

# Gender-Based Violence Prevention and Response

WOMEN'S & CHILDREN'S HEALTH

**Recognized as a leader in humanitarian gender-based violence (GBV) prevention and response programming, International Medical Corps' interventions span countries across Europe, Africa, Asia and the Middle East.**

We design our programs to support and empower women and girls who face particular risks during and after armed conflict and natural disasters. Our priority is to strengthen core services for survivors of GBV, particularly case management and psychosocial support services, as well as quality healthcare. To prevent future incidents of GBV, we also work with communities to address protection risks and combat harmful practices. Through our programs and global coordination efforts, International Medical Corps contributes to the development of best practices and global standards for this relatively new field of work.

Gender-based violence (GBV) is a term used to describe harmful acts perpetrated against a person based on socially ascribed differences between males and females, and is used to highlight how gender discrimination makes women and girls vulnerable to various forms of violence, including early/forced marriage, female genital cutting, sexual harassment, dowry/bride price abuse, intimate partner/domestic violence, deprivation of inheritance and property, sexual assault and rape.



GBV is a pervasive public health and human rights issue, affecting the physical and psychological health of survivors, as well as the health and well-being of families and communities. Women and girls are particularly vulnerable to violence in emergency settings, when risks are compounded at the very time that support systems are interrupted.

In partnership with local organizations, community-based support workers and healthcare providers, International Medical Corps works to address these risks and deliver quality, focused support services for survivors of GBV. We also work with communities to promote women's equality and to combat beliefs and practices that perpetuate different forms of GBV. Our programs are tailored to ensure that interventions are needs-driven, adapted for cultural and security considerations, and responsive to the nature and extent of GBV present in different contexts



Worldwide, one in three women have experienced violence by an intimate partner or sexual violence by a non-partner.



Women who have been abused by their partners are almost twice as likely to experience depression and, in some regions, 1.5 times more likely to acquire HIV.



Complications from pregnancy and childbirth are the leading cause of death for girls aged 15 to 19 in developing countries, where one in three girls will marry before the age of 18.

International Medical Corps' key GBV prevention and response activities include:

- ▶ Identifying and addressing risk factors for women and girls
- ▶ Coordinating with multiple sectors to integrate protection strategies into all services
- ▶ Providing care and support for survivors, including case management, psychosocial support, healthcare and reintegration services
- ▶ Organizing safe spaces for women and adolescent girls to access information, seek help and establish support networks
- ▶ Mobilizing communities to address causes and contributing factors of GBV
- ▶ Working with communities to foster resilience and support survivors
- ▶ Empowering vulnerable women and girls to increase personal, social and economic opportunities



International Medical Corps is one of the few humanitarian organizations that delivers specialized support services for survivors of GBV in emergency settings. Through the survivor-centered case management and psychosocial support services we provide, trained caseworkers offer individualized, ongoing support to help survivors recover from traumatic incidents and receive assistance based on their needs and choices. To help survivors access this care and support, we integrate focused GBV response services into women and girls' safe spaces and trusted community structures. We also work with community groups and service providers to reduce stigma and promote the dignity, safety and well-being of survivors.

Examples of how we deliver focused support services include the following:

## SOUTH SUDAN

### Supporting remote, conflict-affected communities.

Since civil war erupted in late 2013, millions of South Sudanese have been forced to flee their homes. In the ongoing conflict, untold numbers of women and girls have been targeted for abduction and rape. In an environment of rampant lawlessness and insecurity, women and girls face additional risks of inter- and intra-communal violence, as well as family and domestic violence. To address the needs of survivors across an expanse of hard-to-reach areas of the country, International Medical Corps has established safe spaces where women and girls can access help, and trains community-based GBV taskforces to provide psychological first aid and safe referrals for survivors. Through safe spaces, International Medical Corps also supports livelihoods activities to reduce women's economic vulnerability, including helping women to organize into village savings and loans associations. Furthermore, International Medical Corps trains community leaders to combat harmful practices and strengthen support for survivors. We also train doctors and nurses to care for survivors of rape, and have helped the government integrate training on care for GBV survivors into the standard curriculum for midwives.

