

Standard Operating Procedure for the Social Sector: Protection and Support for Women and Girls Subject to Violence in Lao PDR



The Responsible Committee for Drafting the 'Standard Operating Procedure (SOP) for the Social Sector: Protection and Support for Women and Girls Subject to Violence in Lao PDR

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Lao Women's Union is a mass organization which represents development, protection of rights, and legitimate interests of Lao women and children of all ethnic groups and promotes gender equality.

United Nations Population Fund (UNFPA): is the UN's sexual and reproductive health agency, and works in over 150 countries including Lao PDR, to achieve zero maternal deaths, zero unmet need for family planning and zero gender-based.

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You can visit Lao Women's Union website www.laowomenunion.org.la, **UNFPA Lao PDR website:** <https://lao.unfpa.org/en> and **National Commission for the Advancement of Women, Mother and Children website** <https://ncawmc.gov.la>

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Foreword

H.E. Dr Inlavanh Keobounphanh,
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As President of the Lao Women's Union (LWU), Vice Standing Chairperson of the National Commission for the Advancement of Women, Mothers, and Children (NCAWMC) I am very proud to present the Standard Operating Procedure (SOP) for the Social Sector: Protection and Support for Women and Girls Subject to Violence in Lao PDR. Regarding the issue of violence against women and girls, the Government of Lao PDR has taken critical actions and prioritized combating violence against women and children by carrying out services to respond comprehensively, including policies and coordination, prevention, prosecution and law enforcement, protection and assistance to victims which align with the Law on the Development and Protection of Women, the Law on Combating and Preventing Violence against Women and Children, the National Women's Development Plan and the 2nd National Action Plan to Prevent and Combat Violence against Women and Children.

For that reason, to ensure the protection closely the rights and interests of Lao women and children of all ethnic groups, LWU has worked in partnership with UNFPA, and in close consultation with central ministries-organizations to create the Standard Operating Procedure (SOP) for the Social Sector: Protection and Support for Women and Girls Subject to Violence in Lao PDR, which is an extension of the Law on Combating and Preventing Violence against Women and Children and international treaties, especially the essential service packages for women and girls (Essential Service Packages). To ensure that women and girls who are victims of violence have access to social support services such as social assistance, counseling, safe shelter, child care, medical, legal, economic, educational, and vocational training, and support to return to family and society. Importantly, social services providers for women and girls who are victims of violence must take a survivor-centred approaches, based on agency, confidentiality, consent, and participation of victims/survivors.

This Standard Operating Procedure (SOP) has been created as a reference for individuals, legal entities, and organizations that perform protection, social support services, and referrals for victims of violence against women and girls in the Lao PDR in a more systematic way and to ensure that victims/survivors of violence against women and girls are supported in accordance with the legislations of the Lao PDR and and international standards and contribute to implementation of Human Rights commitment of the Lao PDR contribute to preventing and solving the scourge of discrimination in the society, by reducing gradually to protect the rights and the legitimate interests of the people in general, women and children in particular.

I sincerely hope that this Standard Operating Procedure will be useful for all organization concern involved in the work of protecting, assisting, and referring victims/survivors of violence against women and children in Lao PDR, aiming to create awareness and a unified understanding of the implementation of such work. We sincerely hope that all of you who have read and used this operating standard will give us constructive comments so that we can continue to improve in the future.

Once again, I would like to express my sincere thank UNFPA and KOICA for always supporting the organization of the Lao Women's Union at both the central and local levels regarding the protection and assistance of women and girls who are victims of violence in the Lao PDR.



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Foreword

Ms Mariam A. Khan

Representative, UNFPA Lao PDR



I am thrilled that the *Standard Operating Procedures for the Social Sector: Protection and Support for Women and Girls Subject to Violence in Lao PDR* (Social SOP) are ready for use. The SOP was developed and endorsed under the leadership of the Lao Women's Union (LWU) with contributions from relevant sectors. It draws from global guidance, especially the *Essential Services Package (ESP)* for Women and Girls Subject to Violence. It is one of the 3 SOPs, supported by UNFPA, related to the ESP being launched in Lao PDR in 2022.

Social services are a range of services critical to supporting the rights, safety, and wellbeing of women and girls experiencing violence. These include providing advice, counseling, hotlines, legal information, basic health care, safe accommodation, vocational training, and more. Research and practice suggest that the quality of services provided has a significant impact on their uptake and effectiveness.

The SOP is a milestone in the realisation of some of the Government of Laos' commitments to international instruments, such as the SDGs, CEDAW, Beijing Platform for Action, and ICPD 25. When rolled out it directly implements the Government *National Plan of Action on the Prevention and Elimination of Violence against Women and Violence against Children 2021–2025*.

I expect that with the rollout of this SOP, women and girls will receive quality care and response when they reach the trained social service providers. I thank LWU and KOICA for establishing a system-based response to violence against women and girls in Lao PDR and look forward to seeing the impact of this work on the lives of individuals.

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In order to ensure that the standardization of the Protection, Support and Essential Services for Victims/Survivors of Violence Against Women and Girls in Lao PDR are carried out properly, effectively and efficiently, the following recommendations are made:

PART 1

INTRODUCTION

1. Background on violence against women and children

Violence against women and children is a serious violation of the rights of women and girls. Violence against women and girls occurs in most societies, regardless of social class, race, religions, ethnicity, socio-economic status, or level of education. The impacts of violence against women and girls can be physical, emotional, economic or and have negative impacts to the individual, the family, the society, and the country. However, it is common that violence against women and girls is tolerated, seen as a private matter resulting in women not disclosing to others.

According to a 2013 global review by the World Health Organization 35% of women worldwide have experience physical and/or sexual violence by an intimate partner or non-partner sexual violence.¹ It is estimated that one in five girls have been abused in childhood with some countries estimates as high as one in three.²

In Lao PDR, violence against women and girls also still exists in society. The 2014 national prevalence study 'Women's Health and Life Experiences' found that in Lao PDR, 30.3% of women who had ever been in a relationship had experience physical, sexual and/or emotional violence (11.6% of women have been physically abused by their husbands or intimate partners, 26.2% have been emotionally abused and 7.2% have been sexually abused).³ The Lao Social Indicator Survey (LSIS) 2017 indicated that about 30% of women and 16% of men felt violence against women was justified in certain situations.

Violence in childhood is also a common reality in Lao PDR. The 2017 Lao Social Indicator Survey II (LSIS II) found that 69% of Lao children aged 1-14 are subject to at least one form of psychological aggression or physical punishment in the past one month. The Violence Against Children Survey in Lao PDR (2016) reveals that emotional violence is the most reported form of violence, followed by physical violence. 75% of girls and boys aged 13 to 17 who are sexually abused reported that their first incident happened when they were 13 years old or younger. Children also do not know where to seek help: only 5.2% of girls know where to get help if they are sexually abused, and no girls reported receiving help.⁴

To tackle this issue, the Government of Lao PDR prioritizes prevention of violence against women and children as an important issue; adopting and implementing policies, laws and regulations such as Law on the Development and Protection of Women 2004, Law on Resistance and Prevention of Violence against Women and Children 2014 (The Law), National Plan of Action on the Prevention and Elimination of Violence against Women and Violence against Children from 2014-2020 and 2021-2025. In addition, Lao PDR has become a signatory State to many international Conventions pertaining to the protection of the rights and interests of women and children, i.e. Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), Convention on the Rights of the Child (CRC), Beijing Platform and Action Plan, and the ASEAN Declaration on the Elimination of Violence Against Women and Elimination of Violence Against Children.

These Standard Operating Procedures (SOPS) recognize that violence against women and girls is an offense as stipulated in the laws of Lao PDR and this SOP provides guidance for implementation of the Constitution, laws and regulations of the State, especially the Law on Preventing and Combatting Violence against Women and Children, aiming at ensuring the uniform and effective implementation of the protection, support and referral of victims of violence.

¹ WHO, Global and Regional Estimates of Violence against Women, retrieved from http://apps.who.int/iris/bitstream/10665/85239/1/9789241564625_eng.pdf.

² http://www.who.int/violence_injury_prevention/violence/status_report/2014/en/

³ National Commission for the Advancement of Women (2015) Lao National Survey on Women's Life and Health Experiences 2014. Vientiane.

⁴ UNICEF Lao PDR Child Protection Compendium of Factsheets | UNICEF Lao People's Democratic Republic

2. Purpose and Scope of the Standard Operation Procedures

These Standard Operating Procedures (SOPS) serve as guidance for service delivery for individuals, legal entities and organizations who perform the duties of protection, support and referral of victims of violence against women and children in Lao PDR (frequently referred to as the 'Social Sector'). It's also important to mention this SOP should be read in conjunction with other SOPs, including the GBV Health Sector SOP and the GBV Coordination and Referral Pathway SOP.

PART 2

COMMON TERMS AND DEFINITIONS ON VIOLENCE AGAINST WOMEN AND CHILDREN

1. Fundamental knowledge on violence against women

1.1. Terminology

The terms used in this SOP have the following meanings:

Child: A child refers to any person below eighteen years of age.

Victim/survivor: A woman or child who is harmed physically, psychologically, sexually, property or economically from any act, negligence or neglect by the perpetrator of violence.

Perpetrator of violence: a person who commits an act, negligence, or neglect that results in physical, psychological, sexual or property damage to women and children. A perpetrator, neglecter or negligent person who causes physical, mental, sexual, property or economic harm to the women or children.

