

The Collapse of Women's Protection Centres/Shelters and Its Psychological Impact on Gender-Based Violence Survivors in Afghanistan

Mitra Tanomand

The Raoul Wallenberg Institute of Human Rights and Humanitarian Law
University of East Anglia, School of Global Development, Norwich, Norfolk, United Kingdom

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ABSTRACT

This study critically examines the psychological impact of the closures of Women's Protection Centres (WPCs) in Afghanistan following the 2021 Taliban takeover. These shelters had long served as critical safe spaces for survivors of gender-based violence (GBV), providing emotional support, legal aid, and a path to recovery. However, the dismantling of WPCs under the Taliban regime has intensified survivors' psychological distress, leaving many without access to essential services or protection. Using a feminist theoretical framework and intersectionality as a lens, this study investigates how survivors' mental health has been affected by the loss of these vital resources. Semi-structured interviews were conducted with 30 participants, including former WPC survivors, shelter staff, and donors, to explore the emotional toll of the closures. Thematic analysis of the data reveals widespread trauma, including anxiety, depression, post-traumatic stress disorder (PTSD), and a profound sense of hopelessness among survivors. The findings also highlight the intersection of systemic neglect, patriarchal structures, and societal stigma in exacerbating survivors' mental health challenges. This study emphasizes the urgent need for trauma-informed, survivor-centred care and the rebuilding of safe spaces to address the enduring mental health crisis among Afghan women. By amplifying the voices of survivors, this research calls for international and local stakeholders to take coordinated action to restore essential psychosocial services and uphold the rights of women in Afghanistan.

1. Introduction

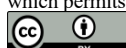
"For decades, Women's Protection Centres (WPCs) provided a lifeline for Afghan women fleeing abuse. But in 2021, the Taliban's return to power dismantled this fragile support system, leaving survivors exposed to unprecedented danger."

* Corresponding author's E-mail address: mitraariaye@gmail.com, ORCID ID: <https://orcid.org/0009-0008-3987-4932>

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Women's Protection Centres (WPCs) in Afghanistan were established in 2002 elsewhere, mentioned in 2003 as safe havens for women fleeing gender-based violence (GBV). These shelters offered psychological support and medical support, including counselling, legal aid, vocational training, and temporary housing, empowering survivors to rebuild their lives (GSDRC, 2013).

However, these centres faced significant cultural resistance, with Afghan society often stigmatising women who sought refuge as "runaways" or morally deviant. Despite this, WPCs became indispensable for women seeking protection from violence, forced marriages, and societal discrimination (Wimpelmann, 2017).

The Taliban's return to power in August 2021 marked a severe regression for women's rights in Afghanistan (Pen, 2024). Under the Taliban regime, WPCs faced systematic shutdowns, cutting off women's access to essential services. Survivors were forced to return to abusive environments or resist for themselves without support, exposing them to heightened psychological trauma and insecurity. This loss has not only endangered women's physical safety but has also left deep emotional scars. Survivors who had begun to heal in shelters now face traumatization, with no avenues for mental health care.

This study focuses on the psychological impact of the closures of WPCs on GBV survivors. It investigates how the loss of these shelters has amplified mental health challenges such as anxiety, depression, and post-traumatic stress disorder (PTSD). The research draws on semi-structured interviews with survivors, former shelter staff, former official of the Ministry of Women's Affairs, Department of Women's Affairs and donors to understand the human cost of these closures. Using a feminist theoretical lens and Kimberlé Crenshaw's concept of intersectionality, the study reveals how systemic neglect, cultural stigma, and patriarchal structures converge to worsen women's vulnerabilities.

The findings underscore the urgent need for trauma-informed and survivor-centred care to address the mental health crisis among Afghan women. Rebuilding psychosocial safety nets and challenging patriarchal norms are essential steps in mitigating the long-term consequences of the Taliban's policies on women's mental well-being. This research aims to contribute to the broader discourse on gender-based violence and institutional accountability in post-2021 Afghanistan.

2. Literature Review

2.1 Gender-Based Violence and Its Psychological Impact

Gender-based violence (GBV) is a pervasive human rights violation and a public health crisis, encompassing physical, sexual, psychological, and economic harm inflicted on individuals based on gender (Oo, 2024). It is a structural issue deeply embedded in social norms, patriarchal ideologies, and legal inequalities, often limiting women's autonomy and access to justice. The United Nations estimates that one in three women worldwide experiences some form of GBV, ranging from intimate partner violence (IPV) to sexual violence and honour killings (UN WOMEN, 2024). While GBV exists globally, its manifestations and responses vary based on cultural, legal, and socio-political contexts.

GBV appears in four primary forms: psychological, economic, physical, and sexual abuse. Psychological abuse isolates women from loved ones, instils fear through threats or humiliation, and erodes self-worth. Economic abuse strips them of financial independence by controlling money, seizing property, or limiting employment. Physical violence manifests as

slaps, punches, kicks, and denial of medical care. Sexual violence includes forced or coerced intimacy, often leaving deep emotional wounds (Moorehead, 2023).

