

## TITLE

# How the private sector can address the issue of GBV

Corresponding author:

Dr C. Davis

Department of Strategic Communication

University of Johannesburg

[cdavis@uj.ac.za](mailto:cdavis@uj.ac.za)

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## **INTRODUCTION**

The National Strategic Plan for addressing gender-based violence (GBV) in South Africa released by President Ramaphosa on 11 March 2020 directed a very specific call to the private sector to participate in addressing this issue. GBV has been a global crisis for many decades and to date research reports and statistics show little or no progress towards its elimination (Jewkes & Dartnall, 2017). Global reports over many years have indicated that GBV is prevalent across cultures, 'race', religions or socio-economic status. Initially, GBV was addressed mainly by international health organisations such as the World Health Organisation (WHO) and the United Nations (UN), predominantly as a public health concern. However, it has become more apparent over recent years that GBV is a social issue that stems from culture, religion, gender inequality and patriarchy, among others, and which has been perpetuated through societal structures, such as organisations. There have been increasing calls to all sectors to intervene in addressing GBV, its economic cost to the global economy was estimated at \$1.5 trillion (UN Women, 2016). The economic cost of GBV to South Africa has been estimated at between R28.4 and R42.4 billion (KPMG, 2014). Still, there has been little evidence of widespread successful GBV interventions (Abrahams, Mathews, Martin Lombard & Jewkes, 2013). It has also become clear, as Morrison and Orlando (2005) argue, that accounting-based measures of GBV were insufficient, suggesting that different perspectives are needed. While many private sector organisations have GBV interventions through corporate philanthropy, they have not taken action to address the issue head on. The purpose of this commentary is to show that just funding non-government organisations dealing with GBV issues is no longer sufficient. GBV is the responsibility of stakeholders across all sectors and the criticality of the private sector's participation and intervention, in particular, has to be clearly articulated.

## **THE PHYSICAL, EMOTIONAL AND SOCIAL IMPACT OF GBV**

One of the greatest challenges pertaining to GBV is the silence that perpetuates the issue because of the stigma associated with it. Therefore, the physical, emotional and social impact of GBV remains unpronounced because it causes shame, discrimination and social exclusion as shown by Seedat, Van Niekerk, Jewkes, Suffla and Ratele (2009) and Jewkes and Dartnall (2017). This stigma also means that both victims and perpetrators have remained invisible in spaces such as the workplace, where people have more limited awareness of their colleagues' personal lives. The issue of sexual harassment and abuse in the work environment, as one of the many kinds of GBV, came into the spotlight in 2016 when the #MeToo movement was started by Tarana Burke. It spread virally as a hashtag on social media in 2017, following the

charges against media producer, Harvey Weinstein (BBC News, 2020). For the first time, women had a platform of such a large scale for coming forward and speaking out against the sexual abuse they had experienced in work contexts and for promoting solidarity and empathy among other survivors and victims (Rodio-Colocino, 2018). Thousands of voices were heard and victims' narratives of the trauma they had experienced provided much-needed insight into the devastation caused by this kind of GBV and its prevalence.

However, sexual harassment and abuse is only one form of GBV. Its most prevalent forms are intimate partner violence (IPV), domestic violence (DV) and violence against children (VAC) experienced, in most cases, in their homes. The stigma attached to these forms of GBV is even worse, which means that victims and their families are too ashamed and scared to come forward because they fear discrimination, judgement and not being believed. For these reasons, GBV has been viewed as a private matter that employers did not wish to get involved in. A shift in this perception occurred when specific calls on the private sector were made by sources such as Colford (2014:1) who represented the World Bank when he stated the following:

If a sense of social responsibility isn't enough to get corporate leaders thinking pro-actively, they should at least consider their business' long-term enlightened self-interest. A workforce that's de-motivated or demoralized – or, worse, physically injured or emotionally abused – will suffer lower morale and higher absenteeism, will trigger higher health-care costs, will be distracted from seizing new business opportunities, and will fall short of fulfilling its full productive potential. That economic reality should spur the private sector to take constructive, preventive action.

