receiving assistance by gender

% of those who experienced situations of violence and seeking help



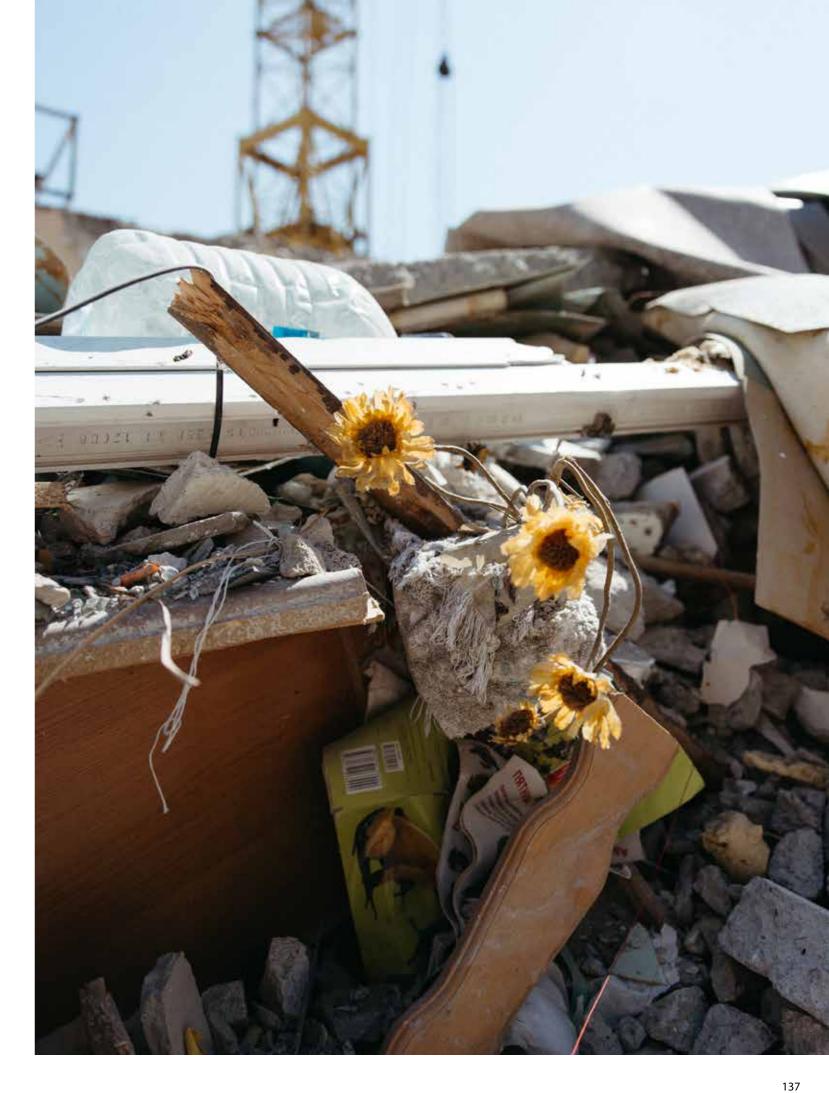


Table: What kind of help was needed for affected women

% of those who have experienced situations of violence, multiple choice

What kind of help was needed (for women)	Psychological violence	Economic violence	Physical violence	Harassment	Sexual violence
Base	n=973	n=721	n=431	n=749	n=167
I did not need anything	29%	42%	31%	46%	24%
Talk to someone, get support that it is not your fault and it is not normal	48%	28%	30%	27%	30%
Distance yourself from the offender	18%	18%	20%	18%	26%
Talk to a specialist in psychosocial support/ psychologist	14%	12%	15%	10%	24%
Physical protection from the abuser	6%	5%	16%	6%	18%
Talk to a social worker who will tell you where to go	3%	5%	9%	6%	10%
Medical care	3%	3%	6%	3%	8%
Help with writing a statement, filing a lawsuit	2%	3%	4%	2%	7%

Table: What is needed, first of all, to reduce the level of gender-based violence in Ukraine