South Asia presents a complex landscape where traditional values, legal shortcomings, and economic dependency often justify violence against women. In Pakistan, societal stigma and weak legal frameworks make it difficult for survivor of domestic violence and sexual assault to report crimes, as victims are often blamed or shamed (Rai, 2024). Similar patterns are evident in Bangladesh, where dowry-related violence and child marriage persist, particularly in rural areas where women have little legal or social support (Irfan et al., 2021).

In India, despite legal progress, marital rape remains unrecognized, and honour killings continue, particularly among lower-caste and rural women who challenge social hierarchies (Singh et al., 2021).

Crenshaw's intersectionality theory (1989) provides a valuable lens through which to analyse GBV in South Asia, highlighting how class, race, religion, and geography intersect with gender to intensify oppression. A woman from an upper-class urban family in India may have access to legal aid and support networks. In contrast, a rural Bangladeshi woman facing dowry abuse may lack the same resources, reinforcing her vulnerability.

Afghanistan presents a particularly severe case of GBV, as violence against women is both systematic and state sanctioned (BBC, 2022; OHCHR, 2023). Before the Taliban's resurgence in 2021, women had gained legal protections and access to shelters (Wimpelmann, 2017), but the collapse of these systems has left thousands of women trapped in cycles of abuse. Under Taliban rule, women are barred from public life, denied education, and restricted from seeking help, reinforcing legal and social helplessness.

Intersectionality is particularly relevant in Afghanistan, where gender oppression is compounded by geography, economic dependency, and lack of institutional support (Leclerc, 2023). For example, a woman in Kabul may have some access to underground legal support. In contrast, a woman in a remote province may be entirely dependent on male guardians, increasing her risk of forced marriage, domestic violence, or honour killings. Without shelters or alternative justice mechanisms, survivors face systematic erasure and psychological harm (Human Rights Council, 2023).

Women in Afghanistan face significant barriers to seeking help, including societal stigma, lack of legal protections, and the belief that victims of abuse handle their plight (Khavari, 2024). To combat this crisis, Women's Protection Centres (WPCs) were established starting in 2003, designed as safe havens for women escaping violence. These shelters aimed to provide physical refuge, legal aid, psychological counselling, and vocational training to help survivors rebuild their lives. Over time, the network of WPCs grew significantly, expanding from a single shelter to 27 shelters by 2022 (Perria, 2022).

These centres played a critical role in empowering women, breaking the cycle of violence, and challenging societal norms that perpetuate GBV. These WPCs offered more than shelter; they were safe havens where survivors of gender-based violence (GBV) could access legal aid, psychosocial counselling, and vocational training to rebuild their lives. However, the abrupt departure of these organizations left an unsettling void. The fate of countless women who had sought refuge in these shelters stays uncertain, and the mechanisms for their reintegration into society are poorly documented. Reports say that many survivors were left without the critical safety nets once provided by the shelters, leaving them vulnerable to further violence or forced reintegration into abusive environments (Wilson, 2018).

2.2 Psychological Consequences of GBV

The impact of gender-based violence (GBV) is significant and extensive, influencing not just the survivors but also their families and communities. While survivors may face immediate physical injuries that can be severe and require extensive medical treatment, it is crucial also to address the psychological effects that can be equally serious. Many survivors encounter challenges such as depression, anxiety, post-traumatic stress disorder (PTSD), and, in some situations, suicidal thoughts (Farooq, 2022).

Afghan women have bravely weathered significant psychological challenges due to decades of conflict and pervasive gender-based violence (GBV). It is reported that nearly half of Afghan women have experienced domestic violence, resulting in serious mental health issues, including depression, anxiety, post-traumatic stress disorder (PTSD), and suicidal thoughts (Alemi et al., 2023).

Since the Taliban regained control of Afghanistan in 2021, the mental health of Afghan women is at a critical juncture. The restrictions imposed on education, employment, and personal freedoms have left many women feeling confined and hopeless. Recent reports show a concerning rise in suicides among women, particularly in regions like Herat, where forced marriages and domestic violence are rampant. It is vital to dismantle the cultural stigma surrounding mental health and gender-based violence (GBV) so that survivors can access the support they deserve (VOA, 2023).

The closure of essential support systems, such as WPCs and women-led organizations, has created a significant gap in resources for those experiencing violence. Young girls barred from attending school express anger, despair, and a profound loss of purpose. To address these urgent issues, we must prioritize improving access to mental health care and creating safe pathways for seeking help.

