

Strengthening Response to Violence Against Women and Girls

Handout: Session 8 – Counselling for Sexual Violence Against Women

Handout Developed by iCALL Tata Institute of Social Sciences

What is Sexual Violence (SV)?

Sexual violence encompasses acts that range from verbal harassment to forced penetration, and array of types of coercion, from social pressure and intimidation to physical force. Sexual violence is often "hidden," resulting in a significant underestimation of the real level of harm caused. It includes, but is not limited to: Rape, unwanted sexual advances, sexual harassment, sexual slavery, forced marriage marriage/ impregnation, etc.

Risk Factors for perpetration SV	Protective Factors Against perpetration of SV
 Low levels of education History of exposure to child maltreatment; Witnessing family violence; Antisocial personality disorder; Harmful use of alcohol; Having multiple partners or suspected by their partners of infidelity; Community norms that privilege or ascribe higher status to men Low levels of women's access to paid employment. 	 Intolerant attitude toward deviance Religious beliefs Positive social orientation Neighborhood collective efficacy (i.e., community cohesiveness) Legal programs; medical interventions; social services Training in violence prevention, assertiveness, and resistance; and skill enhancement and practice (WHO, 2013)

Immediate Impact of Sexual Violence on	Adverse, Long term Consequences of
Survivors:	Surviving Sexaul Violence:
- Reproductive health: for example unwanted	- Flashbacks and nightmares
pregnancy, transmission of STDs/STIs	- Panic attacks
- Physical health: for example injuries, body	- Dissociation
ache	- Loss of sense of self; loss of self worth
- Mental health: for example suicidality,	- Increased susceptibility to violence

 depression, anxiety, PTSD Behavioural health: for example sleep and appetite disturbances Social well being: for example feeling ashamed and stigmatized, social isolation or rejection 	 Loss of sense of safety, trust, and intimacy Negative beliefs about self, others, and the world
rejection	

Building a Survivor Centric Approach:

- Ensure the physical safety of the survivor(s)
- Ensure Confidentiality
- Respect the wishes, needs and capacities of the survivor
- Assure a supportive attitude
- Provide information and manage expectations the survivor about all of the available options for referral
- Treat every survivor in a dignified way, independent of her background, race, ethnicity or the circumstances of the incident.

Do's	Don'ts
 Let her tell her story at her own pace by using open-ended questions Tell her that it is not her fault and that she is not responsible for the violence Assess her current safety Offer information on the effects of violence on women's health Let her know what her rights are and what help is available Offer her a follow-up visit 	 Do not interrupt Do not force her to describe painful information Avoid questions that might suggest blame, such as "What were you doing there alone?" or "Why did you?"

Areas where women and girls may need support:

 HEALTH Emergency contraception Treatment of injuries Treatment of STIs Post-exposure Prophylaxis (PEP) 	 PSYCHO-SOCIAL Emotional support Income generation activities and Skills training Social reintegration, social support
 SECURITY Physical safety Safe house or temporary housing Police report and investigation 	 LEGAL JUSTICE (formal & traditional) Legal protection and assistance Prosecution, adjudication

	• Application of appropriate laws, hold perpetrators accountable (job of police, courts, prisons)
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Staying in the Present: Safety and Stability

- Remind clients that the abuse is over, & they are safe now
- Helping them to not think of the past, but to stay in the present and stay grounded
- Help clients develop a mindful state that encourages observation (somatic & emotional) and not reaction.

• Help women appreciate their body and brain for helping them survive in ways they knew how / Reframe traumatic reactions as survival adaptations / reduce shame

Immediate Responding

- Ensure privacy and confidentiality
- Politely ask the woman to briefly describe the events.
- Limit questions to what is required for medical care (if she wants, it is very important to listen empathetically)
- Explain that learning what happened will help you give her the best care
- · Reflect and allow silences.
- Ensure her safety and respond to her immediate needs

• help women acknowledge all parts of themselves (helpful & unhelpful). Challenge negative self beliefs & identify triggers to build a resilient response.

Self-care and Vicarious Trauma

Vicarious trauma is the emotional residue of exposure that community workers may have from working with people as they are hearing their trauma stories and become witnesses to the pain, fear, and terror that trauma survivors have endured. Self care, in this regard, can help ensure personal, relational and professional well-being. This will help build vicarious resilience which is the positive transformation and empowerment in those community workers through their empathic engagement with the stories of trauma and resilience of their clients.