Family Member: Husbands, wives, fathers, mothers, children, brothers, sisters, and others who live with the census, including those who have been granted proper residence permits.

Protection: the use of methods, measures to stop, provide assistance and solve the problem based on the reality, law and regulations when there is violence against women and children.

Sexual Exploitation and Abuse (SEA) is a term used to describe inappropriate sexual conduct perpetrated by aid workers (such as the United Nations, humanitarian workers, INGO/CSOs), or the Implementing Partners of aid organisations, against recipients of assistance and other members of vulnerable communities. It is any actual or attempted abuse of a position of vulnerability, differential power, or trust, for sexual purposes, including, but not limited to, profiting monetarily, socially or politically from the sexual exploitation of another.

Social service workforce refers to a variety of professional and para-professional workers serving in the social system. Just as the medical profession consists of doctors, nurses, physical therapists and technicians, the social service workforce comprises many cadres of people with various titles, roles and functions, but they all share a common goal - to care, support, promote and empower vulnerable people. For the purposes of this SOP, social workers are often employees or officials of the Lao Women's Union and The Ministry of Labor and Social Welfare, however they may also work for other CSOs, INGOs and other departments or ministries.

Informed consent: The victim/survivor agrees to services on the basis of their having full information, including risks and benefits; them being competent to decide; and no coercion, threats or promises of benefits being used to secure that consent. If there is a requirement for mandatory reporting to the police or other authorities the adult survivor should be informed in this process. It is a voluntary decision of the victim to accept help or refuse.

1.2. Definitions of Violence against Women and Children

Content definitions are as follows:

1.) Definition of violence against women and children based on the law of Lao PDR

Violence against women and children is a behavior (action, neglect, neglect) that causes or will cause harm, harm to women and children physically, emotionally, sexually, property or economically.

2.) Definition of violence against women and children based on the international definitions

A. Violence against women and children: The UN definitions further expands this definition and states that violence against women as any act of Gender-Based violence that occurs in public or private life.⁵

B. Violence against Children: The UN Definition of violence against children includes all forms of physical or mental violence, injury and abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse of a child (male or female under age 18).⁶ It is important to distinguish between women and children as they have different decision-making capacity.

2. Forms of violence against women and children

There are two forms of violence against women and children under the law of Lao PDR:

- Violence by family members
- Violence by another person

2.1 Violence against women and children by family members

Violence against women and children by family members is the act, neglect or neglect of any member of the family (father, mother, brother, sister, aunt, uncle, aunt, grandmother, grandmother ...) that causes harm, harm to women and children in the family, whether physical, emotional, physical, economical or psychological abuse regardless of where the violence takes place.

2.2 Violence against women and children by another person

Violence against women and children by another person other than family members is the act, neglect or neglect of any person, other groups other than family members (relatives, friends, neighbors, colleagues ...) to women and children, including acts of officers, employees that cause harm, physical, emotional, sexual, property or economic harm to women and children at community, educational, daycare and other places.

3. Types of violence against women and children

Under the Lao Law on Preventing and Combating Violence Against Women and Children, there are four categories of violence against women and children as follows:⁷

- Physical violence
- Psychological violence
- Sexual violence
- Property or Economic violence

⁵ UN General Assembly Declaration on the Elimination of Violence Against Women, 20 December 1993

⁶ UN Convention on the Rights of the Child Article 19

⁷ As stipulated in Articles 12-16 of the Law on Preventing and Combatting Violence against Women and Children

3.1 Physical Violence/Abuse

Physical violence/abuse is an intentional act such as abuse, torture, hitting, kicking, pushing, throwing a child that cause injuries, bruises or no sign of the use of violence in some cases; mental health problems; disability or death.

3.2 Emotional Violence/Abuse

Emotional violence/abuse is an act, negligence or neglect that has an adverse effect on women and children such as polygamy, insults, gossip, defamation, humiliation, demeaning, adultery, neglect, bias, discrimination, separation from friends or family, disrespect, defamation, preventing someone from doing something, coercion or threats that harm [a person's] reputation, dignity, shame, lack of confidence, poor mental health, depression or suicide.

3.3 Sexual Violence/Abuse

Sexual violence is an act or attempt to act that results in harm to the sexual rights of women and children such as rape, forced sex, any act of obscenity, sexually indecent assault, unwanted sexual comments or sexual touching; or sending of women or children to another person for sexual purposes.

3.4 Property and Economic Violence

Property and economic violence is an act, negligence or neglect that results in damaging property of family, property that belongs to a co-owner, property of individual women and children, or results in damaging the opportunity to earn an income or other economic benefits such as destruct, burning, house and materials destroying, hiding; illegal possession, transfer, use and division ; paying low wages for labour or apply the policy unequally compared to men, preventing [women and children] from participation or operation in any work/activity even that women and children has capacity to do and are in a condition to be able to do.⁸

These types of violence identified as above can occur in various settings, including the home, the workplace, the community and on-line. Perpetrators can be family, members or others either known or unknown to the victim/survivor.⁹

Another emerging type of violence is technology-facilitated gender-based violence (TFGBV). Whilst there is no globally accepted definition of TFGBV, (also referred to as “online violence” or “digital violence”), it is generally understood to be violence perpetrated by one or more individuals that is committed, assisted, aggravated and amplified in part or fully by the use of information and communication technologies or digital media, against a person on the basis of their gender.¹⁰ It is not currently defined in Lao Law.

This broad definition of TFGBV includes: online harassment, “doxxing” (publishing someone’s private information), cyber stalking, limiting and controlling a woman’s use of technology in relationships, or the use of electronic monitoring and surveillance to facilitate violence.

Of particular concern is technology facilitated sexual abuse, including non-consensual sharing of intimate or explicit images, “deepfakes” (manipulation of imagery using machine learning/AI, usually for pornography), child pornography and “upskirting” (taking non-consensual images up a skirt/dress/sinh). Social media and online recruitment agencies may also be used to advertise positions that are sexually exploitative.

⁸ Law on Preventing and Combatting Violence against Women and Children;

⁹ See No Safe Haven: Male Violence Against Women at Home, at Work, and in the Community | Office of Justice Programs (ojp.gov)

¹⁰ UNFPA, “Making all spaces safe: Technology Facilitated Gender-Based Violence”, December 2021.

4. Rights of the Victim/Survivor

Victims of violence have the following rights¹¹:

- To request or receive assistance from family members, nearby persons, village authorities, the organization to which the victim or offender belongs, Lao Women's Union, Child Protection and Assistance Networks or Committee for Protection and Assistance of Children, police officers or other relevant competent authorities;
- To have his/her rights respected and to be treated in a caring and sensitive/friendly manner;
- To report the violence to the village authorities, the police, Women's Union, or Child Protection and Assistance Committee (CPAC) (central, provincial and district levels) or the Child Protection Network (CPN) (village level) to receive protection and assistance, or take judicial proceedings against the perpetrator.¹²

To choose the method to solve the issue of violence as stipulated in the law;

- To request and receive protection from coercion, threats or all forms of harm including [for] family members or accompanied children;
- To receive necessary assistance, such as counseling, safe temporally accommodation shelter, medical assistance, legal assistance, education, vocational training, and reintegration to family and society;
- To receive compensation for the harm and psychological recovery;
- To [have their information] be kept confidential;
- To receive protection and assistance from the State, National Front Construction, mass organizations and social organizations in according to the laws and regulations; and
- To have other rights as prescribed under the laws and regulations.

Defining the rights of victims above is to ensure that they are informed about the options and to be able to make their own decisions about access to assistance from individuals, legal entities, preventive organizations, social assistance services and referrals to ensure timely and secure assistance.

5. Accountability of perpetrators of violence

A perpetrator or abuser is a person whose action, ignorance or negligence affects women or children physically, mentally, sexually, economically or their asset. Based on the law perpetrators are to be held accountable for their actions through various measures including to be re-educated, disciplined, fined, and compensate the damages in accordance with civil law and/or be sentenced in accordance with Penal Code depending on the case. Violence abuser to women and children that cause damage to body, health, life or property shall be liable for all measures, including education, discipline, reprimand, compensation for civil damages incurred, such as medical bills, reparations and medical expenses, and shall be liable to a maximum sentence of five months and a maximum sentence of five years, a fine of 500,000 Kip and a maximum of 15,000,000 Kip, depending on the case, light or heavy as prescribed by law.

¹¹ Article 31 of the Law on Preventing and Combatting Violence against Women and Children defines the rights of the victim/survivor.

¹² NB: MOLSW is in the process of updating the CPAC Decree which will result in changing the name of the CPN to Village CPAC.

PART 3

PRINCIPLES AND COMMON CHARACTERISTICS OF PROTECTION, ASSISTANCE AND ESSENTIAL SERVICES FOR VICTIM/SURVIVORS INCLUDING FOR MARGINALISED AND AT-RISK GROUPS

1. Principles of Protection, Assistance and Essential Services of victim/survivor

Protection, assistance and referral of victims must follow the following principles:

- Humanitarian
- Equality
- Victim/Survivor-centered approach
- Confidentiality and Safety
- Advancing gender equality and victim/survivor's empowerment
- Perpetrator accountability
- Coordination of Services
- Best interests of the child (for children)

1.1 Humanitarian

Individuals, legal entities, organizations responsible for the protection, provision of essential assistance and referrals to victims of violence must be comprehensive, complete, objective- and timely, with victims / survivors at the center, and bring perpetrators / perpetrators to justice. For adults (over 18) their consent to services and interventions is required.¹³

1.2 Equality

All victims have equal rights to be protected by relevant actors based on national and international laws without discrimination based on their political and socio-economic status, nationality, race, religion, ethnicity, language, gender, age, etc.