2.2.1 PTSD, Depression, Anxiety, and Suicidal Thoughts

Exposure to repeated violence triggers chronic stress responses in survivors, leading to hypervigilance, emotional numbness, and flashbacks associated with PTSD (Equality Now, 2024). Studies show that women who experience IPV, sexual violence, or coercive control are at a significantly higher risk of depression and substance abuse. In Afghanistan, where mental health care is virtually non-existent, many women resort to self-harm or suicide as an escape from unbearable conditions. Reports indicate a rise in self-immolation cases, particularly among young women in forced marriages (Jewkes et al., 2018).

2.2.2 Learned Helplessness and Trauma Bonding

The psychological concept of learned helplessness suggests that survivors who repeatedly experience inescapable violence begin to internalize powerlessness, believing they have no control over their circumstances (Wimpelmann, 2017). This phenomenon is evident in regions where women have no legal agency, such as Afghanistan, where survivors of GBV are forcibly returned to abusive families after shelter closures. Trauma bonding further complicates the mental health impact of GBV, as victims may develop emotional attachments to their abusers as a survival mechanism (WHO, 2024). In cases of child marriage, domestic dependency, or forced sexual relationships, this creates deep psychological dependency, making escape nearly impossible. Without counselling and alternative social support systems, these survivors stay psychologically imprisoned in their trauma.

2.2.3 Impact on Children and Intergenerational Trauma

GBV does not only affect direct survivors it also has long-term consequences for children raised in violent households. Children who witness domestic abuse are more likely to develop PTSD, aggressive behaviour, and attachment disorders in adulthood (Moorehead, 2023). In conflict-affected regions like Afghanistan, where war trauma and GBV intersect, children often internalize violence as a norm, perpetuating intergenerational cycles of abuse (Equality Now, 2024). Intergenerational trauma is evident in cultures where GBV is normalized, as survivors of IPV and sexual violence often lack the tools to process their trauma, passing emotional distress onto their children (Singh et al., 2021). Without intervention, these psychological wounds persist across generations, reinforcing societal acceptance of gendered violence.

2.3 History Women's Shelter worldwide

Erin Pizzey established the first modern women's shelter in Chiswick, London, in 1960-1971, providing a safe space for women and children escaping domestic violence (Simic, 2020). Originally intended as a community centre, it quickly became a lifeline for abuse survivors, highlighting the widespread but often overlooked issue of domestic violence (Hague, 2021). In 1974, the shelter was renamed Refuge, becoming one of the UK's leading domestic violence organizations (Bates, 2019). Pizzey's work inspired the global expansion of women's shelters, leading to the creation of Women's Advocates in Minnesota (1973), Interval House in Toronto (1973), and Elsie Refuge in Sydney (1974). Between 1970 and 1980, notable progress was made in establishing and expanding support services across Western Europe, North America, and Australia, with particularly significant developments in the United Kingdom and the United States (Sharifi, 2024). These early shelters helped shift domestic violence from being seen as a private matter to a public concern, prompting legal and policy reforms. Today, shelters provide protection, counselling, legal aid, and long-term support for survivors rebuilding their lives.

Likewise, Women's shelters in Islamic and Arab countries have expanded alongside growing awareness of domestic violence and legal reforms. Saudi Arabia opened its first government-run shelter in 2008, followed by a domestic violence law in 2013 (Mohamed, 2023). The Dubai Foundation for Women and Children (DFWAC) became the first licensed shelter in the UAE in 2007 (DFWAC, 2016). Jordan established the Family Protection Department in 1997 and the Dar Al Wifaq shelter in 2007 for safe housing and rehabilitation (Nassar, 2019). Egypt introduced its first shelters in the 1990s to provide legal and psychological support (Ahmed, 2017). Morocco launched government-backed shelters in 2003, with Mousawat Centres offering protection and legal aid (Ennaji, 2016). In Pakistan, Dar-ul-Aman shelters have operated since the 1990s, providing temporary refuge and legal assistance, though challenges such as limited resources and social stigma persist (Palwasha, 2021).

While shelters have become a crucial support system for survivors of domestic violence across the world, the reality is different in places like Afghanistan, where women face deep-rooted cultural barriers, ongoing conflict, and restrictive laws. Unlike other countries where strong legal protections and advocacy efforts back shelters, Afghanistan's shelter system has developed under constant challenges and shifting political landscapes. Understanding how shelters emerged in Afghanistan sheds light on the struggles, resilience, and efforts to create safe spaces for women in one of the world's most challenging environments.

2.4 Brief History of Women Protection Centres (WPC) in Afghanistan

Women's Protection Centres (WPCs), commonly referred to as Safe Houses ("خانه امن") in Dari, were established to effectively address the critical need for safeguarding Afghan women against violence, forced marriages, and abuse. The Afghan Women Skills Development Centre (AWSDC) found the country's first Women Protection Centre/shelter in 2002; elsewhere said 2003, providing safe havens for women seeking protection from violence, forced marriages, or other forms of abuse in Afghanistan (The International Service for Human Rights, 2015). These centres have played a crucial role in offering support in terms of providing shelter, food and legal, psychosocial, medical and vocational aid for the women who have been physically and emotionally abused, discriminated and neglected by societies during the past 20 years (Moorehead, 2023). This initiative laid the groundwork for expanding shelter services into more provinces alongside a broader mission that includes advocacy, capacity-building, and improving access to justice. Later, other NGOs, such as Women for Afghan Women (WAW) (Starkey, 2011), and Voice of Women Organisation (VWO), established several shelters across Afghanistan to protect GBV survivors with their accompanied children.