Even though this statement foregrounded the economic implications of GBV, it alluded to the emotional and physical devastation GBV causes. More recently, a number of brutal killings of young women in South Africa drew sharp attention to IPV, including the deaths of Karabo Mokoena on 28 April 2017, whose body was burned after she was brutally murdered by her intimate partner (Daily Maverick, 2018); Uyinene Mrwetyana on 24 August 2019, Leighandré Jegels who was shot by her boyfriend in September 2019; Janika Mallo, the 24-year-old who was raped and killed by two family acquaintances; 16-year-old Ayakha Jiyane and her three younger step-siblings who were found hanged in September 2019; eight months pregnant Tshogofatso Pule found hanging from a tree in June 2020, and Naledi Phangindawo who was allegedly hacked to death by her partner on 6 June 2020. The impact of the trauma associated with deaths such as these on families, friends, acquaintances and society was widely described and necessarily and unavoidably extends to the workplace. While femicide represents a worst-case scenario, the consequences for surviving victims of IPV and DV identified by Day (1995) include the following:

- physical problems (e.g. stomach aches, headaches, asthma, insomnia);

- emotional problems (e.g. depression, anxiety, guilt, self-blame, post-traumatic stress disorder);
- behavioural problems (e.g. aggression, suicidal behaviours, alcohol and illicit drug use, truancy/early school leaving);
- cognitive problems (e.g. distortions in attitudes and beliefs about violence and abusive behaviour);
- difficulty concentrating and learning; and
- social problems (e.g. isolation, difficulty trusting, may accept and/or use violence within peer and dating relationships).

Other non-monetary social costs include those represented in disability-adjusted life years (DALY) (Dalal & Svanström, 2015) or the longer-term consequences for children and adolescents exposed to DV and IPV and that impact future functioning (Fakunmoju & Rasool, 2018). It therefore makes sense from an employee wellbeing perspective that private sector organisations should reconceptualise their corporate and social responsibility in terms of the current global sustainability objectives (GSOs), which make specific reference to GBV within and that focus on gender equality. From this perspective, private sector organisations should know that gender inequality was recognised as a key driver of GBV many decades ago. To date, no country has however achieved gender equality and is unlikely to do so by 2030 (UN Women, 2019). The shift that now needs to take place is the reconceptualisation of GBV as an issue that requires *strategic* intervention by the private sector.

Much work has been done to pave the way for private sector organisations to address GBV as an issue that affects employee wellbeing and their organisations' success by organisations such as the Sexual Violence Research Initiative (SVRI) (2020), Business for Social Responsibility (BSR) and HERrespect (2017), although it seems that these reports have not yet been considered or used by the private sector in South Africa. The following section considers some of the developments in business industry that have been benchmarked in current literature on organisations and global sustainability.

### **WHAT THE PRIVATE SECTOR CAN DO TO ADDRESS GBV**

Holmström (2006) showed how the concepts of corporate social responsibility (CSR) and the relationship between organisations and society had evolved and placed an increasing emphasis on organisations' accountability for not addressing issues that affect society. Recent theoretical developments in the fields of organisation studies and strategic communication place great emphasis on human centeredness and on the achievement of the GSOs, as shown by Galpin, Whittington and Bell (2015). The central tenet in these approaches is 'that

people are more important than profit'. From this perspective there are specific guidelines or actions that private sector organisations should follow.

### **Recognise GBV as an issue that affects employees**

UN Women (2019) showed that one out of three women globally experience some kind of GBV in their lifetime. South Africa was dubbed the rape capital of the world as early as 1995 (Jewkes & Abrahams, 2002) and as Jewkes and Dartnall (2017:493) show "in most settings women are more at risk of being forced into unwanted sexual acts by an intimate partner than any other type of perpetrator". In fact, Jewkes and Abrahams (2002:1240) state that "women's right to give or withhold sexual intercourse is one of the most commonly violated human rights in South Africa". United Women (2020) who that 35 percent of women globally experience some kind of GBV in their lifetime and it can be reasonably deduced that these figures include women in organisational settings. A study on the prevalence of GBV in the four provinces in South Africa conducted by the Medical Research Council showed that as many as 77 percent of women in Limpopo; 51 percent of women in Gauteng; 45 percent of women in the Western Cape and 36 percent of women in KwaZulu Natal reported experiencing some kind of in their lifetime (Gender Links, 2014). Considering these statements it is likely that one out of three women in any organisational setting will experience some kind of GBV in their lifetime. It is therefore imperative for private sector organisations to recognise these facts and to acknowledge the likelihood that perpetrators and victims are most probably among their employees. The study e.g. by Davis and Meerkotter (2017) supported this and showed that many of the GBV distress calls recorded on the TEARS Foundation's Help-at-your-fingertips hotline were made from affluent neighbourhoods in Gauteng and working in private sector organisations.

### **Create platforms for employees to engage on GBV issues**

Platforms that acknowledge the issue of GBV in its various forms can facilitate dialogue and can encourage support seeking among both victims and perpetrators who may often feel isolated because others' experiences of GBV are not disclosed (Reference). The availability of this kind of service does not suggest that employees will immediately start engaging openly about these sensitive and stigmatised topics, but the communication needs to start in the workplace where access to information and support can be put into place. Employee wellbeing programmes can raise awareness of GBV issues and provide information on where to go or what to do if it happens.

