



IOM International Organization for Migration
OIM Organisation Internationale pour les Migrations
OIM Organización Internacional para las Migraciones

Camp Management Camp Coordination Cluster

STANDARD OPERATING PROCEDURES for camp managers

Prevention and Response to GBV in IDP SITES

Updated:

Country: Haiti

City: Port-au-Prince

Camp/Community: []

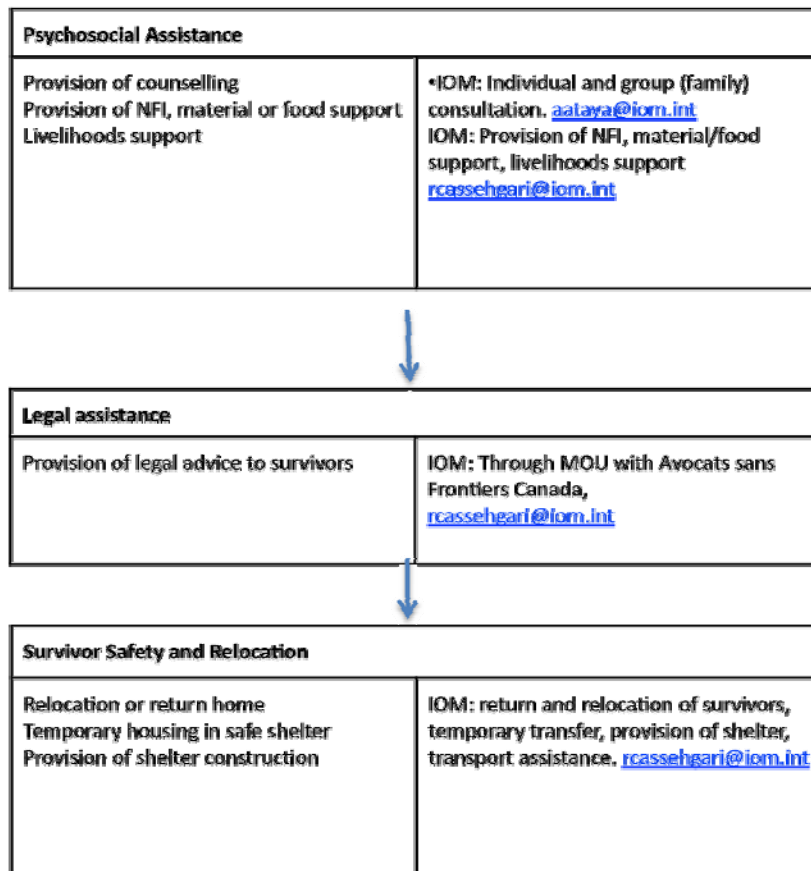
Sources: (RHRC Programming Guide, IOM CCCM Protection SOPs)



The Camp Management GBV SOPs are specific procedures and agreements among organisations that reflect the plan of action and individual organisations' roles and responsibilities working in a single camp or cluster of camps. They are not meant to replace country and system-wide GBV SOPs, but rather serve to coordinate and guide the actions of actors involved in GBV prevention and response within the limits of a camp management setting.

Camp managers should use this tool to coordinate GBV response action amongst partners working in their area of responsibility.

CAMP MANAGEMENT GBV REPORTING AND REFERRAL SYSTEM: [TABARRE COMMUNE]



Progress of case, follow-up, monitoring and evaluation – case management – undertaken by lead agency or focal point

CAMP MANAGEMENT RESPONSIBILITY

Camp managers have a responsibility to react and respond to cases of GBV in sites in a manner that is respectful, safe, efficient and effective. Although some camp management agencies may have in-house structures of protection and GBV monitoring and case management, all camp managers will need to coordinate actions with partners in a camp, or area of camps, and must agree to a standard set of SOPs to assist with case management and referral of survivors in a way that avoids duplication, ensures case is monitored and followed-up, and promotes rapid response to cases.