These shelters function under strict rules, both written and unwritten. Women cannot leave without permission, and their contact with the outside world is severely limited no visitors, no mobile phones, no letters home. At night, the doors are locked from the outside, not as a form of punishment but as a measure of protection. However, for many women, a locked door is still a door that separates them from the world, reinforcing a sense of confinement despite the safety it provides (Ahsan, 2020).

Women's Protection Centres (WPCs) in Afghanistan provide temporary housing, legal aid, and psychosocial support to women facing violence. They operate under the Ministry of Women's Affairs (MoWA) and collaborate with organizations such as the Afghan Independent Human Rights Commission, the Attorney General's Office, and NGOs. When a woman is referred to a shelter, her case is assessed, and a file is created, documenting her background, the nature of abuse, and any immediate needs. Shelters also assist survivors in accessing justice, offering mediation services, or pursuing legal action against perpetrators. Additionally, WPCs provide vocational training and education to help women become self-sufficient. Confidentiality is a crucial aspect, ensuring that women's identities and case details remain protected (IDLO, 2014).

These shelters face challenges such as social stigma, security threats, and funding limitations, yet they remain a critical resource for Afghan women seeking safety and empowerment.

However, the return of the Taliban in August 2021 presents a significant challenge for Women's Protection Centres (WPCs) in Afghanistan, which have been essential lifelines for survivors of gender-based violence. While these shelters have faced closures under the Taliban regime, this situation opens the door for renewed advocacy and support aimed at rebuilding and reinforcing protections for Afghan women. The restrictions imposed on women's rights, characterized by human rights organizations as 'gender apartheid', have dismantled critical support systems that have empowered Afghan women for nearly two decades. However, this moment also highlights the resilience and strength of the international community's efforts to champion human rights (Human Rights Council, 2023).

As we recognize the hardships faced by survivors who previously relied on WPCs for safety, legal aid, and psychological support, we realize the urgent need to innovate and create new aid pathways. By mobilising resources, raising awareness, and fostering partnerships, we can work together to restore protections and provide hope for vulnerable Afghan women, ensuring they do not have to return to unsafe situations. This situation calls for a collective commitment to

amplify the voices of Afghan women and advocate for their rights, reinforcing a global movement that seeks to uphold justice and safety for all.

3. Methodology

This study employs a qualitative multimethod approach (Silverman, 2020), to examine the psychological impact of gender-based violence (GBV) on Afghan women, particularly considering the closure of Women's Protection Centres (WPCs). By centring on the lived experiences of survivors, this research aims to illuminate their mental health challenges they face and address existing gaps in the literature regarding the psychological toll of the Taliban's policies on Afghan women.

Through semi-structured interviews and thematic analysis, this study ensures that the voices of survivors, former WPC staff, and mental health professionals inform future policy and support systems. Additionally, document analysis of grey literature, internal reports, and media coverage provides contextual depth to the findings.

3.1 Research Design

Through online semi-structured interviews (Salmons, 2014), with 30 participants, including 10 survivors of GBV who previously lived in women's protection centres (WPCs), 10 former WPC staff, 5 senior NGO personnel from organizations managing WPCs, and 5 mental health professionals knowledgeable about GBV trauma in Afghanistan, the research captures a diverse set of perspectives. In addition, document analysis of internal reports, grey literature, and newspaper articles provides a broader socio-political context. This multi-source approach facilitates data triangulation, enhancing the understanding of the psychological effects resulting from WPC closures. As Creswell (2009) highlights, qualitative research is particularly effective for exploring complex and sensitive issues like GBV, allowing the study to unravel this crisis's intricate psychological, social, and political aspects.

3.2 Data Collection

The data collection process was designed to be both thorough and respectful, utilizing semi-structured interviews that lasted between 60 to 90 minutes and were conducted remotely via phone and WhatsApp, demonstrating our commitment to the safety of participants. These interviews allowed for an in-depth exploration of essential topics, including the psychological impact of gender-based violence on survivors, the effects of the closures of women's protection centres on mental well-being and security, and the coping strategies that survivors adopted in the absence of institutional support. In addition, a comprehensive document analysis was performed, reviewing internal donor reports, and grey literature to enrich the context of the interview findings. While access to certain sensitive documents was limited due to ethical concerns, the approach was focused on maintaining high moral standards. Recruitment was conducted through both professional and personal networks, ensuring participant anonymity and robust data protection while adhering to established safety protocols and informed consent procedures.