1.3 Victim/survivor-centered approach

In protection, assistance and referral of victims of violence, the sectors involved must consider the rights, the needs and the best interest of the victim/survivor as the central focus of service delivery . This requires consideration of the multiple needs of victims and survivors, the various risks and vulnerabilities, the impact of decisions and actions taken and ensure the responses are talked to the unique requirements of each woman based on her wishes and in accordance with laws and regulations.

The best interests of the victim/survivor includes access to information and services including, social welfare assistance, counseling, shelter, childcare, legal aide, justice services, health services, education and vocational training, economic support and reintegration to the family and society.

1.4 Confidentiality and safety

To ensure safety of victim/survivors, officers and victim assistance sectors must maintain confidentiality of the information about victim/survivors. This includes on the case status, their address, health information, any relevant education settings, workplace, etc., including concealment of victim's personal information. The safety and security of the victim/survivor must be the priority to avoid causing her further harm.

¹³ Children do not have the legal authority to consent, however, age appropriate assent should be obtained from children.

1.5 Advancing gender equality and victim/survivor's empowerment

Services must ensure that violence against women will not be condoned, tolerated or perpetuated. Individuals, legal entities, organizations working on protection, assistance and referral of victims of violence must prioritize the emotional well-being, education, professional training and employment for victim/survivors of violence, so that they will have adequate education, proper professions and stable income, improved livelihoods and be able to normally reintegrate to their families and/or society, as well as to prevent them from being re-victimized.

1.6 Perpetrator accountability

Where appropriate hold perpetrators accountable. For those victims/survivors who wish to pursue justice in the court system, provide meaningful access, promote her capacity of acting or exerting her agency, while ensuring that the burden or onus of seeking justice is not placed on her but the state. Because not all victims wish to participate in the criminal justice system, other means of safety and accountability are also essential, including easy access to enforceable protection order mechanisms, and perpetrator programs aimed at changing belief systems that facilitate violence.

1.7 Coordination of Services

Individuals, legal entities, organizations that work on protection, assistance and referral of victims of violence against women and children must coordinate harmoniously, including interaction and cooperation with foreign countries based on the needs of the victim/survivors and the circumstances of the case.

1.8 Best Interests of the Child

In recognition of the Convention on the Rights of the Child (CRC) and standards related to child protection, the child protection system in Lao PDR will uphold the principle of the best interests of the child being a primary consideration in all decisions affecting a child. The application of this principle will also take into consideration the social-cultural context of Lao PDR.

2. Common Characteristics of Protection, Assistance and Essential Support to Victim/Survivors

In providing initial protection and assistance and essential support to the victims, concerned individuals, legal entities and organizations organization is based on the consent of the victim or refusal to accept assistance and including paying attention on the following common characteristics:

2.1 Availability of services

Social support services for the victims (providing information, counseling, hotlines, temporary safe shelter, economic support etc.), health and justice sectors must ensure quantity and quality without discrimination against the victim's social status, birth origin, social class, gender, ethnicity, age, religion, language, geographical setting, residence, etc.

2.2 Accessibility to services

Assistance services to the victim/survivors must ensure an easy access to social, health, justice services, including economic support and information, based on actual needs and agreement of the victim/survivors without discrimination. This includes but is not limited to physical accessibility and language accessibility.

2.3 Appropriateness and adaptability of the services

Providing of the services must be based on impact of violence on different groups, respond to the needs, ensuring humanitarian principles, confidentiality and the respects the dignity and

culture, age, gender or other characteristic of the victim/survivor.

2.4 Prioritization of the victim's safety (risk assessment and safeguard of the victims)

Providing security for victims who are currently facing violence and will continue to be at risk in the future requires assessments, case management, based on the severity of the violence, systematic identification of methods and continued coordination between the social, health and police and justice sectors

2.5 The consent and confidentiality of the victims

Victim/survivors should be provided with information about protection and assistance services (social, health, police and justice), as well as risk factors and benefits to be gained from such services, in order to determine whether or not they agree to receive assistance.

Adult and child victims have different needs and capacity for decision-making. Adult women have full authority to make decisions for themselves. This is called informed consent. For children, in particular, adolescent girls they should be provided information on the processes, but the final decisions about services, etc. must rest with an adult caregiver/guardian.

Assistance services provided to the victim/survivors must protect their privacy, ensure confidentiality, and prohibit the disclosure of personal information without consent of the victims. It is because the information about the violence encountered by the victim/survivors is the most sensitive issue, if it is disclosed in an inappropriate way, it can cause serious damage and threats to the victim/survivors as well as to those providing assistance to the victims.

2.6 Effective communication and involvement of relevant sectors in planning, implementation and assessment of victim support

All victims want to know if the issues of violence occurred would be listened to and understood, whether their needs are acknowledged and acted upon. Providing information and a good communication methods can empower victims, and such communication must honor and respect the victims. Information must be provided in the language of the victim/survivor and in a simple language that is easy to understand. For children the communication must be age appropriate.

2.7 Collecting, managing and storing information

Accurate and continuous data collection about the assistance services is an important factor in continuing to improve the assistance services. In the assistance process, information of the victim/survivor must be recorded in a case file and information must be recorded documenting the victim/survivor information, the perpetrator information, description of the incident, services provided and referred and regular updates. The documentation on the assistance services provided must be accurate, treated with confidentiality and safely stored.

2.8 Coordination with relevant sectors and referral

Relevant sectors working on protection, social needed assistance and referral of the victims of violence must coordinate timely; ensure the referral meets the set standards, various kinds of essential services are in place, and are easy accessed to. To ensure all these aspects, legislations on coordination must be in place to define clear responsibilities among different sectors - social, health and justice, involved in referral.

3. Protection, Assistance and Essential Support to marginalised and at-risk groups

There is increasing awareness that diverse groups of women and other individuals suffer from multiple and intersecting forms of discrimination and inequalities making them more at risk for violence. They include but are not limited to people with disabilities, LGBTIQ+ individuals, women living with or affected by HIV; older women; women migrant workers, garment factory workers, entertainment workers, indigenous women and women from religious or ethnic minorities. Social norms, stigma and discrimination increase their risk of violence or challenges in accessing protections and services.

Based on the principles that underlie all service delivery, it is the responsibility of service providers at the service delivery level and at the coordination level to strive to make services accessible and available to all women and children. Importantly, on-going analysis must be conducted to ensure women are able to access services. Barriers may include cost (transportation, service costs, etc.), language, distance, or other factors. Some strategies for removing barriers to access to services include:

- Tackle discriminatory social norms that result in stigma and discrimination for different groups in the community – through sensitizing the community, service providers in government and civil society, duty bearers and rights holders
- Identify groups through gender, disability and social inclusion analysis to understand the situation in different groups of women that are marginalised or at increased risk to identify and tackle their barriers to services
- Gather input from victim/survivors themselves on barriers for services and develop strategies to respond.
- Make services such as translation routine in areas where multiple languages are spoken or there are high numbers of migrant workers, or ethnic minorities
- Identify how to make services more accessible either socially or physically.
- Remove physical barriers such as steps at points of service such as hospitals, health centers, legal facilities, safe shelters etc.

PART 4

VICTIM PROTECTION AND SUPPORT FOR ESSENTIAL SOCIAL SERVICES

Essential protection and social assistance services for victims of violence are provided to individuals, legal entities and organizations that play a role in protecting, providing essential social assistance, and referring victims of violence with the consent of the victim or refusal to accept assistance.

The victim protection and support include:

- Initial victim protection and support;
- Essential victim protection and support.

1. Initial Victim Protection and Support

1.1 First contact reports

Initial or first contact reports of violence against women and children, the first informant or first contact, or from the report, may be the victim, person, entity or organization that witnessed the incident.

Initial protection and assistance to victims are as follows:

- Family members, individuals, legal entities or organizations that have witnessed violence against women and children must provide protection and assistance in the nature of violence and urgency in ways such as banning (or notifying the relevant authorities), cautiously restraining violence, educating co-workers (perpetrators) on their own, or asking other individuals or organizations for immediate assistance. In case of violence resulting in injury must transport the patient to the hospital.
- In cases of individuals, legal entities or organizations that have been aware of incidents of violence through reporting, telephone notifications also need to find ways to provide immediate protection and assistance.
- Any person, legal entity or organization that is requested to protect and assist the victim must provide protection and assistance on the basis of his / her ability in the manner described in paragraph 1 as above. The wholehearted protection and assistance of victims will be covered and protected in accordance with the laws and regulations.

In conclusion, access to the protection and assistance of victims / survivors must take into account the risk, the violence of each case and the safety of rescuers. In the event of a serious danger of violence, eyewitnesses must immediately notify the relevant authorities to assist the victims.

1.2 Eligible person to the notification

Eligible person to notify of violence against women and children are:

- Victims;
- Family members of the victim;
- Close relatives, neighbors, other people who saw the incident.

Notifications may be given orally, by telephone or in writing. The notifier will be treated and protected in accordance with the law.

1.3 Eligible persons to receive the notification

The following eligible persons to receive the notification on violence include:

- Village authorities
- Police officers
- Organization, place of incident (workplace, academy, etc.)
- The Lao Women's Union
- Committee for the Protection and Assistance for Children (CPAC)

In each notification and receipt of the notification, the notifier and the eligible person to receive the notification shall make a report of notification with the following main contents:

- Location, date, time, name and surname, job title of the recipient of notification
- Name and surname, age, occupation, location or workplace of the case partner and the informant
- Briefly summarize the events: When, where, and who was known. If there are witnesses, they can ask for more (A notification form is attached as an appendix to this SOP).