% of the group, multiple choice

In your opinion, what is needed, in the highest priority, to reduce the level of gender-based violence in Ukraine?	Men	Women	13-17	18-42	43-60	Largest	Other	Villages
violence in oktaine:						cities	cities	
	n=1400	n=1400	n=1120	n=937	n=743	n=1120	n=840	n=840
Improving the work of the response system and state bodies (social services, police, etc.)	41%	49%	39%	49%	49%	51%	43%	39%
Toughening penalties for GBV, work with perpetrators	39%	49%	38%	50%	46%	48%	44%	39%
Increased awareness of possible assistance in the situation of GBV	39%	48%	36%	48%	48%	47%	42%	39%
Increasing awareness of GBV - causes, situations, recognition of GBV	36%	43%	35%	45%	40%	43%	38%	37%
Gender approach in the upbringing of children in families (without stereotypes)	30%	41%	34%	40%	30%	39%	34%	31%
Greater involvement and activity of international and non-governmental organizations	19%	24%	24%	20%	19%	24%	20%	20%
Don't know	18%	12%	22%	10%	10%	12%	13%	20%
Other	1%	0%	0%	1%	1%	1%	1%	0%

13.

Annex: Situations of GBV under study

The experience of psychological GBV and Threats

How often have you experienced the following situations in the past year from people of the opposite gender? Use for answer - "never" "occasionally" "frequently"

The list for adult

- you were not allowed to see your friends / relatives or tried to limit communication with friends / relatives
- restricted or monitored your use of social media (Facebook, Instagram, etc.)
- insisted on knowing where you are in a way that goes beyond normal curiosity
- decide what things to wear and what not to wear
- get angry when you talk to people of the opposite sex
- suspect you of infidelity
- commented derogatorily on your appearance, features, or body structure
- humiliated or insulted you in the presence of other people or in private
- made you feel weak, "inferior" or "incapable of anything" (hypercritical, bullying and harassment)
- Other, please specify

The list for adolescent

- you were not allowed to see your friends / relatives or tried to limit communication with friends / relatives
- restricted or monitored your use of social media (Facebook, Instagram, etc.)
- insisted on knowing where you are in a way that goes beyond normal curiosity/parental care
- decide what things to wear and what not to wear
- get angry when you talk to people of the opposite sex
- commented derogatorily on your appearance, features, or body structure
- humiliated or insulted you in the presence of other people or in private
- made you feel weak, "inferior" or "incapable of anything" (hypercritical, bullying and harassment)

How often have you experienced the following situations in the past year from people of the opposite gender? Use for answer - "never" "occasionally" "frequently"

The list for adult

- you have been intentionally frightened (yelling, breaking things)
- threatened to hurt or kill someone you care about
- threatened to hurt you or yourself
- threatened to sexually assault someone (e.g., rape, etc.)
- threatened to take away the children or child custody

- threatened to hurt or have hurt children

The list for adolescent

- you have been intentionally frightened (yelling, breaking things)
- threatened to hurt or kill someone you care about
- threatened to hurt you or yourself
- threatened to sexually assault someone (e.g., rape, etc.)

Experience in economic GBV

How often have you experienced the following situations in the past year from people of the opposite gender? Use for answer - "never" "occasionally" "frequently"?

The list for adult

- take away money
- restrict your attempts to work/get a job/go to work
- controlled your purchases
- criticized for spending money on your needs
- criticized that you don't make enough money / don't make money
- not allowed to use bank cards at your own discretion
- jointly acquired property was not registered in your name, without your consent
- decide for you what you need to buy and how much (for example, how many cigarettes to smoke or how many sanitary pads to use)

The list for adolescent

- take away money
- controlled your purchases
- criticized for spending money on your needs
- criticized that you don't make enough money / don't make money
- not allowed to use bank cards at your own discretion
- decide for you what you need to buy and how much

Experience in physical GBV

How often have you experienced the following situations in the past year from people of the opposite gender? Use for answer - "never" "occasionally" "frequently"

- pushed you or shoved you
- slapped you
- thrown a hard object at you

- grabbed you or pulled your hair
- punched you or beaten you with a hard object or kicked you
- burned you
- tried to suffocate or strangle you
- cut or stabbed you or shot at you
- beat your head against something

Experience of harassment

How often have you experienced the following situations in the past year from people of the opposite gender? Use for answer - "never" "occasionally" "frequently"