3.3 Data Interpretation & Integration with Broader Literature

Thematic analysis (Clarke & Braun, 2017), was employed to identify recurring psychological patterns and coping strategies among survivors and stakeholders. The findings were then systematically compared and integrated with existing GBV literature and feminist theoretical

frameworks, demonstrating the thoroughness of the research process and the validity of the conclusions.

To enhance the study's depth, the results were analysed through the critical lens of feminist theory. This lens provides a unique perspective on institutional violence, gendered oppression, and systemic barriers to justice for survivors, underlining the research's commitment to understanding and addressing these issues.

This approach ensures that the findings not only amplify survivor voices but also significantly contribute to broader academic discussions on GBV, gendered power dynamics, and feminist resistance in conflict-affected regions, engaging the audience and stimulating intellectual curiosity.

3.4 Data Analysis

Thematic analysis, as outlined by Clarke and Braun (2017), was used to analyse the data. Familiarizing with interview transcripts through repeated reading. Coding data inductively and deductively to find key themes related to psychological trauma and resilience. Developing broader themes and subthemes, such as "psychological isolation," "coping mechanisms," and "barriers to mental health recovery." Refining themes to ensure clarity and coherence. Synthesizing findings with illustrative quotes to highlight survivor voices.

Findings present types and contexts of GBV during WPCs closure. Quotations were selected to highlight themes appearing in the analysis. Some quotations provide information about one theme, while others may provide information relevant to several themes. Quotations are labelled with codes to show whether they come from a survivor or service provider. However, given the ongoing conflict, we have removed the names of the locations from individual reports and the names of organizations to protect the anonymity of participants and service providers.

3.5 Theoretical Framework

This study is guided by feminist theory, particularly Kimberlé Crenshaw's concept of intersectionality, to analyse how systemic oppression, cultural norms, and patriarchal structures intersect to exacerbate the mental health challenges faced by Afghan women. This framework highlights how the closure of Women's Protection Centres (WPCs) has intensified psychological trauma, further isolating survivors within a discriminatory socio-political environment. By applying an intersectional lens, this research explores how multiple layers of marginalization gender, socio-economic status, geography, and cultural stigma shape the lived experiences of GBV survivors, making their challenges more complex and multidimensional.

Crenshaw's (1989, 1991) intersectionality framework provides a critical perspective for understanding the compounded vulnerabilities Afghan women face, particularly in the urgent aftermath of the Taliban's takeover. Afghan women's realities cannot be examined solely through the lens of gender oppression; their access to resources, justice, and safety is deeply embedded within broader social and political structures. Women from rural provinces, for example, face additional barriers compared to those in urban Kabul, as they experience restricted mobility, heightened social surveillance, and limited legal awareness, making it significantly more challenging to seek protection or escape abusive situations. The collapse of WPCs has further exacerbated these intersecting vulnerabilities, leaving many survivors with no choice but to return to environments where their agency is severely diminished. For some, this means being subjected to forced marriages, continued violence, or complete ostracization from their communities, intensifying both their psychological distress and social isolation.

By applying an intersectional feminist framework, this study emphasizes the necessity of survivor-centred policies that deeply understand and account for Afghan women's diverse and layered realities. Addressing GBV in Afghanistan requires an approach that acknowledges how structural inequalities, intersectional discrimination, and socio-political constraints shape survivors' experiences. Without recognizing these complexities, interventions risk being ineffective or further marginalizing those most vulnerable. This research, therefore, contributes to feminist scholarship by advocating for policies and support systems that are not only gender-sensitive but also intersectional informed, ensuring that the diverse needs of GBV survivors are fully understood and addressed.

4. Results

4.1 Psychological and Emotional Impact

The closure of Women's Protection Centres is having a detrimental psychological and emotional impact on Afghan women, and this situation cannot be overlooked. These centres have historically provided not just immediate safety from violence but a crucial support network that empowers women to reclaim their agency and rebuild their lives. With these safe havens now shuttered, countless women are left to navigate an environment filled with fear and uncertainty on their own. From a feminist perspective, this reflects how patriarchal structures deliberately dismantle women's autonomy, reinforcing their dependence on male-dominated spaces.

It is essential to recognize that these closures are more than just operational decisions; they reflect a broader systemic neglect of women's rights and well-being. The loss of these centres worsens feelings of isolation, hopelessness, and despair among women who may already be grappling with trauma from violence, forced marriages, or loss of personal freedoms. Feminist theory highlights that women's trauma is often dismissed or depoliticized, yet these closures are a direct result of state-sanctioned gender oppression.

A former shelter staff who directly dealt with survivors stated that,

"The survivors were scared and knew they would return to the same situation if the shelter closed."