## IRAQ

### Catering to different needs in a complex environment.

International Medical Corps provides focused GBV response services in north and south-central Iraq, where we support communities displaced by conflicts—including conflict between

Iraqi government forces and Islamic State (ISIS) militants—and communities of Syrian refugees in camp and non-camp settings. We have established women and girls' safe spaces that offer a range of services and activities in camps and local communities. We train Iraqi and Syrian women to provide case management and psychosocial support services to survivors through these safe spaces. We also have three-person mobile teams connected to safe spaces that are ready to deploy in surrounding locations to support women and girls during new influxes or upsurges in violence. Moreover, we have a dedicated team focused on working with adolescent girls to understand and address vulnerabilities through tailored prevention strategies, and cater to the specific needs of girl survivors of GBV.

## NEPAL

### Providing services in the aftermath of the 2015 earthquake.

Women and adolescent girls faced increased risks of GBV in the chaotic aftermath of a major earthquake, including displacement and loss of shelter, a breakdown in support structures and risks of trafficking and sexual exploitation by rogue groups and individuals promising assistance. Reproductive and child health risks also increased because birthing centers had been destroyed, and overcrowded health facilities were unable to accommodate mothers in delivery. International Medical Corps responded to affected communities and quickly partnered with local women's organizations to increase support and protection for women and girls. We established mother/baby transition homes alongside safe spaces where survivors of GBV and vulnerable women and girls could access a range of services. In addition, we trained social workers to provide focused GBV case management services and trained outreach volunteers to reach women and girls in remote communities, alerting them of heightened risks of GBV and connecting survivors to vital health and psychosocial support.

## WOMEN AND GIRLS' EMPOWERMENT

Across the world, women and girls face discrimination. Women have limited political, social and economic power compared with men, and their voices and needs are too often ignored. This can be particularly true during emergencies and displacement, when limited resources, security risks and poor planning all contribute to the further marginalization of women and girls.

International Medical Corps is committed to gender equality and to women and girls' empowerment. Through our GBV prevention and response programs, we work to increase social, educational and recreational opportunities for women and girls affected by emergencies and displacement. One of our key programming approaches is to organize women and girls' safe spaces.

Safe spaces enable women and girls to gather, receive information, share their concerns and rebuild support networks while participating in a range of activities, such as dancing and sports, literacy classes, basket weaving and life-skills training. The spaces also serve as hubs for women and girls to access information on important issues and services, including protection risks, sexual reproductive health services and nursing support for new mothers. Most critically, the safe spaces enable survivors of GBV to safely and discreetly seek help.



International Medical Corps has helped establish dedicated safe spaces for women and girls in 20 countries affected by emergencies.



In the Democratic Republic of Congo, International Medical Corps provided skills training, as well as training in business skills and entrepreneurship, to more than 3,400 women, including many survivors of GBV.



International Medical Corps has trained more than 6,000 women and adolescent girls in adult literacy through women and girls' safe spaces in the Far North region of Cameroon.





## COMBATING GENDER-BASED VIOLENCE

Every act of GBV is preventable, and International Medical Corps is committed to supporting global, national and community efforts to combat GBV. In emergency settings, we identify local partners, staff and volunteers committed to ending violence against women and girls. We value local knowledge and work with community groups to identify and mitigate specific risk factors for GBV in different environments. To combat the social norms of discrimination that constitute root causes of GBV, we also engage communities—including men and boys—to promote women’s and girls’ equality and to foster positive, non-violent behavior.

In Pakistan, for example, we organize sex-separated groups of community volunteers into Gender Support Groups that are responsible for holding discussions with men or women about the consequences of GBV, including the harmful effects of some traditional practices. The Gender Support Groups also talk with community members about the benefits of girls’ education and women’s economic and social participation. In eastern regions of the Democratic Republic of Congo, where conflict-related sexual violence is widespread, we work with key actors in communities to develop communication strategies and share messages through radio campaigns, theater, public debates, sporting events and visual media. And in South Sudanese refugee camps in Ethiopia, we support adolescent girls in leading the fight against early/forced marriage by engaging teachers, community leaders and parents in discussions about the health, psychosocial and economic consequences of this harmful practice.



Every year, from 25 November to 10 December, International Medical Corps organizes outreach campaigns in upwards of 20 countries as part of the global 16 Days of Activism to end Gender-Based Violence.



