



THE PROMISE FOUNDATION

For mental health, education and potential realisation

Survivor Referral Process

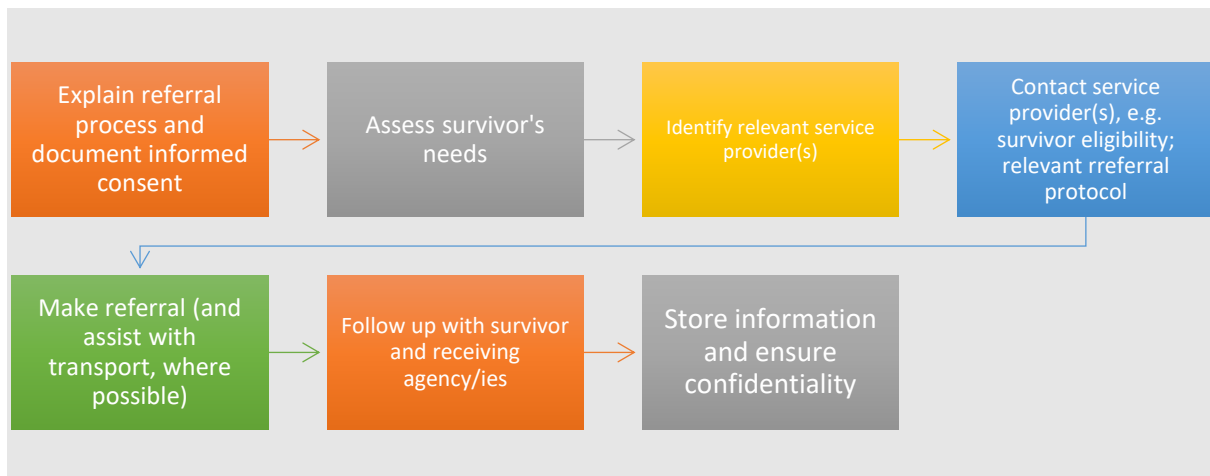
Background:

This document is to be used by the PoSH Committee and the Director in ensuring that survivors of abuse are offered the support services they need.

Types of services that may be needed for survivors of abuse:

Type of service	Description
Safety	<ul style="list-style-type: none">• Immediate safety or protection measures for survivors and witnesses to address the risk of retaliation or further violence, such as survivor safety planning, safe shelter (i.e. space that offers temporary safety to individuals fleeing harm), relocation support
Medical care	<ul style="list-style-type: none">• Medical care, including post-exposure prophylaxis (PEP) to prevent HIV ((within 72 hours of possible exposure); treatment for Sexually Transmitted Infections (STIs), pregnancy care, emergency contraception
Psychosocial support	<ul style="list-style-type: none">• Mental health care, emotional and practical support, either individually or community-based
Legal services	<ul style="list-style-type: none">• Legal assistance services, including free legal counselling, legal representation and other support (Note: If possible, such legal representation and support should be provided independently from the alleged perpetrator's employer.)
Basic material assistance	<ul style="list-style-type: none">• Provision of food, clothing, shelter, school re-integration and livelihood support to the survivor
Support for children born as a result of SEA	<ul style="list-style-type: none">• Medical and psychosocial care and pursuit of paternity and child support claims, in conjunction with relevant national governments

Steps to be followed by PoSH Committee Member when assessing survivor's needs



- **Always obtain informed and voluntary consent** before facilitating assistance, respecting the right of a person¹, including children (depending on their age and capacities), to freely choose which type of support services they want to access or to decline services entirely. To ensure informed consent, caseworkers must ensure that the adult or child survivor fully understands the services available and the referral process, potential risks and benefits of receiving services, and what information will be collected and how it will be used, including **confidentiality** and its limits. During this consultation, caseworkers should avoid raising unrealistic expectations among survivors particularly in locations where adequate services are limited.

When dealing with children, caseworkers should communicate the information in a child-friendly manner, adapting it to the child's age, maturity, language, gender and culture (i.e. simplifying content) and obtain informed consent from both the child (taking into account his/her evolving capacities) and one of the child's parents or guardians. At the same time, it is essential for organizations to ensure that the best interest of the child serve as the primary guide for making decisions regarding assistance and referrals (see point below on "[the best interests of the child](#)").

- In the case of children, **prioritize the best interests of the child**, choosing the course of action that is most effective in protecting the child's rights to safety and ongoing development. For example, in some cultures, the survivor's parents/caregivers may want (or force) the girl to get married to the alleged perpetrator to "protect family dignity" or for other reasons, which violates the girl's rights and exposes her to additional harm. In such instances, experienced caseworkers can help the girl and her parents/caregivers make informed decisions, applying the best interests of the child principle. Depending on their in-house expertise and the complexity of the case, organizations may also need to request technical support from UNICEF and/or other

¹ Persons with disabilities may need specific support to enable their ability to provide informed consent depending on the nature of their disability (e.g. physical, intellectual, mental).

GBV and CP partners.

- **Respect confidentiality**, protecting identifying information of all those involved in the alleged incident. Organizations should collect, share and store information on these cases safely and according to agreed-upon data protection policies (also see [“principles of effective reporting”](#)). In particular, organizations should share this information only with a limited number of individuals and on a “need-to-know” basis and ensure this happens with the survivor’s explicit permission.

In exceptional cases, organizations may need to refer cases – even without the survivor’s informed consent – when there are safety concerns for the survivor or others or when they are required by law to report crimes. Organizations should always explain to survivors (and/or their guardians where appropriate) these limitations of confidentiality (see [“informed consent”](#)).

- **Consider potential risks for survivors (and their families) and take safety precautions, as needed.** This means being careful to avoid causing any additional harm to survivors (and their families) as a result of how the case is being managed (e.g. possible revenge acts due to mishandling of case information). Organizations should also be careful to manage survivors’ expectations regarding the organization’s capacity to ensure the survivor’s safety.

Additional Resources

Assistance for all survivors

- UN Victim Assistance Protocol (forthcoming).
- [Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action Reducing risk, promoting resilience and aiding recovery](#), IASC, 2015.
- [SEA Victim Assistance Guide: Establishing Country-Based Mechanisms for Assisting Victims of Sexual Exploitation and Abuse by UN/NGO/IGO Staff and Related Personnel](#), ECHA/ECPS UN and NGO Task Force on Protection from Sexual Exploitation and Abuse, April 2009.
- [Minimum Standards for Prevention and Response to Gender-based Violence in Emergencies](#), UNFPA, 2015.
- [UN Victim Assistance Strategy](#)

Assistance for child survivors

- [Caring for Child Survivors of Sexual Abuse: Guidelines for health and psychosocial service providers in humanitarian settings](#), International Rescue Committee/UNICEF, 2012
- [Inter-agency Guidelines for Case Management and Child Protection. The Role of Case](#)

[Management in the Protection of Children: A Guide for Policy and Programme Managers and Caseworkers](#), The Child Protection Working Group, January 2014

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