The above referral system needs to be agreed to by all partners in an IDP site or site area. Updated mapping of services and contacts is essential to ensure the effectiveness of the system.

BASIC PRINCIPLES

A. DEFINITION OF GENDER-BASED VIOLENCE* *rhr*c definitions

GBV is physical, mental, or social abuse (including sexual violence) that is attempted or threatened, with some type of force (such as violence, threats, coercion, manipulation, deception, cultural expectations, weapons, or economic circumstances) and is directed against a person because of his or her gender or gender roles and expectations in a society or culture. In circumstances of GBV, a person has no choice to refuse or pursue other options without severe social, physical, or psychological consequences. Forms of GBV include sexual violence, sexual abuse, sexual harassment, sexual exploitation, early or forced marriage, discrimination, denial (such as education, food, freedom), and female genital mutilation.

B. GUIDING PRINCIPLES

I. Confidentiality

At all times, the confidentiality of the survivor(s) and their families will be respected.

- I. Information will be shared only with others who need to know in order to provide assistance and intervention, as requested and agreed to by the survivor.
- II. All written information with identifying details will be maintained in secure, locked files.
- III. If any reports or statistics are to be made public, only one responsible officer in the organization will have the authority to release such information and any identifying biodata/location markers are removed.

II. Victim Interviewing Skills

The actions and responses of all actors will be guided by respect for the wishes, the rights, and the dignity of the survivor.

In a camp management setting, the initial report is rarely made immediately to a victim assistance expert. Even without technical expertise, all actors involved in the prise-en-charge should:

- I. Conduct interviews in private settings
- II. Conduct interviews and examinations by staff of the same sex as the survivor (e.g., woman survivor to woman interviewer) unless no other staff is available
- III. Be a good listener
- IV. Maintain a nonjudgmental manner concerning the survivor and her or his behavior
- V. Be patient; when possible; do not press for more information if the survivor is not ready to speak about the incident
- VI. Ask only relevant questions
- VII. Do not discuss the survivor's prior sexual history
- VIII. Avoid asking the survivor to repeat the story in multiple interviews.
- IX. Do not laugh or show any disrespect for the survivor and her or his culture, family, or situation.
- X. Ensure that you obtain consent to refer case further

III. Security and Safety

In a displacement setting ensuring the safety of survivors is challenging. Many do not have any alternative shelter solutions other than the one they are in. This problem is further complicated by the lack of safe shelter centres for survivors of GBV in Haiti. Finally, the continued risk of attack may be contributing to a reluctance to report the case to the police. However, within the possible, all actors should:

- I. Work towards ensuring that the survivor is not placed at risk of further harm by the assailant. This may mean temporarily relocating the survivor to another camp, another part of camp, or host family.
- II. If the survivor consents, consult with camp-based committees and women's groups to help with any protective mechanisms for survivor
- III. Contact the local police station or patrolling unit to make sure they are aware of the need for additional security in the area
- IV. If possible, disseminate the contacts of the local police station/patrolling unit to camp residents
- V. Remember the safety of others: maintain awareness of the safety and security of people who are helping the survivor, such as family, friends, community members.
- VI. For relocations of survivors, make sure that destination is kept confidential.

C. ROLES AND RESPONSIBILITIES

The following general descriptions are of roles and responsibilities in GBV prevention and response. Each organization should have detailed protocols, procedures, and policies that provide more specific guidance to staff and volunteers. All actors agree to abide by the guidelines and recommended standards for prevention and response to GBV.

Each organization or group is responsible for ensuring appropriate training for staff and volunteers so that they are able

to perform their roles and responsibilities properly.

I. Lead Organization [SPECIFY]

For Communal Interagency SOPS, one lead agency can be chosen either for the entire commune or only one camp, depending on capacity.

(Internally for IOM referrals this is taken on by IOM GBV. Corail camp is also under the overall GBV coordination of IOM.)