After notifying is complete, the recipient of the notification must read the contexts of the report to the notifier and the other participants (if any), then sign and fingerprint the report.

If the Lao Women's Union or the governing body is the recipient of the notification, the report must be sent to the police immediately to assist the victim and prosecute the accused in accordance with the law and regulations, (if consent is give to do so).

Any person, legal entity or organization that is requested to protect and assist the victim must provide protection and assistance on the basis of his / her ability in the manner described in paragraph 1 above, in accordance with laws and regulations.

For telephone notifications, the notifier must contact the recipient to provide information and sign off on his / her report (telephone numbers of each party can be found in the GBV Service Directory).

2. Essential Protection and Assistance to Victims

Essential protection of and assistance to victims of violence includes:

1. Social welfare
2. Counseling
3. Temporary safe shelter
4. Childcare
5. Medical care
6. Legal aid
7. Economic aspects
8. Education and vocational training
9. Reintegration to family and society

When notified of violence against women and children, the Lao Women's Union is at the center of coordination with all stakeholders, including government and civil society organizations, to protect and assist victims of violence against women and children.

Figure 1: Types of Services

2.1 Social Welfare

Social welfare assistance to victims of violence by social workers or social workers, such as identifying the cause of the incident, assessing the causes of the violence, identifying the victims' need for assistance, providing follow-up assistance to victims, engaging in follow-up interviews, giving advice; Coordinate the relevant parties to rehabilitate, assist and bring the victims back to their families and society.

Case management

Case management is the process of starting with involving victims / survivors (receiving reports), assessing their immediate needs based on the type of violence experienced and the situation of the victim survivor, responding to that urgent need, assessing the need for long-term support, and providing comprehensive planning support including support provided by providers and referrals as needed. Coordinating with the relevant authorities to rehabilitate, assist and repatriate victims is a priority.

Social welfare officials or social workers have the duty to support the victims based on the following case management procedures:

Engage with the victim/survivor: Using supportive communication approaches (welcoming the survivor, active listening, non-blaming language, privacy, etc.) interview the victim/survivor to collect basic information such as their name, sex, age, address, (birth or original address, current residence), types of violence, places of violence, effects of violence, alleged perpetrator information (name, sex, age), description of the incident. For children, in addition to the basic information, provide information of parents, guardians, guardians or family members, etc.

Assess victim's immediate safety/condition/needs is assessing safety and health assistance through consultation with victims / survivors;

Respond to immediate needs is the provision of timely assistance to victims based on the results of needs assessment, such as health care, legal aid or security planning must be based on the consent of the victim / survivor, including the provision of assistance to the victim.

Coordinate with concerned sectors to provide immediate protection and assistance, especially arrangements of temporary safe shelter for the victims as necessary;

Assess, develop and implement a case plan for longer-term needs of the woman and her family is to further provide protection and assistance through **service provision and referrals (with consent)**, monitor the process, and update the case plan based on the woman's needs;

Provide support to her during any service provision or legal process such as interviews, testimony of the victims, follow-up with the civil mediation and court proceedings of the abusers.

Follow-up and assist the victim to reassess needs is a review of the victim assistance process and the improvement of the case management plan with the aim of making the victims' lives non-violent.

Provide reporting on cases to relevant authorities providing the privacy and confidentiality of victim/survivors (do not share identifying information without permission).

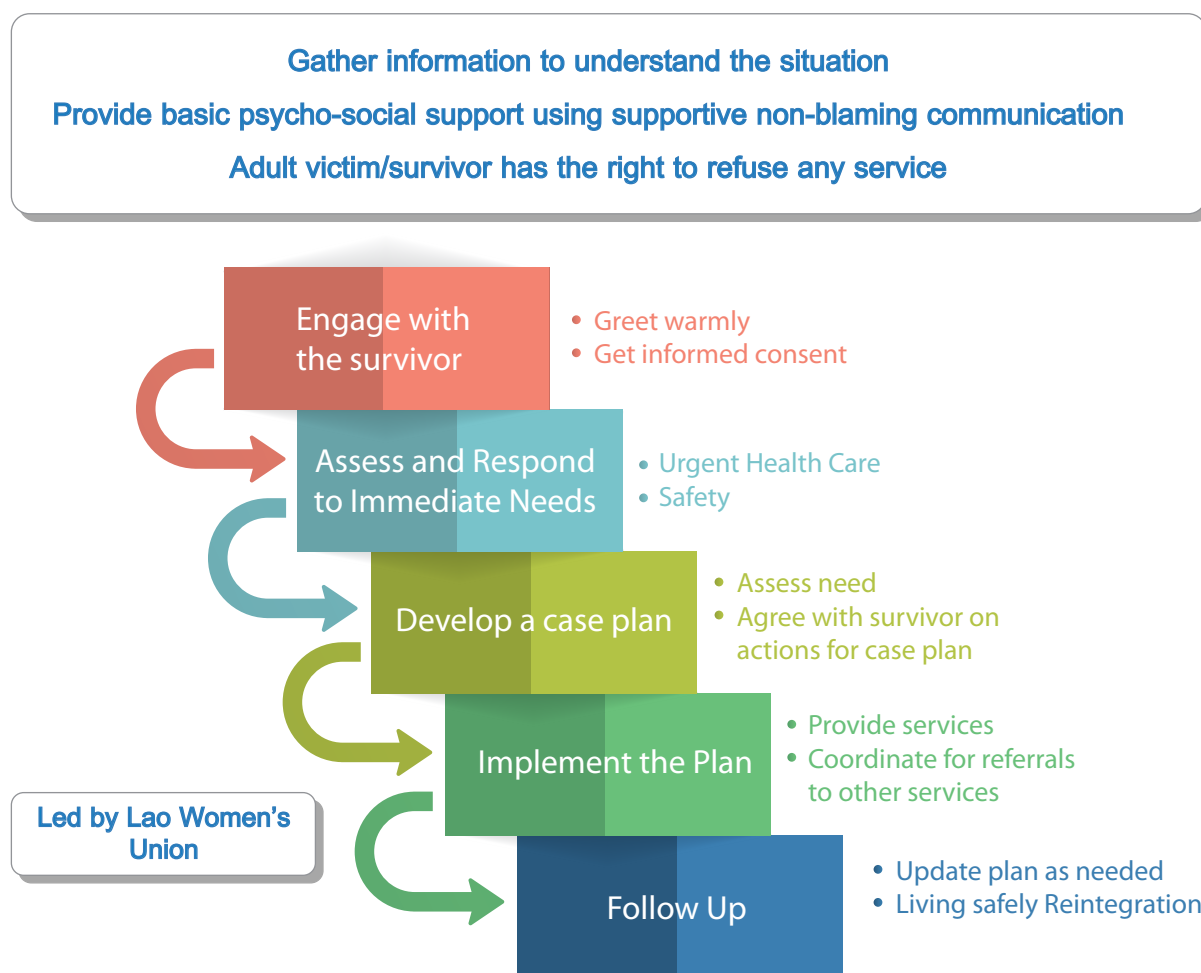
Social Services Case Management Process requires access to a variety of services because the situation of each victim is different, some want, some do not need help services, if they need a service, a service provider needs to provide them. Referral cases must be based on the consent of the victim / survivor. (See Consent Form in Appendix).

All case management plans are based on the consent or consent of the victim / survivor and the adult victim has the right to refuse access to assistance.

Informed Consent/Assent for Women and Children: The foundation of a survivor centered approach to case management is that the victim/survivor is provided information about options, their risks and benefits, and can make their own decision about services they choose to accept.

Adult and child victims have different needs and capacity for decision-making. Adult women have full authority to make decisions for themselves. This is called informed consent. For children, in particular adolescent girls, should be provided information on the processes, but the final decisions about services, etc. must rest with an adult caregiver/guardian(non-offending).

All case plans will be made with the informed consent/assent of the victim/survivor. For adults they have the right to refuse services.

Figure 2: Social Services Case Management Process

Lao Women's Union will provide the services using a Social Services Case Management Process (See Figure 1). The steps in the case management process are shown in the diagram and described in the Social Welfare section. Key actions are engaging with the survivor, assess and respond to immediate needs for urgent health care and safety, develop a case plan assessing need and with the agreement of the victim survivor, providing services based on your organizations work and referring to other services based on the victim/survivor's agreement, following up, updating the case plan, and when the woman is living safe or chooses to terminate services closing the case.

2.2 Counseling

Victim/survivors of gender based violence will receive counseling and information on any relevant issues such as legal options, health, mental health, women's and children's rights, including victims' rights. Counseling can take place at a safe place to stay and in the community.

Counseling service can be carried out in two forms:

Face-to-face counselling is a process of providing psycho-social support to victims of violence in person by providing information on violence, options and their risks and benefits. Communication will be provided in a way that is empowering to the victim/survivor using active listening and non-blaming communication skills and messages. The support will encourage victim/survivors to confront the problems, to build their

capacity and supports and to overcome the crisis

It is a process of helping victim/survivors of violence by normalising difficult emotions, helping them to navigate their thoughts and feelings, and assisting them to find a solution so that they can adapt and overcome the crises.

