

Piloting Integrated Model of Socio-economic Empowerment and SGBV Services to Reduce the Negative Consequences of SGBV in Pakistan

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Panel: Integration of VAW into Health Services

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Context

- ❑ This project is being implemented in 6 districts of Pakistan namely Faisalabad, Hassanabdal, Haripur, Nowshera, Muzaffarabad and Bagh.
- ❑ Pakistan is ranked 144 out of the 145 countries on the Gender Equality Index (HDCR 2015).
- ❑ The analysis of field survey indicated that
 - 69 % of the respondents had no or very limited knowledge of SGBV
 - 81 % of the community stakeholders identified the need of information on SGBV
 - Only 22% of the respondents were satisfied from the SGBV services available in their community.
 - 84 % of the service providers expressed the need of their capacity building on SGBV
 - 70% of the respondents suggested that SGBV can be prevented or reduced through the economic empowerment of the survivors

Objective:

Facilitate positive attitudinal and behavioural change regarding SGBV among the targeted communities, and increase availability and access of quality SGBV services for survivors.

Output 1: Targeted communities and SGBV survivors have improved knowledge and awareness on and exhibit reluctance towards SGBV.

Output 2: SGBV survivors and communities have improved access to comprehensive and quality services.

Methodology



Create conducive environment



Identification of SGBV survivor



Establish referral Mechanism



Provision of SGBV & SRHR Services



Economic Empowerment



Knowledge Sharing

Results

Output 1: Preventing SGBV

5,763 community stakeholders sensitized, 545 men and boys engaged through street theatres

- Resulted in improving their knowledge from 31% to 81%.
- Formation of 6 Community Support Groups

Trained 175 peer educators on SGBV and Life Skill Based Education (LSBE)

- They conduct sensitization sessions and theatres on SGBV
- Provide SGBV services to the peers

Results

Output 2: Provision of Quality Services

A referral network comprising of 42 partners has been Established

- 584 SGBV survivors were provided with socio-legal referral services.

Capacity Building of 92 service providers and referral partners
About 16,864 SGBV related services were provided.

- 1,478 survivors of SGBV have been identified and mobilized to access quality services

860 of the survivors imparted with skill trainings & 349 acquired micro credit

- 59% started small scale business which resulted in contributing their family income.

Lessons Learned :

Reaching out SGBV Survivors

- Success of an intervention targeting survivors of SGBV, attaining and maintaining their trust is paramount.

Engaging Men and Boys

- It works very effectively to enlarge & sustain the impact of project interventions to bring attitudinal change.

Economic Empowerment to reduce SGBV

- It serves as entry points & significantly contribute to increase access to services.

Survivor of Physical Abuse



Aroosa was married at the age of 16 and have two children. She was facing domestic violence since last two years and once threw out of her home at mid-night after physical torture.

She was referred to R-FPAP by her neighbor where she received counseling and was further referred for legal services.

Timely provision of information and continuous counseling by project staff built her confidence which encouraged her file case in court. She got her children back and as per court's order her husband arranged her a separate home.

Survivor of Psychological Torture



Razia is 20 years old orphan girl. She was forced to marry her illiterate cousin when she was in grade 11 and even her mother was almost agreed to the proposal due to financial burden and social pressure.

Razia was reached by a peer educator and referred her to SGBV project team. She shared that she did not want to marry and wanted to continue her studies.

After repeated counseling she was encouraged enough to speak for her rights and she herself denied to the proposal. Now she is doing graduation and also volunteering as peer educator.

Survivor of Sexual Harassment



Alina bibi was extremely poor lady with one daughter aged 13 years. She used to work as a maid and lived in her master's home. Her second husband wanted to seduce her young daughter. She sensed the threat and resisted but she was blackmailed by her husband who filed a family suit of restitution of conjugal rights against her wife in family court Haripur.

Alina bibi then was identified as SGBV survivors by trained referral partner of R-FPAP. She was helped to file defense in court and also solicited an application to provide them safety and shelter.

Furthermore she was provided with skill training and micro loan to start earning and live an independent life.

Beneficiaries Feedback



“My sister has passed away and my family was wondering to marry her two young girls, during this time I attended gender sensitization session by R_FPAP and I took step to stop child marriage and helped my nieces to carry on their studies. I am thankful and request R_FPAP to continue this work in our community”

Community stakeholder



There is a married girl in my neighborhood, who's husband used to abuse and physically tortured her daily and wanted to have second marriage. I counseled the couple many times and provided them information I got from R_FPAP which helped to resolve their conflicts and saved their marriage. It makes me feel a responsible citizen.

Peer Educator



I am running a training institute and have been giving trainings to SGBV survivors as referral partner of R-FPAP. It helps me to learn how can we serve to reduce social discrimination within our own capacity. This project interventions are so effective that we love to present our services for this noble cause.”

Referral Partner

Conclusion:

Implementation of the strategy suggests that the pilot model has been effective in identifying invisible cases of SGBV as well as enhanced self-confidence and status of the survivors which has improved their access to services. It also promises sustainability of its impact through sensitized community stakeholders and capacitated service providers who will continue their job for the good of their people and themselves.





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