MULTISECTORAL APPROACH TO ADDRESS GENDER BASED VIOLENCE

The traditional model of addressing GBV deals with isolated providers (multiple uncoordinated entry points for GBV victims/survivors), allocating a set of uncomprehensive services, unable to meet the complex needs of the GBV victims/survivors. At systemic level, the absence of an integrated approach deals with a width range of problems which cumber the intervention and impermissibly distort the accuracy of statistics regarding the GBV phenomenon. There are differences between procedures of different institutions for identification, registration and reporting of a GBV cases.

The disadvantages of uncoordinated response to GBV are:

- victim/survivor deprivation of integrated social support and information;
- tangle situation for the victim/survivor and delays in offering of concrete intervention/support;
- multiple and repeated visits of victim/survivor to service providers, "following" an unclear inter-institutional itinerary;
- usage of various terms and definitions of GBV;
- collection of different data/indicators about GBV cases;
- usage of different rules of recording, counting, transmission and aggregation of data.

A multi-sectoral response to GBV represents a holistic and coordinated approach aimed at harmonizing and correlating programmes and actions developed and implemented by a variety of institutions (but not limited to these) in the areas of psychosocial welfare, law enforcement (police, prosecutors and justice departments) and health. A multi-sectoral response to GBV is based on inter-institutional partnership and cooperation, requires a common philosophy for addressing GBV and follows the principles and standards determined by the partners involved.

A multi-sectoral response to GBV leads to increased level safety and support for GBV victims/survivors through an effective, immediate and consistent services network. A coordinated activity between relevant institutions/organizations improves the quality of services

provided to GBV victims/survivors by facilitating the access to training programmes of multisectoral team members.

A network of well-trained service providers, with necessary skills and adequate behaviors, will offer a sensitive and efficient support adapted to victim/survivor's needs and will reduce the risk of re-victimization. A network of effective and qualitative services will increase the trust of victims/survivors in the capabilities of and the addressability to mandated institutions/organizations. The multi-sectoral response to GBV brings durable and sustainable changes and help to create an institutional and community culture that GBV is not acceptable and tolerable.¹

The perception survey conducted by Family Rehabilitation Center (FRC) identified that the respondents have overall optimistic perceptions and attitude towards gender/GBV/survivors, such has multi stakeholder support, women economic empowerment, accessibility to the supports services that are available to prevent and address sexual and gender-based violence. The understanding about the above-mentioned topics is high and they only need the support to link to these aspects to get better services and to empower the survivors accordingly.



The community believes that the community response systems linking the religious leaders, community leaders, civil society members to identify the sexual harassment cases and respond to

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¹ https://eeca.unfpa.org/sites/default/files/pub-pdf/Multisectoral%20response%20to%20GBV.pdf

it will more effective. Therefore, considering to strengthen those types of set up will support the community. The religious leaders mentioned by the respondents mostly related church and missions.

Mostly the women feel that they have all rights to earn for themselves as well as to take care of the family. In the respondents 90% of them agreed that they should allowed to work. But mostly the women who participated in the focus group discussions mentioned that they like stat up new business with the available local resources but they do not know how to start it and where to seek help for this particular purpose.

Generally, the community members know there are places in the government department which provide support for the women who are victimized by SGBV. But they do not know have the confidence and knowledge about the services and how to access them when they wanted to do it.