The statement emphasises the significant challenges posed by the closure of Women's Protection Centres (WPCs), which has unfortunately left many women facing the daunting choice of returning to potentially harmful home environments or confronting societal stigma for their independence. While the loss of these centres has removed essential physical safety, it has also created a gap in the psychological and emotional support that is crucial for their healing process.

The impact ripples through entire communities, touching the lives of young girls who are already denied education and opportunities. They feel abandoned without safe spaces or role models to look up to as if their future had been stolen before it even began. The oppression they face is not accidental it is a deliberate, unjust effort to keep them powerless, ensuring that the next generation of women remains unheard and unseen. (Ahsan, 2020).

The situation is a stark reminder that their safety and dignity are not a societal priority. Their justified anger and frustration are a direct result of a world that consistently overlooks their struggles and refuses to acknowledge their needs. This is an urgent matter that demands our attention and action.

Consider the story of a survivor, a mother of three, who had fled violence and sought refuge in a shelter to protect herself and her children. She vividly expressed the devastating impact of the closures:

"When I heard the news about the closures, it was as if the ground beneath me had given way. Suddenly, I faced the terrifying reality of uncertainty: what would happen to me? To my children? Those shelters were my last sanctuary, my final connection to safety and dignity. Without them, I felt abandoned, like I had been thrown back into a world that did not care about my struggles."

Her words paint a heartbreaking picture of what the closure of Women's Protection Centres (WPCs) meant for survivors. The phrase "as if the ground beneath me had given way" conveys the overwhelming shock and fear of losing the one place that had given her a sense of security. These shelters were not just buildings but lifelines offering protection, hope, and a chance to heal. Their closure left women uprooted, abandoned, and forced back into a world of uncertainty and danger. It's up to us to provide the safety net they need.

When the survivor describes facing the "terrifying reality of uncertainty," it reveals the overwhelming fear of what will come next. Questions like "What would happen to me? To my children?" capture the immediate panic about survival. For many women, these shelters were their last source of safety; without them, they were left stranded with no clear path forward.

The phrase "my final connection to safety and dignity" is compelling. These shelters did not just provide a roof over their heads they restored a sense of worth and respect that many had lost after enduring abuse. Their closure stripped away not only physical protection but also the survivors' sense of identity and humanity, leaving them feeling lost and dehumanized. The speaker described the outside world as one that "did not care about my struggles" and became a place of abandonment and invisibility.

The quote is a raw reminder of systemic failure. It is not just about losing a building; it is about losing a place of hope, healing, and belonging (Shaheed, 2021). The closures were devastating, leaving survivors feeling helpless and unprotected in a world indifferent to their suffering.

4.2 Fear of Returning to Abusive Environments

Survivors are scared of going back to the abusive environment from the place they escaped. A shelter staff member from Kunduz WPC said,

"The survivors were scared and knew they would return to the same situation if the shelter closed."

For many women, returning to these environments was not just emotionally distressing but also physically dangerous. This statement shows the fear of being tortured while returning to the families or outside of the shelters. This quote portrays two issues. First, they are scared of whether their families accept them or not, and if they do, they will be abused again. The second majority did not have families, or they escaped abusive families, and they did not dare to return home.

4.3 Isolation and Stigma

According to the interviewee, this theme emerged regarding survivors' isolation and stigma, emphasizing the deep cultural stigma faced by women who seek help after experiencing domestic violence. Participants described how women are often rejected by their families when

facing domestic violence, who show little sympathy toward them despite the violence they have endured.

This stigma isolates survivors, as they are often rejected by the very people who should provide them with support and protection. A shelter staff member mentioned that,

"Families used to turn against their women/daughters and daughters-in-law if they sought help or support due to domestic or social abuse."

The phrase "turn against" shows the harsh reality survivors face when they are blamed rather than supported. Instead of addressing the root cause of the abuse, families often prioritize societal perceptions of honour and loyalty, leaving survivors feeling abandoned and even further marginalized. This response reinforces harmful cultural norms that silence survivors and discourage them from seeking help. These views supported by Mukerji (2023), highlighting that women seeking support from their birth families after experiencing domestic violence often find themselves met not with sympathy but with further stigma. Rather than offering refuge, these families frequently reinforce societal norms, prioritising family honour over a woman's safety and well-being.

This situation shows how patriarchal systems do not recognise women's agency and enforce control through social exclusion (Okeke-Ihejirika, 2017). By stigmatising survivors who look for help, these systems reinforce the idea that women's primary role is to endure and remain loyal to their families regardless of their personal suffering. This dynamic not only denies survivors their autonomy but also discourages other women from speaking out, perpetuating a culture of silence and oppression.

4.4 Identity and Self-Worth

This theme emerged repeatedly during the interviews, highlighting the impact of WPC closures on GBV survivors. WPCs provided not only shelter but also a crucial support system for those escaping abusive and unsafe environments.

Nazira a former survivor and resident of a WPC in Herat said:

"It was more than just a roof over our heads; the WPCs were havens of hope, spaces where we could share our stories and begin the painful journey of healing from the scars of abuse."