Counseling service by phone (hotline #1362) is available to help victims of violence through calling in hotline. The support is provided to them to provide information, encourage victim/survivors to confront the problems, help them to find solutions and to build their capacity and supports and to overcome the crisis.

2.3 Temporary safe shelter

Many women and girls need to leave their existing living arrangement urgently to be safe from violence. Temporary safe accommodation meets this need. It can be provided by family, friends, neighbors. When these options are not available and safe victims of violence are provided temporary safe shelter.

The provision of temporary safe shelters is under the responsibility of the Lao Women's Union, Labor and Social Welfare Sector and other concerned sectors. Temporary safe shelters include Center for Counseling and Protection of Women and Children (Central Lao Women's Union), victim support centers under Provincial Lao Women's Union, local authorities, family, relatives of the victims and other relevant organizations.

Victims of violence that are provided with a temporary safe shelter, also have food, clothing, medicine, and necessary consumables for their life. They are also provided case management services toward the goal of leaving the safe shelter and living a life free of violence.

In cases where it is deemed necessary to accommodate a victim in a secure temporary shelter, the following steps shall be followed:

a.) Pre-Assessment prior to residing in temporary safe shelter

Prior to their admission to the safe shelter an intake process will be conducted with an initial assessment by the social worker or other shelter official. The assessment will include: gathering basic information such as age, sex, nationality, language, movement, residence and the violence, description of incident, and place of incident and physical evidence, including the victim's (home) residence, family members, and environment, to be recorded as information in the victim's assistance planning and safety assessment. The information will inform the assessment of victims' safety. A basic needs assessment will be conducted to identify urgent needs. If the information is already available from the initial contact with authorities, with the victim's permission it will be shared so she does not have to repeat all information in the initial assessment.

For children, additional information about their family members and their situation will be documented.

b.) Orientation to the Safe Shelter

Victims of some cases of violence have to leave their current homes immediately for safety. Access to safe shelter In some cases, victims may need medium to long-term assistance. In order to prepare the victims, the relevant staff at the shelter will provide

an orientation to the shelter residence including applicable rules and regulations, and livelihood in the shelter, so that victims understand the conditions and can consent to live in the safe shelter.

c.) **Case Management**

Residents residing in the safe shelter through being accommodated or referral will be provided case management services (see Social Welfare above) with an individual plan based on an assessment of their own needs. (See Social Welfare Assistance in Part 4(2.1) of this SOP). Each victim will have a case management plan based on an assessment of their needs to ensure that they are strong, able to return to society, live a normal life and be free from violence.

2.4 Child Care

Child care (child victims or children accompanying a victim) is the responsibility of the legal entity or organization providing safe shelter aiming to ensure that children either accompanied their parents or unaccompanied are properly cared for in a safe place to stay, have a warm living environment, have a good life to grow, have support for their development, knowledge and skills and have the protection of their rights and interests and can participate in social activities effectively.

Children who are victims of violence (under the age of 18) will be assisted with a safe shelter to stay, regardless of whether or not their parents are staying in a safe shelter.

Children accompanying their parent will be under the supervision of their parents and will be expected to follow the shelter rules and regulations the same as their parent.

An individual case plan will be developed to respond to the child's needs with a goal of a family-based placement based on the safety of the child, their individual needs and best interest. This includes a plan to return to birth family, kinship care or other family-based placement that protects the safety and rights of the child.

The child victim and the child attached to the victim mother will be provided with a warm environment for the child's growth and development and their rights and interests, such as education, play, protection and participation in social activities, will be guaranteed.

2.5 Health Care

Victims of violence receive medical assistance from referrals or in person or by other persons. The provision of health care for victim/survivors is guided by the SOPs in the Health Sector, however there are some health services available through social services sector. The details are as follows:

Health care in Safe Shelter: The Safe Shelter is responsible for providing psychological counseling, first aid, and coordination with the health sector to prepare teams, facilities, and medical equipment for the examination, diagnosis, treatment, and reassurance of the victim/survivors including free mental health counseling, psychotherapy (free of charge).

Mandatory Reporting and Referral: If a doctor identifies a victim/survivor and brings him / her to check his / her health, after being examined, treated and certified, the doctor must immediately notify the police officer or the person in charge of assisting the victim, and then send him / her to the Lao Women's Union for assistance.

Counseling and first aid that is provided at the shelter is free, but if victim/survivors are referred to the hospital then this may cost, depending on the treatment and hospital.

For further information on Screening, treatment, and hospitalization, see the Standard Operating Procedure for Health Facility Response to Violence Against Women.

Other Health Care: In the case of victims of physical, mental, sexual, violence, disabilities, insanity, mental illness, Sexually Transmitted Infections, HIV / AIDs, drug addiction, the health sector is responsible for screening, diagnosing, treating, and certifying health. After receiving medical treatment, the health sector will coordinate with the assisting agencies to assess their readiness, then return them to their families and/ or public and private social organizations to continue to provide assistance.

NB: For cases of sexual violence, the collection of forensic evidence does not require any high-tech infrastructure at the hospital or health centre - any facility that carries out deliveries/childbirth can carry out a medico-legal examination of rape/sexual violence. See the SOP for Health Facility Response to VAW for more information.

Confidentiality: The medical examination and other information of the victim must be kept confidential and must be provided to the prosecution agency and a copy to the government agency responsible for assisting the victim.

Victims of violence will receive urgent or long-term medical assistance as recommended in the health SOP.

2.6 Legal aid

Victims of violence can receive legal aid through counseling, legal advice (in writing or verbally), and legal representation. Some of the services might include support for drafting and submission of documents, request for compensation of damages in accordance with the Civil Code, lawyers or other guardians (husband, wife, father, mother, guardians, relatives, and organizations) to represent in case proceeding for protection of their rights and interests.

In case that the victim does not know Lao language, the person can receive assistance of a translators at the time of request, including translation of necessary legal documents.

The LWU Protection Centre must also provide relevant documents and information to the parties responsible for litigation, as well as monitor, assist and participate in the proceedings, either as a defender or a representative of the victim/survivor, as stipulated in the law.

The details on legal aid are the responsibilities of the justice sector and Lao Women's Union which are contained in separated documents (SOPs).

2.7 Economic Support

Victims of violence receive economic support based on their actual conditions and circumstances. This will be provided based on the availability of resources from individuals, legal entities, organizations, both public and private sectors, civil society organizations, international organizations, NGOs with the financial assistance, access to financial resources or any profession so that the person can be economically self-reliant.

2.8 Education and vocational training in safe shelter

a.) Education:

Child and female victims of violence, or children accompanying their mothers residing in the safe shelter, who are still studying shall receive the following educational assistance in the safe shelter or at other locations, as provided in Section 3 of Part III of this SOP:

- o Children will be able to continue their education in the school and in academy where they are studying if it is safe for them.
- o If not, they will be permitted to study at other schools or other academies that are safe and available.
- o Education and sports sector and other relevant organizations must facilitate and provide assistance in accordance with the actual conditions including safety and practical considerations such a availability.

If the survivor or their accompanying child wants to study fulltime or part time, there is informal education as well that can be linked to professional training and development (coordinate with MoLSW, LYU and/or LFTU).

b.) Vocational Training:

Victims (women and children) who are not eligible for further education are also eligible to vocational training, finding employment, generating income and improving their living conditions. Vocational training is under the responsibility of the Labor and Social Welfare sector coordinating with related agencies.

Victims will have access to resources on vocational training based on victim/survivor-centered approaches, their interests, their decisions, and the readiness to provide services.

2.9 Reintegration to family and society

Victims of violence are supported to reintegrate to their family and society as follows:

- Assessment prior to reintegration to family and society;
- Follow-up support after reintegration to family and society.

a.) Assessment prior to reintegration to family and society

Social workers, social welfare officials or other organizations providing support for temporary safe shelter must assess the following issues:

- The readiness and needs of the victims, especially their mental and physical condition, occupation, income, lifestyle or other needs including their family, environment in which the victims reside to define the appropriate supportive plan, and safety before reintegrating the victim/survivor to their communities. If the assessment results show that the victim is safe and ready/wants to reintegrate to their family and society, then the victim must be sent back to family, guardians or relatives, and village authority as defined in the plan. The reintegration of the victim to the family and society must be coordinated and the notification to the relevant authorities, family, guardian (if child), relatives informed of the plan to transport the victim (date, month, year, place of transfer, handover documents, transportation, budget and participation).
- In the case the victims is unable/unsafe or unwilling to reintegrate to their family of origin, for any reasons, the organizations that can provide assistance to them must be the center to coordinate with the relevant parties to continue to provide assistance such as vocational training, referrals to study, finding a replacement family (new family) and employment for them.

For adult women, they will make their own decisions about their reintegration plan. For children, the plan must be approved by the relevant social worker or social welfare organization.

b.) Follow-up support after reintegration to family and society

Follow-up support after reintegration to the family and society is important to monitor the adjustment status, safety, and favorable and challenging living conditions, the working condition of the victims/survivors.

In addition, it is also the responsibility of the referral authority as a coordinator with relevant organizations, including public and private sectors and civil society organizations to continue follow-up action and providing support on a case-by-case basis.

After reintegration to family and society, the duration of follow-up support to and assessment of the victims is 2 years or to be determined on a case-by-case basis. For children, the case follow-up will be conducted until the case is stable and assessed to be closed. For women it is based on need and agreement of the victim/survivor. To follow up the progress of the case proceedings, it may take more than 02 years.

In the event that the adult victim refuses the follow up after returning to the family and society, assistance shall be deemed to have terminated from the time of the return of the victim to the family and society onwards.