The Lead Agency supports the IDP community by leading the coordination of all GBV activities in each camp, specifically:

- I. Facilitates the establishment of safe and confidential space in women's centers for survivors of GBV to report and seek help;
- II. Takes lead as case manager of last resort;
- III. May provide counseling, assistance, and advocacy for survivors;
- IV. Facilitates community-based prevention activities, including awareness raising and the establishment of men's groups to prevent GBV;
- V. Acts as the clearinghouse for all multisectoral data concerning GBV cases;
- VI. Collects, compiles, and distributes reports of incident data, case outcomes, and anecdotal information about GBV occurring in the camps.

II. Health Post or Health Center

The health facility is responsible for:

- I. Medical examination and treatment
- II. Follow-up care
- III. Emotional support
- IV. Referrals
- V. Report to police in case of a minor
- VI. Medical documentation of injuries, (certificate) which is required for legal proceedings.

III. Psychosocial Programs

Psychosocial programs range from medically trained specialist intervention to social work and community rebuilding. Such programs may include:

- I. Direct psychological counseling services
- II. Community services
- III. Skills training and income-generation programs.
- IV. Family mediation and counseling

IV. Camp Manager

The camp management officer:

- I. Oversees coordination of all GBV activity related to security and protection in a single camp
- II. Coordinates inter and intra camp relocation
- III. Ensures the establishment of a monitoring and referral system for protection and GBV

V. Protection Officer/Legal assistance

- I. Protection officers can be part of a large camp management agency or will exist on site as stand-alone partners in service provision. Protection officers are charged with case management of survivors when necessary, and monitoring of referrals at the very least. Duties include:
 - II. Monitoring the progress of all legal cases in the police and court system
 - III. Provides support, advice, and assistance to survivors
 - IV. Provides training of IDP camp committees and groups to build their capacity to respond to GBV cases appropriately and in compliance with human rights standards

- V. Provides training and information for IDPs about relevant national and international laws.
- VI. Provides supportive reporting and escorting capacity when needed.

GLOSSARY

Perpetrator or assailant. The alleged attacker.
Survivor. The victim of the GBV incident or crime.
Incident. The GBV event.
Actor. A staff member of any organization or a community member involved in prevention of and response to GBV.
Minor or child. A person under age 18.

Categories of GBV

I. Sexual violence

- Harassment
- Rape
- Sodomy
- Attempted Rape
- Marital Rape
- Abuse/Exploitation
- Child Sexual Abuse/Incest
- Sexual Abuse (non-penetrating)
- Forced prostitution “willing” but involuntary, child prostitution, UAMs,
- Sexual Trafficking
- Harmful traditional practices

II. Physical

- Spouse beating/Domestic Violence
- Assault and other physical violence (gender-based)
- Harmful traditional practices

III. Emotional-mental-psychological—social

- Verbal, emotional abuse
- Humiliation
- Discrimination

- Denial of opportunities and/or services
- Spouse confinement (domestic violence)
- Harmful traditional practices

IV. Economic (Can be a component of any of the above)

V. Harmful Traditional Practices

These fit into each of the three main categories above. When talking about this topic there is a need for cultural understanding, sensitivity and awareness. The discussion should include the challenges of dealing with long standing

cultural practices such as:

- FGM/FGC
- Early/forced marriage
- Honor killings
- Dowry abuse
- Widow ceremonies
- Punishments directed at women for crimes against culture
- Denial of education, food for girls/women due to gender role expectations

AGREEMENT AND SIGNATURES

We, the undersigned, as representatives of our respective organizations, agree to abide by the procedures and guidelines contained in this document. We also agree that copies of this document will be provided to all incoming staff in our organizations who will have roles and responsibilities in GBV prevention and response in this setting. This will help ensure that the procedures will continue beyond the contract term of any individual staff member.

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[Organization Name] Date	Signature
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