This quote emphasizes the transformative role of WPCs in empowering survivors. They were not merely places of physical safety but spaces of emotional refuge and empowerment.

Furthermore, the closure of these shelters represents more than just a logistical setback; it actively dismantles a crucial pathway to recovery for survivors. Without these spaces, many women were left feeling abandoned, not only by the state but by a society that already marginalized their struggles. The removal of WPCs stripped survivors of the support structures needed to rebuild their confidence, independence, and self-worth. In this sense, the closure was not just an operational decision but a systemic failure that reinforced cycles of abuse and oppression.

4.5 Dependence and Vulnerability

According to the interview with shelter staff, the forced displacement of survivors from WPCs reflects systemic failures in addressing the complex, intersectional needs of women facing

gender-based violence (GBV). It is crucial to note that these failures are not just individual or organizational but also systemic, with the state playing a significant role. We see how factors like poverty, gender, and social exclusion compound the vulnerabilities of these women. Survivors who were already dependent on shelters for safety were left without alternatives, worsening their economic and social marginalization.

Basera a former staff of Farah shelter who were present during survivors' relocation and reintegration to their families, noted that,

".... They (WPC staff) told us to go wherever we could... Most of us ended up begging on the streets."

Being forced to "go wherever" not only stripped survivors of their dignity but also exposed them to further exploitation, including the risks of human trafficking, harassment, rape, and violence. The lack of post-shelter planning enabled ongoing dependence, where survivors had no means to rebuild their lives without external support.

This situation also highlights the broader issue of dependence. Without shelters, survivors were left with few resources to establish independence, such as access to housing counselling or employment. The absence of such support left them trapped in a cycle of fear and vulnerability, showing how critical it is to have systems in place that empower survivors to reclaim control over their lives.

4.6 Hope and Loss

"When I heard the news about the closures, it was as if the ground beneath me had given way. Suddenly, I faced the terrifying reality of uncertainty: what would happen to me? To my children?" said a female survivor from Nimroz shelter.

This quote captures the profound emotional devastation that survivors felt upon hearing about the closure of WPCs. The metaphor "the ground beneath me had given way" reflects the deep sense of instability and fear that went with the loss of these shelters. The closures shattered that hope, leaving survivors to grapple with an uncertain and terrifying reality.

Survivors said the broader implications of the closures framed them as a failure of institutional and societal systems designed to protect survivors. The loss of WPCs was not just logistical. It symbolized the collapse of structures that survivors relied on to rebuild their independence and self-worth.

Without these systems in place, survivors were left vulnerable, with limited options to escape cycles of abuse or rebuild their lives. This breakdown reflects a systemic failure to prioritize women's well-being and underscores the need for sustainable survivor-centred solutions that address both immediate safety and long-term empowerment. The phrase "a powerful breakdown" underscores the severity of this failure.

4.7 Survivor Suicides

The interviewee highlighted a deeply troubling reality: many survivors placed under the care of designated caretakers experience further abuse, including forced marriages, which in some cases have tragically led to suicide.

"I later learned that one woman under a caretaker's care committed suicide due to the abusive and traumatic conditions. This tragic incident went unnoticed amidst Taliban control, leaving the case closed without follow-up." Said a shelter staff from Kunduz.

The suicide of a survivor under the care of an abusive caretaker during the Taliban's control reflects not just an isolated tragedy but a chilling insight into the layered vulnerabilities of individuals living under oppressive regimes. This incident bears the destructive consequences of unchecked power and the systemic failures that enable such harm, particularly in contexts where governance is marked by fear and impunity (Allen et al., 2021). For women, already marginalised by patriarchal structures, the risks of exploitation and violence are magnified, leaving them with few, if any, avenues for protection or justice. The betrayal by a caregiver, a figure entrusted with safeguarding well-being, adds another layer of profound ethical failure, transforming what should have been a space of safety into one of trauma. This survivor's reality is a stark reminder of how easily human suffering can be made invisible when accountability is the normalization of violence and neglect dulls societal attention (Adams, 2019). Beyond the immediate tragedy, this case demands reflection on the broader neglect of mental health in crisis, where despair often goes unnoticed until it is expressed in the most irreversible ways. It challenges us to confront the structures that allow such suffering to persist and to imagine systems of care, justice, and advocacy that centre the dignity and humanity of the most vulnerable. In telling this story, we are called to analyse and empathise, ensuring that the survivor's experience is neither erased nor forgotten in the pursuit of systemic change.

4.8 Forced Marriages and Exploitation: A Psychological Toll

This theme emerged from the shelter staff during the interview from many shelter staff, highlighting that.

"Their families took back some of these women and were quickly married off as a solution to their problems, but many of these marriages were just another form of abuse." A shelter staff noted.