PART 5 REFERRALS FOR VICTIM/SURVIVORS

1. Coordination before referring

Social service providers that have protected and assisted victims/survivors of violence must coordinate with police, local authorities, the Lao Women's Union, Health, Labor and Social Welfare and other organisations (civil society, international organisations) on the basis of the victim/survivors' consent. The parties responsible for protecting and assisting the victims/survivors must consult with each other and report to their superiors on a case-by-case basis and inform the victims/survivors of the options available to them.

1.1 In the case that victims/survivors needs medical examination or treatment

If a social service provider receives a request for medical assistance or an incident of violence is reported to them (eg by telephone, other notification or formal report) where the victim/survivor needs medical assistance, the referral to the victim shall be as follows:

1. An initial assessment and preparedness is conducted for assessing the needs of the victim/survivor (see annexure 2 - Intake and Assessment Form)
2. Explain to the victim/survivor about the process of going to the hospital and what is expected of them (eg. provide documents such as ID card or family registration, social security card, etc.)
3. Prepare the necessary documents such as a copy of the family register, ID card, preliminary interview minutes of the relevant parties, the consent of the victim/survivor (or caregiver if under 18) (see Annexure 6 - Consent for Release of Information)

4. Coordinate closely with the relevant hospital department to facilitate medical examination and treatment
5. Advise the person, family, guardian or relative, and relevant organisation/s to accompany her.
6. If necessary, coordinate with the ambulance or emergency rescue service to transfer to the hospital.

1.2 In the case that victim/survivor needs safe shelter or accommodation

Social service providers receives a request for assistance for safe shelter or accommodation (temporary or long stay), the referral for the victim/survivor shall be as follows:

1. An initial assessment is conducted to understand what assistance, support, supplies and services the victim/survivor needs (see Annexure 2 - Intake and Assessment Form)
2. Coordinate with the families, guardians, relatives, close persons of the victims/survivors or related parties to provide safe temporary accommodation
3. In case it is necessary to refer the victim/survivor to a safe shelter or temporary accommodation, the social service provider should prepare the necessary documents such as a copy of the family register, ID card, preliminary interview minutes of the relevant parties, the consent of the victim/survivor (or caregiver if under 18) (see Annexure 6 - Consent for Release of Information)
4. Safely transport the victim/survivor to a temporary shelter
5. Create a handover memorandum between the social service provider and the provider receiving the victim/survivor.

1.3 In the case that victim/survivor needs police/legal/justice assistance

If social service providers receive a request for police/legal/ justice assistance, the referral of the victim/survivor shall be done as follows:

1. An initial assessment and preparedness is conducted for assessing the victims/survivor before entering the police/justice system (see Annexure 2 - Intake and Assessment Form)
2. In the case the incident has not been reported, explain the process of reporting to the police to the victim/survivor (or parent/guardian/caregiver), or accompany the victim/survivor to report to the police.
3. Check and prepare relevant documents, information, and evidence related to the victim/survivor, as well as obtaining the consent of the victim/survivor (or caregiver if under 18) (see Annexure 6 - Consent for Release of Information)
4. Assess and prepare the victim before entering the judicial process, such as the prosecution process, co-operation in interviews/testimony, compilation of evidence related to incidents of violence, and legal advice.
5. Coordinate with the parties in charge of litigation to discuss the interview, the testimony, the provision of evidence and the method of legal assistance.
6. Draft relevant documents and forms such as Letter to Request, Incident Reporting, Changes to Report, Letter to Request for Justice, Request for Compensation etc.
7. Providing relevant documents and information to the parties responsible for litigation
8. Monitor, assist and participate in the proceedings, either as a defender or a representative of the victim/survivor, as stipulated in the law.

1.4 In the case that the victim/survivor wants to study, undertake vocational training, employment etc

If social service providers receive a request for assistance in education, vocational training, employment, etc., referral for the victim/survivor shall be as follows:

1. In case the victim is severely affected physically and mentally and their capacity to learn is impacted, the victim/victim should be offered to receive medical treatment first, as well as notifying the original school where the victim/survivor was educated and facilitate the resumption of education after receiving treatment. In case the victim is unable to attend their previous school, coordinate with the family, parents, relatives and relevant organizations to find a place to study to ensure that the child and the victim continue their education until graduation.
2. In case the child or the victim is able to continue his / her education at the original place of study, it is necessary to coordinate with the school to have a policy, facilitate the victim/survivor's return to their previous school, including counseling, confidentiality, non-discrimination and non-discrimination; At the same time, attention should be paid to monitoring the mental and behavioral condition of the victim/survivor. If any changes are noticed in their behaviour or demeanour, the victim/survivor must be provided with urgent assistance in coordination with the parents, families, guardians, relatives of the victims and relevant organizations to discuss how to rehabilitate them.
3. In the case of children or victim/survivor's who are not able to study according to the existing school system, it should be coordinated and referred to the relevant parties, such as education and sports, labor and social welfare, the Lao Women's Union, the Lao People's Revolutionary Youth Center, and the Lao People's Revolutionary Party, as well as any other relevant civil society organisations or INGOs.
4. If there is a need for vocational training or employment, coordinate with the labor and social welfare sector and other social organizations to provide assistance to the victim/survivor.

Please see the Standard Operating Procedure for GBV Coordination and Referral Pathway. For the contact details of each service provider and to make the referral, please consult the GBV Service Directory.

PART 6 CASE FILES

Case Forms: Each survivor receiving services should have a case file with completed Intake and Needs Assessment Form. For children additional information may be collected on the Victim Profile (child) and Victim Family Assessment Child. Any referrals or release of Information must use a Consent Form.

Data Storage

Case data that includes identifying information must be stored securely. If the data/case files are paper, they must be stored in a locked file cabinet with access only by authorized staff. If the data/cases files are stored electronically, data protection systems must be implemented that prevent access to data – especially identifying information.

Data Sharing

As noted above data can only be shared with identifying information with the victim/survivor's permission. For reporting on the basic information in the minimum data set, aggregate data can only be shared without identifying information. For example, on the number and types of cases, but without names or addresses.

Reporting and Data Analysis: A system must be developed for each organization to report non-identifying data based on the minimum data set. Each participating organization must report annually to the coordination mechanism on summary of the minimum data set for analysis.

Periodically understanding the data collected can help to identify trends in types of VAWC survivors seeking help, frequency, and severity of the types of violence experienced, patterns in access to services to guide further service system improvements.

Analysis of this summary data collected from each sector will guide the continuous development of prevention and response actions.

ANNEXES

In order to facilitate the protection, assistance and referral of victims of violence against women and children, the following templates can be used as appropriate.

1. Notification Record Form
2. Intake and Assessment Form
3. Victim's Profile Form (Child under 18)
4. Victim's Family Assessment Form (Child's Family)
5. Victim Support Report Form
6. Consent for Release of Information
7. Types of Gender Based Violence (New Cases)
8. Types of Gender Based Violence (On-going Cases)
9. Types of Gender Based Violence (services provided)
10. Case studies of Protection, Assistance and Referral of the victims of violence against women and children



LAO PEOPLE'S DEMOCRATIC REPUBLIC
PEACE INDEPENDENCE DEMOCRACY UNITY PROSPERITY

Template
Notification Record Form

Location of notification....., Time, Date,
 Name and Last name of the notification recipient,
 Responsibility, Place of work.

Initial Data Collection

- ❖ Name and last name (informant), Age.....,
 Occupation.....Place of work.....Nationality.....
 Ethnicity..... Religion,
 Present address: Village..... Unit.....House No.....
 District.....Province/Vientiane Capital.....
 Phone number.....
 Marital Status of the Victim ☐ Single, ☐ Married, ☐ Divorced, ☐ Widowed
 Does the victim have a disability? ☐ Yes ☐ No ☐ Don't know

- ❖ Name and last name (victim) Age,
 Date of birth dd/mm/yy.....Birthplace: Village.....unit.....
 House No District..... Province/Vientiane Capital.....
 Occupation..... Nationality
 Ethnicity..... Religion.Educational Level
 Present address: Village..... Unit.....House No.
 District.....Province/Vientiane Capital.....

- ❖ Name and last name of father (if victim is a child). Age....., Date of
 birth dd/mm/yy..... Birthplace: Village..... unit.....House No.
 District. Province/Vientiane Capital.....
 Occupation.....
 Nationality.....Ethnicity.....Religion.....
 Educational Level
 Present address: Village..... Unit..... House No. District.
Province/Vientiane Capital.....
 Phone number.....

- ❖ Name and last name of mother (if victim is a child). Age, Date of
 birth dd/mm/yy..... Birthplace: Village..... unit..... House
 No..... District..... Province/Vientiane Capital.....
 Occupation.....
 Nationality Ethnicity..... Religion Educational Level
 Present address: Village..... Unit.....House
 No..... District..... Province/Vientiane Capital..... Phone
 number.....

- ❖ Name and last name (suspected perpetrator) Age,
 Date of birth dd/mm/yy.....Birthplace: Village unit.....House
 No. District.

Province/Vientiane Capital..... Occupation.....
 Nationality Ethnicity..... Religion.
 Educational Level Present address: Village.
 Unit..... House No..... District.....
 Province/Vientiane Capital..... Phone number.....
 Description of the Incidence
 Source of information

☐ Notification in person ☐ Notification by phone

I, hereby, report on what I have seen, heard or known about the actual incidence happened to the victim as following:

.....

