How to Refer a Gender-based Violence (GBV) Case

« ...but I am not a GBV specialist. What can I do to refer and support a survivor? »
Objectives

- You will have a basic understanding of what GBV is.
- You will have a basic understanding of what is your role and how to do a safe referral GBV survivors.
- You will know the available GBV services.
- You will also know GBV key messages related to COVID-19.
Session 1. What is Gender Based Violence (GBV)?
Definition of Gender based violence

Gender-based violence is an umbrella term for any harmful act that is perpetrated against a person’s will, and that is based on socially ascribed (gender) differences between males and females. It includes acts that inflict physical, sexual or mental harm or suffering, threats of such acts, coercion, and other deprivations of liberty. These acts can occur in public or in private.

Key messages

- GBV is caused by gender inequality, the abuse of power and disregard of human rights.

- Anyone can experience GBV including men and boys but females are disproportionately affected because of gender inequality and power imbalance between male and female.

- GBV is not only rape/sexual violence but includes a different forms of violence such as physical and emotional violence.

- GBV survivors need various services to overcome the negative consequences of GBV. The needs of GBV survivors are not always same even if the survivors experienced same form of violence.

- COVID-19 lockdowns are bringing a rise in domestic violence, and homes cannot be assumed as safe zones for many women and girls

“I urge all governments to put women’s safety first as they respond to the COVID-19 pandemic”

António Guterres, UN Secretary-General
Session 2. GBV referral pathway and roles of a Non GBV specialist
What is the GBV referral pathway?

A flexible mechanism that safely links survivors to supportive and competent services in a timely way.
<table>
<thead>
<tr>
<th>Prevention of HIV</th>
<th>The risk of HIV can be reduced if a survivor is referred for medical care to receive HIV post-exposure prophylaxis within 3 days (72 hours)</th>
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<tbody>
<tr>
<td>Prevention of Pregnancy</td>
<td>The risk of unwanted pregnancy can be reduced if a survivor is referred for medical care to receive emergency contraception within 5 days (120 hours)</td>
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<tr>
<td>Evidence Collection</td>
<td>If the survivor requests evidence collection for legal purposes, it is important that the medical examination be arranged and recorded as soon as possible (48 hours).</td>
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Remember! Urgent Safety Referral

- Consider if the perpetrator or anyone else is a present and urgent threat to the survivor and/or yourself.

- Call the security actor/Safe Shelter actor if there is an urgent physical threat to the survivor and/or yourself.
Session 3. How to respond to a disclosure of GBV?
ROLES AND RESPONSIBILITIES OF NON GBV SPECIALISTS

- All actors are responsible for knowing the GBV referral pathways and the services available where they work.

- Provide a listening ear, free of judgement,

- Obtain verbal consent for referrals to services.

- Provide accurate, up-to-date information on available services and let the survivor make their own choices.

- All survivors have different needs.

- When possible and if needed help to meet basic emergency needs (food, water, information, shelter, clothing, etc.)

- Apply the guiding principles.
Guiding Principles - Safe referrals of GBV Survivors

**RESPECT**
All actions taken are guided by respect for the choice, wishes, rights and dignity of the survivor.

**SAFETY**
The safety and security of the survivor is the number one priority for all actors.

**CONFIDENTIALITY**
People have the right to choose to whom they will or not tell their story. CONFIDENTIALITY means not sharing any information at any time to anyone without permission.

**NON DISCRIMINATION**
Provide equal and fair treatment to anyone in need of help.

**Best interest of the child**
Decisions and actions affecting the child should reflect what is best for the safety, well-being and development of that particular child.
Steps to respond to a direct disclosure of GBV

**Look**
- Address urgent medical and safety needs
- Immediate safety – safe place? Comfortable talking to you?

**Listen**
- Listen to people and help them to feel calm
- Do not ask details about GBV
- Ask about people’s needs and concerns

**Link**
- Provide the survivor the information of available services on the GBV Referral pathway.
- Refer the survivor if s/he asked you to refer her to a specific services.
- If requested by the survivor, do physically accompany him/her to the service point
Key messages

- Your roles are:
  - to provide a listening ear, free of judgement, to the survivor who disclosed GBV experience to you; and
  - to provide accurate, up-to-date information on available services and let the survivor make their own choices.

- When you respond to a disclosure of GBV experience, make sure that you apply guiding principles: safety, respect, non-discrimination, confidentiality and best interest of the child (in case of children only).

- Only survivors can decide when, how and to whom s/he disclose her/his GBV experience. NEVER actively look for GBV survivors.
PLEASE, giving support doesn't mean:

- An interview, questioning about what happened to the person or a verification of the facts.
- Put pressure on the person to get his or her feelings in detail.
- Giving Psychosocial support which is a whole process with structured steps and offered by trained specialists.

Note: Please, you will never, never do survivors identification on the field. This is strongly prohibited.

NB: GBV as a collective responsibility:

1. Everyone has a role to play
2. But not everyone is qualified to do all the work.
3. Need to understand our respective roles and limits.
THANK YOU!!
QUESTIONS???