In the Democratic Republic of Congo, International Medical Corps worked with the Ministry of Education for the piloting and national rollout of a Code of Conduct to prevent GBV in schools.



In late 2011, International Medical Corps successfully coordinated with government authorities to organize the first-ever march for women’s rights permitted on State property in Tripoli, Libya.



## BUILDING GLOBAL CAPACITY

As a leading agency for GBV prevention and response in humanitarian settings, International Medical Corps contributes to the development of global guidance and best practices for protecting women and girls from violence and for supporting survivors. International Medical Corps is a core member of the Gender-Based Violence Area of Responsibility (GBV AoR) under the Global Protection Cluster, and serves on the Gender-Based Violence Information Management System (GBVIMS) Steering Committee. We also are part of the Reference Group for the Inter-Agency Standing Committee's (IASC) Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action.

Since 2011, International Medical Corps has worked with UNFPA and the U.S. Department of State's Bureau of Population, Refugees, and Migration (PRM) to develop and rollout a multi-phased learning course to expand the pool of qualified program managers who can lead GBV prevention-and-response interventions in humanitarian settings. [The Managing GBV Programmes in Emergencies \(MGBViE\) learning program](#) includes three phases: a self-guided e-learning introductory course; a face-to-face training workshop for graduates of Phase I; and continued learning and support through a mentorship initiative and the virtual GBV AoR Community of Practice, launched through the MGBViE program.

In 2017, International Medical Corps partnered with the International Rescue Committee, with support from PRM, to develop a comprehensive set of tools and resources to support the establishment and implementation of women and girls' safe spaces in various emergency contexts. A Women and Girls' Safe Space Toolkit is currently being piloted in four countries and will be finalized for global use in 2019.

International Medical Corps is also working to develop guidance for GBV programs to engage traditional leaders, with support from the U.S. Office of Foreign Disaster Assistance (OFDA). Traditional leaders carry great responsibility and influence over communities, particularly in emergency settings, when formal systems break down or are more difficult to access. Leaders are custodians of social norms, and help to set expectations and practices relating to protection and gender relations. They are also often involved in addressing incidents of GBV, including domestic violence, early and forced marriage, and sexual violence perpetrated within communities. Because of their multiple responsibilities and areas of influence, it is important for GBV programs to have guidance and tools to engage traditional leaders for both GBV prevention and response. International Medical Corps is working to pilot a toolkit for working with traditional leaders in three countries: Cameroon, Mali and Iraq. The toolkit will be finalized in 2019 and made available as a global resource.



International Medical Corps has trained more than 100 emerging GBV specialists through the MGBViE program.



In surveys conducted six months after the MGBViE in-person training, 100% of graduates rate the usefulness of the training as high or very high, and more than 95% report increased preparedness to manage a GBV program in an emergency setting.



International Medical Corps is currently piloting global guidance for GBV interventions in five country programs.





\*Photographs included in this brochure were taken and published with consent of all subjects, in line with International Medical Corps' communications guidelines. International Medical Corps is careful to document only less-sensitive elements of GBV programs and does not take photographs of known survivors of GBV.



[www.InternationalMedicalCorps.org](http://www.InternationalMedicalCorps.org)

Since its inception 35 years ago, International Medical Corps' mission has been consistent: ease the suffering of those affected by war, natural disaster and disease by delivering vital healthcare services and focusing on training that provides the skills and tools required to foster self-reliance. This approach of helping people to help themselves is critical to returning devastated populations to self-reliance.

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**HEADQUARTERS CONTACT:** Micah Williams, Senior Technical Advisor, GBV  
[mwilliams@InternationalMedicalCorps.org](mailto:mwilliams@InternationalMedicalCorps.org)

**HEADQUARTERS:** 12400 Wilshire Blvd., Suite 1500 | Los Angeles, CA 90025  
**PHONE:** 310-826-7800 | **FAX:** 310-442-6622

**DC OFFICE:** 1313 L St. NW, Suite 110 | Washington, DC 20005  
**PHONE:** 202-828-5155 | **FAX:** 202-828-5156

**UK OFFICE:** Ground Floor 161 Marsh Wall | London E14 9SJ  
**PHONE:** +44 (0) 207 253 0001