**Notification Recipient
(signature)**

**Participant/Guardian
(signature)**

**Informant/Victim
(signature and finger print)**

Other documents, if any:

1.
2.



LAO PEOPLE'S DEMOCRATIC REPUBLIC
PEACE INDEPENDENCE DEMOCRACY UNITY PROSPERITY
Intake and Assessment Form

Part I – Initial Information			
Victim/Survivor information			
Name of the survivor:		Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>	
Date of Birth:		Civil Status:	
Age:		Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widow <input type="checkbox"/> Other (specify):	
Place of Birth:			
Ethnic Background:	Nationality:		
Education attained:	Occupation:	Reported by Survivor? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Total number of children:			
Specific Needs/Vulnerability: <input type="checkbox"/> No <input type="checkbox"/> Physical Disability <input type="checkbox"/> Mental Disability		<input type="checkbox"/> Unaccompanied Minor <input type="checkbox"/> Separated Child <input type="checkbox"/> Other Vulnerable Child	
Address of survivor:			Survivor contact N°:
(If survivor is a child) Name of the father <input type="checkbox"/> mother <input type="checkbox"/> or caregiver <input type="checkbox"/> :			
Address:		Contact number:	
Details of the incident			
Type of incident to VAWC – Please check only 1 <u>Sexual violence</u> <input type="checkbox"/> Rape (includes gang rape, marital rape) <input type="checkbox"/> Sexual assault (includes attempted rape, and all sexual violence without penetration) <input type="checkbox"/> Sexual harassment (includes harassment intimidation, gestures or written words of a sexual menacing nature) <input type="checkbox"/> Forced marriage		<u>Physical violence</u> <input type="checkbox"/> Physical violence/assault (includes hitting slapping, kicking, shoving, that are not sexual in nature) <u>Property and economic violence</u> <input type="checkbox"/> Economic/Financial Abuse (Denial of Resources or inheritance, earnings, access to school, damaging property) <u>Psychological violence</u> <input type="checkbox"/> Psychological/Emotional Abuse (threats of physical or sexual violence, force isolation) <u>Other</u> <input type="checkbox"/> Non-GBV	

Were money, goods, benefits and/or services exchanged in relation to the reported incident? <input type="checkbox"/> Yes <input type="checkbox"/> No		Was it a harmful traditional practice? If so, specify (eg. early or child marriage) <input type="checkbox"/> Yes, please specify _____ <input type="checkbox"/> No	
Was technology or social media used to perpetrate the violence? <input type="checkbox"/> Yes, please specify _____ <input type="checkbox"/> No			
Has the client reported this incident anywhere else?		If so where?	
Has the victim/survivor had any previous incidents of gender-based violence against them?		Please describe:	
Alleged Perpetrator Information			
Number of alleged perpetrator(s)* <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> More than 3 <input type="checkbox"/> Unknown	Alleged perpetrator sex* <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Both	Alleged perpetrator relationship with survivor *	
	Age* <input type="checkbox"/> Adult <input type="checkbox"/> Minor <input type="checkbox"/> Adult & Minor	<input type="checkbox"/> Intimate partner / Former partner <input type="checkbox"/> Primary caregiver <input type="checkbox"/> Family other than spouse or caregiver <input type="checkbox"/> Supervisor / Employer <input type="checkbox"/> Co-worker <input type="checkbox"/> Teacher / School official <input type="checkbox"/> Service Provider	<input type="checkbox"/> Family Friend / Neighbor <input type="checkbox"/> Other <input type="checkbox"/> No relation <input type="checkbox"/> Unknown
Part II: Assessment, Service and Referral Planning Guide			
Who referred this client to you? * <input type="checkbox"/> Health/Medical Services <input type="checkbox"/> Community Leader <input type="checkbox"/> Teacher/School Official <input type="checkbox"/> Safe House/Shelter	<input type="checkbox"/> Police/Other Security Actor <input type="checkbox"/> Psychosocial/Counseling Services <input type="checkbox"/> Legal Services <input type="checkbox"/> Livelihood Program	<input type="checkbox"/> Family member <input type="checkbox"/> Other Government Service <input type="checkbox"/> Self-Referred <input type="checkbox"/> Other (specify)	

What are the services or actions that she needs or wants? *Share with her the different options for actions/ services (Use additional pages if needed for more services)*

Possible Needs of Survivor	Check if she needs	Planned Actions (date of this form)		Referral Details
		Provide	Refer to Other	
Health				
Emergency Care for Injuries	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Forensic Exam	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other Health Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Safety				
Safe Shelter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Police or Security	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other (list)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Legal				
Legal Information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Legal Representation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Mediation (non-crime)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Psychological services				
Primary Counseling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Longer-term Counseling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other (List)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Economic				
Emergency Aid	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Occupational Guidance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Vocational Training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other services (list)				
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Notes and Observations:

Date.....

Caseworker signature



LAO PEOPLE'S DEMOCRATIC REPUBLIC
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Template
Victim's Profile (Under 18)

I. Brief Profile

- ❖ Name and last name (victim) Age
 Date of birth dd/mm/yy..... Birthplace: Village.....
 unit.....House No. District.....
 Province/Vientiane Capital.
 Occupation.....Nationality
 Ethnicity..... Religion.
 Educational Level
 Present address: Village. Unit House No
 District.
 Province/Vientiane Capital.
 Phone number.....

Subject:

Currently living with ☐ Father; ☐ Mother; ☐ Stepfather; ☐ Stepmother; ☐ Stepparents;
☐ Foster father; ☐ Foster mother; ☐ other.....
 (Please provide details)

.....

❖ **Health Profile**

What health conditions have you had in the past?

.....

Treatment in the past

.....

From the age of 8 to the present, what did you do and where (Please provide details)

.....

How many siblings do you have?

What does each of them do? Where? (Please provide details)

.....

II. Family history (for child)

- ❖ Name and last name of father.....Age
- Occupation Present address: Village.
- Unit.House No. District.
- Province/Vientiane Capital..... Phone number
- How many times has he been married in the past?

❖ Health Profile

What health conditions has he had in the past?

.....

.....

Treatment in the past

.....

.....

How many siblings does the father have?

What does each of them do? Where? (Please provide details)

.....

.....

.....

- ❖ Name and last name of mother Age
- Occupation.....Present address: Village.....
- Unit.House No District.
- Province/Vientiane Capital. Phone number
- How many times has she been married in the past?

❖ Health Profile

What diseases has she had in the past?.

.....

Treatment in the past

.....

.....

How many brothers and sisters does the mother have?

What does each of them do? Where? (Please provide details)

.....

.....

.....

At. ,

Date.....

Signed by the note taker

Signed by the profile's owner



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Template

Victim's Family Assessment Records (Child's Family)

- ❖ Name and last name of the evaluator
 Age Occupation..... Responsibility.....
 Workplace.....

- ❖ Evaluation of the family of Ms./Mr.....Age
 OccupationPresent address:
 Village.....Unit.....House NoDistrict
 Province/Vientiane Capital.....
 Phone number.....

- ❖ **Information on accessibility to the village facilities:**
☐ Electricity; ☐ Tap water; ☐ Health center; ☐ Hospital, Roads Borehole...

- ❖ **Victim's household condition**
 House style (shape, design, size, building materials, color, floor and roof)

 Indoor features (room, room condition, house arrangement)

 Household items:
☐ Refrigerator, ☐ TV, ☐ Electric fan, ☐ Others (add details)

 External features (condition around the house and fence/walls)

- ❖ **Information about the family**
 Father's name and last name age
 Occupation Present address: Village.....
 Unit..... House No District.....
 Province/Vientiane Capital.....Phone number.....

 Mother's name and last nameage.....
 Occupation

Present address: Village..... Unit..... House No
District..... Province/Vientiane Capital..... Phone
number.....

Name and last name of abuser Age.....
Occupation
Present address: Village..... Unit.....House No
District..... Province/Vientiane Capital..... Phone number.....

Name and last name of spouse Date of birth
Occupation Race
Nationality..... Ethnicity..... Religion
Present address: Village..... Unit.....House No
District.....Province/Vientiane Capital.....Phone number.....

Number of children , Female.

1.
2.
3.
4.

Number of siblings What does each of them do? Where?

1.
2.
3.
4.

❖ The victim currently resides with ☐ Father, ☐ Mother, ☐ Step father, ☐ Step mother,
☐ Other (please provide details).

❖ Family ties (expression, speech, gestures, attention) Please separate into individuals such as father,
mother, sisters, brothers and others

❖ Family's opinions towards the victim

❖ Family's opinions towards the supporting agencies

❖ Opinions of villages and community on the incident that happened to the victim

❖ Information about the problems that happened

Evaluation results:

.....
.....
.....

At
Date

Village Authority

Evaluator



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Reporting agency

No.
At.....
Date

Template
Report on Victim Support

To:
Subject: Victim Support
- Based on.
- Based on

I. Victim Profile

.....
.....
.....
.....

II. Incident Details

.....
.....
.....
.....

III. Support provided

.....
.....

IV. Comments of the reporter

.....
.....
.....
.....
.....
.....

Signed and sealed by the reporting agency
(If the report is prepared by an individual, include signature and affix thumb prints)



LAO PEOPLE'S DEMOCRATIC REPUBLIC
PEACE INDEPENDENCE DEMOCRACY UNITY PROSPERITY

CONFIDENTIAL
CONSENT FOR RELEASE OF INFORMATION

I, _____, give my permission for
 (**Name of Organization**) to share information about the incident I have reported to them as
 explained below:

1. I understand that in giving my authorization below, I am giving (**Name of Organization**)
 permission to share the specific case information from my incident report with the service
 provider(s) I have indicated, so that I can receive help with safety, health, psychosocial,
 and/or legal needs.