This finding from my research highlights the complex challenges faced by women who have experienced violence and trauma during family reintegration and under societal expectations. Marriage is often viewed as stabilizing in many cultures, providing security and societal acceptance (Alzner, 2024).

However, the research reveals that this belief can lead to hasty decisions that overlook the psychological and emotional needs of these women. Marrying them off may be seen as a way for families to restore perceived honour or normalcy, but this response often does not address the deep-seated issues of abuse and trauma they have endured.

According to the participants, "instead of offering protection and support", these marriages often effect cycles of control and harm. Many women find themselves trapped in relationships defined by coercion, with their freedom and autonomy severely restricted. This continuation of abuse not only compromises their safety and mental health but also underscores how societal systems do not account for the nuanced experiences of trauma survivors.

Furthermore, societal norms around marriage can pressure women to conform to expectations of loyalty and acceptance, even at the cost of their well-being. For some, the act of returning home, often seen as a haven, ironically leads to further victimization. These pressures highlight a troubling paradox: while family and marriage are expected to provide safety, they often become sources of added harm.

5. Conclusion

The closure of Women's Protection Canfers (WPCs) in Afghanistan and the following displacement of survivors of gender-based violence (GBV) have brought to light the urgent need for addressing the intersection of gender, socio-cultural norms, and institutional failures in the country. WPCs, which were established with the support of international community to provide critical support to women experiencing GBV played a vital role in helping survivors regain safety, dignity, and autonomy. WPCs face constant opposition despite their crucial services due to their association with these international human rights frameworks and the broader societal context where GBV is still not widely recognized as a social issue (Wimpelmann, 2017).

The closure of these centres has exposed a systemic failure in protecting women and rebuilding their lives in a society that continues to marginalize their experiences. The displacement of survivors, without proper support mechanisms, has compounded their vulnerability, often forcing them into situations where they are exploited, re-traumatized, and left to face psychological distress without adequate help. The return of survivors to their communities often ostracized by their families due to deeply ingrained patriarchal norms and cultural stigmas marks the tragic collapse of the hope that WPCs provided, leaving women without the emotional refuge and support systems that were essential for healing.

The intersectional vulnerabilities of these women, magnified by Afghanistan's deeply patriarchal structures, further complicate efforts to ensure their long-term recovery. WPCs were not just shelters but spaces where survivors began to rebuild their emotional resilience and autonomy. Their closure, therefore, represents more than just the loss of physical safety it signifies a profound breakdown in the systems helping women regain their self-worth. The severity of this breakdown is evident in the suicides reported among survivors placed with abusive caretakers (Section 4.7) and the accounts of women forced to beg in the streets after being turned out of shelters (Section 4.5), stark reminders of the mental-health toll when support networks disappear. The severity of this breakdown is evident in the suicides reported among survivors placed with abusive caretakers (Section 4.7) and the accounts of women forced to beg in the streets after being turned out of shelters (Section 4.5), stark reminders of the mental-health toll when support networks disappear. As one survivor expressed, the closure of these centres felt like the loss of hope, leaving them to face an uncertain future (Bhanuwati, 2024).

Furthermore, the forced reintegration of survivors into families or marriages, often seen as a solution, has proven to be another form of victimization. These marriages, rather than providing security, often perpetuate cycles of abuse, stripping survivors of their agency. The societal pressure to restore honour through marriage continues to force women back into harmful situations, further entrenching the patriarchal structures that control their lives.

The findings in this paper emphasize the need for a more nuanced approach to addressing GBV in Afghanistan now, one that is sensitive to the local cultural and legal realities while prioritizing the mental health and long-term well-being of survivors. While the international human rights framework has helped draw attention to violence against women, its implementation in Afghanistan has met resistance due to its association with foreign interventions. Understanding the local context, which includes both gender and cultural factors, is essential for creating survivor-centred solutions that are sustainable and culturally appropriate. Practical steps identified by participants include setting up community-based psychosocial-support circles in local mosques and clinics, and deploying mobile safe-space units staffed by trained counsellors who can discreetly reach women in remote districts ,

measures that offer interim protection and therapy even when brick-and-mortar shelters are unavailable.

In conclusion, the closure of WPCs highlights the loss of not just physical shelters, but the dismantling of critical support systems that allowed survivors to regain their independence and sense of self-worth. Moving forward, any intervention aimed at combating DV in Afghanistan must integrate local communities and be grounded in an understanding of the complex cultural, legal, and social dynamics that affect Afghan women. The survival, healing, and empowerment of these women depend on creating sustainable, community-driven solutions that remain firmly in place, ensuring that survivors continue to receive the protection and support they need to rebuild their lives. This underscores the importance of local engagement and ownership in addressing gender-based violence in Afghanistan. Finally, participants urged the creation of an independent monitoring and accountability mechanism, tasked with tracking each survivor's case, auditing any substitute accommodation, and reporting publicly on outcomes, so that future shelter closures or caretaker abuses are never again "left without follow-up."

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