- unwelcome touching, hugging or kissing
- sexually suggestive comments or jokes that offended you
- inappropriate invitations to go out on dates
- intrusive questions about your private life that offended you
- intrusive comments about your appearance that offended you
- inappropriate staring or leering that you found intimidating
- somebody sending or showing you sexually explicit pictures, photos or gifts that offended you
- somebody indecently exposing themselves to you
- somebody making you watch or look at pornographic material against your wishes
- unwanted sexually explicit emails or SMS messages that offended you
- inappropriate advances that offended you on social networking websites such as Facebook or in Internet chat rooms

Experience of sexual GBV

How often have you experienced the following situations in the past year from people of the opposite gender? Use for answer - "never" "occasionally" "frequently"

- forced you to have sexual intercourse by holding you down or hurting you in some way
- apart from this, how often has someone attempted to force you to have sexual intercourse by holding you down or hurting you in some way
- apart from this, how often has someone made you take part in any form of sexual activity when you did not want to or were unable to refuse
- or have you consented to sexual activity because you were afraid of what might happen if you refused
- insist on/forced you to have sexual intercourse in order to get pregnant

14. References

https://ukraine.unfpa.org/sites/default/files/pub-pdf/unfpa_gbv_2022_fin.pdf

- https://www.osce.org/uk/secretariat/440318.
- https://ukraine.unfpa.org/en/publications/masculinity-today-mens-attitudes-gender-stereotypes-and-violence-against-women,
- https://reliefweb.int/report/ukraine/ukraine-protection-analysis-updateunabated-violations-against-civilians-increase-impact-protection-risks-populationjune-2023-enuk?_gl=1*1n5gmpk*_ga*NjlyNzl5NjUzLjE2OTgxNzY0OTA.*_ga_ E60ZNX2F68*MTY5OTM5NzcwMC45LjAuMTY5OTM5NzcwMC42MC4wLjA.
- 2. https://reliefweb.int/report/ukraine/ukraine-gender-snapshot-findings-rescore-2023-september-2023?_gl=1*12jymk2*_ga*NjlyNzl5NjUzLjE2OTgxNzY0OTA.*_ga_E60ZNX2F68*MTY5OTM5NzcwMC45LjEuMTY5OTM5NzgyNC4yLjAuMA..
- https://divoche.media/2023/11/27/v-ukraini-zrostaie-kilkist-zaiav-pro-domashnie-nasylstvo-za-10-misiatsiv-2023-ho-zareiestruvaly-stilky-zh-iak-za-ves-2022-rik/?fbclid=lwAR0YTuJhfnmZGl2UCkfpN2_Dphnc3exKrQ_laeerlx6FnQ0BDNp1-HXw2VM
- 4. https://www.undp.org/sites/g/files/zskgke326/files/2023-09/undp-ua-hia-ukr-2.pdf
- 5. https://suspilne.media/621631-u-nacbanku-nazvali-kilkist-zareestrovanih-bezrobitnih-v-ukraini/
- 6. https://www.radiosvoboda.org/a/genderna-sytuatsiya-v-ukraini-voennoho-chasu/32696907.html
- 7. https://gbvaor.net/sites/default/files/2022-06/ukraine-gbv-sdr-27522-final-format-amended-ukr.pdf
- 8. Ukraine Gender Snapshot: Findings from the reSCORE 2023 (September 2023) Ukraine | ReliefWeb
- 9. Ukraine: Protection Analysis Update Unabated violations against civilians increase the impact of protection risks on the population (June 2023) [EN/UK] Ukraine | ReliefWeb
- 10. Research: Needs assessment of internally displaced persons in psychosocial support within the framework of the project "Gender-Based Violence (GBV) Response and Care Units: Integrating Essential Survivor Care in Eastern and Southern Ukraine" [EN/UK] Uk
- 11. Ukraine Assessment Report Waiting for the Sky to Close: The Unprecedented Crisis Facing Women and Girls Fleeing Ukraine Ukraine | ReliefWeb
- 12. Ukrainian Crisis Situational Analysis 25 October 2023 Ukraine | ReliefWeb
- 13. Rapid Assessment: Impact of the war in Ukraine on women's civil society organizations, March 2022 [EN/UK] Ukraine | ReliefWeb
- 14. https://reliefweb.int/report/world/gbv-aor-helpdesk-gender-based-violence-emergencies-research-query-gbv-and-anticipatory-action-approaches





f <u>@WVUkraineResponse</u>

@WVUkraineCrisisReponse

@wvukraineresponse

in <u>@WVUkraineCrisisResponse</u>

Emergencies/Ukraine



For more information, please email