I understand that shared information will be treated with confidentiality and respect, and
 shared only as needed to provide the assistance I request.

I understand that releasing this information means that a person from the agency or service
 ticked below may come to talk to me. At any point, I have the right to change my mind
 about sharing information with the designated agency / focal point listed below.

I would like information released to the following:

(Tick all that apply, and specify name, facility and agency/organization as applicable)

Yes No

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Security Services (specify): _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Psychosocial Services (specify): _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Health/Medical Services (specify): _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Safe House / Shelter (specify): _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Legal Assistance Services (specify): _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Livelihoods Services (specify): _____ |

Other (specify type of service, name, and agency): _____

1. Authorization to be marked by client:
(or parent/guardian if client is under 18)

☐ Yes

☐ No

2. I have been informed and understand that some non-identifiable information may also be shared for reporting. Any information shared will not be specific to me or the incident. There will be no way for someone to identify me based on the information that is shared. I understand that shared information will be treated with confidentiality and respect.

2. Authorization to be marked by client:
(or parent/guardian if client is under 18)

☐ Yes

☐ No

Signature/Thumbprint of client: _____

(or parent/guardian if client is under 18)

Caseworker Code: _____

Date: _____

Consent for Release of Information Form

Version 2 (Finalized October 2010)

CONFIDENTIAL

INFORMATION FOR CASE MANAGEMENT

Client's Name: _____

Name of Caregiver (if client is a minor): _____

Contact Number: _____

Address: _____

Example of the Template
Types of Gender Based Violence (New Cases)

Month _____ Year _____

	Type of GBV	No. Girls (≤ 17 years)	No. Women (≥ 18 years)	Total No. Girls/Women	No. Accompanying Children (≤ 17 years)
1	Rape				
2	Sexual violence				
3	Sexual harassment				
4	Forced marriage				
5	Physical violence/assault				
6	Economic/Financial Abuse				
7	Non-GBV				
	Total:				

Submitted by: _____

Example of the Template
Types of Gender Based Violence (On-going Case Load)

Month _____ Year _____

	GBV Caseload ongoing	Active Cases from Previous Month	New Cases this Month +	Closed Cases this month –	Total Active cases at the end of the month =
1	Rape				
2	Sexual violence				
3	Sexual harassment				
4	Forced marriage				
5	Physical violence/assault				
6	Economic/Financial Abuse				
7	Non-GBV				
	Total:				

Submitted by : _____

Example of the Template
Types of Gender Based Violence (services provided)

Month _____ Year _____

Types of Services	Services Provided Directly and Referrals Made		Total
	Provided Directly	Referred to Other Organization	
Counseling			
Legal Assistance			
Safe Shelter			
Child Care			
Medical Care			
Legal Aid			
Economic Aspects			
Educational and vocational training			
Reintegration to family and society			

Submitted by : _____

Case study 1

Somsi (alias) aged 45, a divorced mother of five children - all girls, including 07-year-old twins. Somsi is legally re-married to Xay, aged 47. After 02 years of marry, Somsi got an accident, leaving her with ill health, bad memory, not being able to work as before. Only Xay was the bread earner for the family.

In the family, the older children have their own jobs, but they are only able to support themselves, at the same time they like to hang out partying with friends. One of the elder sisters has a female lover and the twins see the behaviors between their sister and her female lover all the time.

The stepfather pretends he loves the twins. Every day, after work, he bought some sweets for the twins and they both are very closely attached to him. The parents let the twins sleep with them, and the twins sleep close to the father, where he always asks them to stay naked at bedtime.

One day, the mother of the twins went out to the hospital for medical check-up, and elder sisters also went out to work. Taking the opportunity while no-one was home, he had sex with both the twins and threatened them not to tell anyone; otherwise, he would kill them or expel them from the house. After that he tried to have sex with the twins and continued to do so regularly for more than a year. Later, the twin's sister noticed an unusual behavior of the stepfather when he was playing with the twins, which was different from the normal father-child behavior. She then asked the twins and she was told on what happened to them, including the vaginal bleeding while urinating. After hearing this, she rushed to the uncle for advice on what to do about it. The uncle then took the twins to the hospital, and the doctor confirmed that there were vaginal tears with internal bruise.

Assistance

- **Shelter:**

After Ms. Phone entered to the shelter at the Counseling and Protection Center for Women and Children's, we provided a safe accommodation, clothing, food and other daily amenities, looking after her livings from the day she was admitted until discharged from the center.

- **Psychological support:**

Psychological counseling was provided and several rehabilitation activities were conducted in and outside the Center to restore her emotional strength, encourage her to face the problems that come into her life and forget the painful stories of the past.

Both twins became cold-hearted, like to play with their genital organs as they understood that what the stepfather did to them was a common expression of love from parents. The Center provided mental rehabilitation and counseling to restore their emotion by taking time to cultivate awareness for the children to understand that their stepfather's behavior was not how the parent show their affection to children. The Center also educated them how to protect their bodies not allowing anyone of the opposite sex to touch. This mental rehabilitation process took more than a year before the children forgot about what the stepfather has done to them.

- **Medical support:**

After admitting to the Center, children were taken for medical examination and were provided proper treatment. Other knowledge on how to take care of their health and hygiene were also provided.

When they first entered the Center, the children were very thin with bruises on their bodies and vaginal bleeding. The children were taken to 109 Hospital for medical examination and found several tearing in their vaginas and there were infected with sexually transmitted diseases. The Center coordinated with the Hospital for further treatment of the twins. For 03 months that they were taken to the Hospital for periodic health-check and medication until they fully recovered.

- **Legal aid:**

The Center coordinated with police officers to collect information and provide useful information for prosecution, such as child interview records, photographs and medical certificates. In addition, the Center followed-up and supported the case proceedings with the police, the People's Prosecutor office and acted as their guardian in court proceedings, including court meetings, claiming for compensation to the damages for child-victims. The Center also represented the twins as their guardian in attending the court hearing.

For this case, the People's Court of Vientiane Capital ruled that: Xay was guilty according to the Article 128 on raping, and sentenced for 7 years and 3 months imprisonment, a fine of Kip 5,000,000, and Kip 10,000,000 for mental healing, but the Center appealed the Court Decision. The court decided to send case file to the Court of first instance to re-sentenced. The People's Court of Vientiane Capital sentenced (new) an imprisonment of a 10-year and 3 months, with a fine of Kip 10,000,000.

- **Education and vocational training:**

During their staying at the Center, children's needs and readiness for schooling were evaluated by the Center in the midst of waiting for final court proceedings as they were at schooling age. After the evaluation, it was found that children were ready to attend school, therefore, the Center had contacted the school that is safe for children in all aspects, arranged the school transfer, and confidentiality was maintained throughout the process. Every day, the Center was responsible for transportation sending and picking children to-from school and provided school supplies for them. Both children attended school for three years. After completing the legal proceedings, the Center coordinated with Ministry of Labor and Social Welfare for a special consideration of admitting them to SOS school. Now they have a job and income for self- support.

- **Reintegration to family and society:**

From the evaluation of children's family situation, the Center realized that the family was poor; the mother was mentally ill; their sisters were jobless and were the mistresses of married men. So both children are unable to reintegrated to their family.

Case study 2

In 1986, Ms. Bounmy (alias) was legally married with Mr. Bounleua (alias), a government official. They have five children. Throughout the marriage years, Bounleua (husband) went on the government assignments in many places. Ms. Bounmy was backstopping him by taking good care of the family, providing love and care, educating children so that the husband can fully concentrate at work. Later, the family began to get into trouble because Bounleua did not take care of his family development. He was living a playful life, having girlfriends, insulting the wife's relatives, and acted violently against Bounmy all the time. Since the day they got married, Bounmy was sexually assaulted by Bounleua 27 times (not included mild cases). Ms. Bounmy has always endured because she was afraid that it would impact her husband's career (the husband held a position of a Deputy Director of a Department) and the love she had for him made her endured for such a long time.

One night, Bounmy saw her husband falling asleep in the hut outside of the house where it was windy. Fearing that he would catch cold, Bounmy call him to sleep in the house, causing his resentment, so he beat her. Bounmy was injured, with nose bleeding and a broken head. She went to hospital for treatment. After this incident, Bounmy was no longer able to withstand her husband's behavior, decided to file a complaint against him on charges of assault.

Assistance

- **Psychological support:**

Counseling and emotional support was provided to the victim. She was encouraged to have courage to face the problems in life, forget the painful stories of the past, and resolve this family problem.

- **Medical support:**

The victim was recommended for health – check and the hospital was coordinated for facilitating medical examination and issuing medical certificate for the victim as evidence to include in police case file for prosecution against the husband.

- **Legal aid:**

The victim was prepared in advance for interview; the police was collaborated for factual information collection. The Center participated in testimony and sent it to the police for legal prosecution, helped in the filing complaints documentation. Besides, the Center was involved in coordination, encouragement and follow-up with court proceedings toward the end. The Center participated in court hearings, where the People's Court of Vientiane Capital ruled that Mr. Bounleua was guilty for physical assault with sentence of 6-month under custody, and a fine of Kip 5,000,000 for mental healing. Ms. Bounmy was satisfied with the Court's decision and no further appeals from concerned parties.

With financial support by