### **Address gender inequality more rigorously**

Private sector organisations need to reflect on their communication to all stakeholders, including employees, to ensure that no gender stereotyping or perceptions that influence societal values, norms and attitudes condoning GBV can be communicated in its content (BSR, 2017). They also need to determine how they can develop platforms and channels for communication about GBV, its prevalence and its consequences for all stakeholders. As suggested by the Women Empowerment Principles (2020), the private sector should demonstrate its commitment to achieving gender equality and women empowerment by including it in its business strategies. The latest gender gap report released by the UN in 2020 shows to what extent gender inequality makes women and girls more vulnerable to GBV and other human rights violations compared to men and boys.

### **Publicly express disapproval of any kind of GBV**

This should include any kind of GBV, such as sexual harassment in the workplace as well as in the private lives of individuals. Programmes and partnerships with other stakeholders should be communicated in CSR reports to demonstrate how they serve the best interests of all stakeholders (creating shared value) in finding solutions to address GBV in South Africa.

### **Participate in GBV policy development**

BSR (2017) further proposes HR-led policy development relating to the support of GBV intervention and prevention. It is also important for the private sector to engage in dialogue with other stakeholders and to establish multi-sectoral platforms on which to collaborate in finding solutions for GBV intervention. Even though such actions will, admittedly, require resources, the cost of no action for South Africa has been made abundantly clear in the NSP for South Africa (2020).

### **Provide the necessary resources to address GBV**

UN Women (2019) proposes that private sector organisations dedicate appropriate financial and human resources to design and implement a holistic workplace response to IPV in particular and that they build understanding and a supportive environment. The WEP (2020) further suggests that private sector organisations should create strategic executive committees on gender equality as a way of demonstrating commitment from the very top.

Achieving these objectives will require multi-sectoral collaboration. Until now, GBV activism and interventions have been driven predominantly by government organisations as well as global and local non-government organisations. The statistics show that these sectors have been unsuccessful and arguably makes it clear that all stakeholders need to be involved to

achieve results. Sharokh and Edsröm (2015) reiterate the need for multi-sectoral and multidimensional responses to GBV that incorporate, among others, a life-cycle perspective to inform understandings of GBV, participatory education and community mobilisation, as well as a specific focus on the structural violence and institutional inequalities that fundamentally shape GBV. They show that effective interventions should address harmful masculinities rather than focus on single and specific behaviours and attitudes. They further show how employee engagement should challenge deeply held beliefs at a personal level so that they can connect them with the processes of wider societal change.

Given that no successful GBV intervention programmes in the private sector in South Africa have been publicised, it is important for private sector organisations to share the insights that they gain from their programmes so that they can accelerate further interventions across all sectors. Information and support is readily available from organisations such as Safer Spaces, Sonke Gender Justice, Safer Homes and Respect for Everyone (SHARE), SVRI, Gender Links, among many others, of whom some report successful interventions. Creating multi-sectoral stakeholder networks can furthermore foster GBV activism and collaboration among stakeholders such as community forums, schools, police stations and other businesses. Such participation and collaboration requires leadership and commitment from industry leaders to support the National Strategic Plan for GBV intervention in South Africa.

## **CONCLUSION**

This commentary discussed how the private sector needs to recognise that corporate philanthropy will no longer suffice when addressing issues such as GBV (Vilkė, Raišienė & Simanavičienė, 2014). Private sector organisations can be key influencers and change agents. They are often represented by opinion leaders and influencers on social media and other platforms where they can set the agenda for GBV interventions. The stigma surrounding all kinds of GBV will not dissipate if these topics are avoided and remain incommunicable. It is a human right for all people to feel safe, protected and free from any kind of discrimination and social exclusion, and it is the responsibility of private sector organisations as definitive stakeholders to enable the achievement of this GSO. Although significant progress has been made in recognising that these objectives should form part of organisational strategy, much work remains to be done before a change in GBV occurrence is seen. Considering what is known about GBV and its prevalence in all societies, there is hence no justification for any objections or ignorance pertaining to the responsibilities of the private sector to develop a strategic approach towards GBV intervention in terms of the GSOs (Galpin, et al., 2015). UN Women (2019:6) concludes:

In the workplace, women can find protection, emotional support and respite from the violence they are experiencing at home, through information and referral to services, such as counselling. The support provided by an employer can be the difference between an employee staying in an abusive relationship or taking action to address it. When workplaces understand, recognize and respond to violence against women, women can continue to work and access the support they need.

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