



MINISTRY OF HEALTH

MINIMUM STANDARDS FOR BASIC COUNSELING FOR WOMEN AND GIRL SURVIVORS OF GENDER BASED VIOLENCE

2016

Developed with support from:



អនុវត្តដោយ:



TABLE OF CONTENTS

Forward	5
Acknowledgements	7
Acronyms	10
Definitions of Key Terms	11
1. Introduction	13
1.1 Purpose	14
1.2 Legal Framework on Violence Against Women in Cambodia	15
1.3 Who Should Implement the Minimum Standards?	16
1.4 Limitations	16
2. Guiding Principles and Values for Providing Survivor Centered Care	18
3. Minimum Standards of Basic Counseling for Women and Girl Survivors of Gender Based Violence	20
Standard 1: Basic Counseling: Engaging with the Survivor of GBV Against Women.....	20
Standard 2: Basic Counseling: Safety Planning for the Survivor of GBV Against Women.....	21
Standard 3: Basic Counseling: Provision of Information on Services and Response for Survivors of GBV Against Women including those from Vulnerable Groups.....	22

Standard 4:	Basic Counseling: Developing Options, Decision Making and Self-Determination	24
Standard 5:	Basic Counseling: Privacy and Confidentiality	25
Standard 6:	Service Provider Good Practices: Self-Awareness of the Service Provider	26
Standard 7:	Service Provider Good Practices: Relationship Ethics Between Service Providers and Survivor	26
Standard 8:	Service Provider Good Practices: Networking and Referral Between Service Providers	27
Standard 9:	Service Provider Good Practices: Self-Care of the Service Provider	28
Standard 10:	Service Provider Good Practices: Supervision and Support by Professional Counselor	28
Standard 11:	Minimum Standard Implementation: Training for Service Providers on Understanding GBV Against Women and Basic Counseling Skills	29

500

FORWARD

Minimum Standards for Basic Counseling for Women and Girl Survivors of Gender Based Violence were developed by the Ministry of Women's Affairs (MoWA) and the Ministry of Health (MoH) of Cambodia with support of the Access to Justice for Women Project (ATJW II), implemented jointly by Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) and the Ministry of Women's Affairs and funded by the German Federal Ministry for Economic Cooperation and Development (BMZ) and the Australian Department of Foreign Affairs and Trade (DFAT).

The Minimum Standards are in line with Target 4 of the National Strategic Development Plan: Increase implementation of demography and gender equity policy. The policy priority in the 5th Legislature on strengthening gender equity stresses that the Royal Government of Cambodia (RGC) promotes the implementation of the National Action Plan to Prevent Violence against Women (2014-2018) (NAPVAW) with a view to end gender based violence against women in accordance with the Committee on the Elimination of Discrimination against Women (CEDAW). According to NAPVAW's Strategy 2 at Expected Outcome 10: Legal Protection and Multi-sectoral service, it is expected that MoWA and MoH would develop minimum standards to improve basic counseling skills of service providers so that they are able to better deliver quality and appropriate services effectively and in a timely manner to all survivors of gender based violence against women.

The Minimum Standards aim to give guidelines to all service providers so that they are using a survivor centered human rights approach when delivering services. This means they have to respect the decision of the survivor and ensure she is provided adequate information. The Minimum


Standards encourage all service providers to refer survivors to any needed available services. Empowering survivors will make a positive impact on building their confidence to make their own decisions.

The Minimum Standards pave the way to provide a holistic and comprehensive response to gender based violence against women, taking into account the safety of women and their children. Service providers should be given training to implement the Minimum Standards to provide services professionally to survivors with respect and care.

It is in the belief and hope of MoWA and MoH that the Minimum Standards for Basic Counseling for Women and Girl Survivors of Gender Based Violence will provide easy guidance for service providers to follow and implement in their daily work.

Phnom Penh, Day *05* Month *Dec* 2016

Minister of Ministry of Women's Affairs *Saeng Fe* Minister of Ministry of Health *Walle*



Ing Kantha Phavi **Mam Bunheng**

ACKNOWLEDGEMENTS

The process to develop the Minimum Standards for Basic Counseling for Women and Girl Survivors of Gender Based Violence was initiated in 2013 and included consultations with national and international experts. The Minimum Standards describe what all service providers should do in the process of basic counseling to victims of gender based violence against women to ensure respect for their basic rights and to empowering them to make their own choices.

The MoWA and MoH have worked together in an inter-ministerial working group created to develop the Minimum Standards with support from the ATJW project, funded by the German Federal Ministry for Economic Cooperation and Development (BMZ), the Australian Department of Foreign Affairs and Trade (DFAT) (from 2014 to 2016) and the Spanish Agency for International Development Cooperation (AECID) (from 2010 to 2013).

The MoWA and the MoH would like to acknowledge all members of the inter-ministerial working group and the experts consulted along the process. Members of the inter-ministerial working group include H.E.Sy Define, Secretary of State, MoWA; H.E.Tan Vouchheng, Secretary of State, MoH; H.E.Tes Chan Saroeun, Undersecretary of State, MoWA; H.E.Chhom Vannarith, Undersecretary of State, MoH; Mrs. Sakhoeun Savady, Deputy Director General, MoWA; Dr. Sour Salan, Technical Deputy Director General, MoH; Mrs. Chhaykim Sotheavy, Director, Health and Education Department, MoEYS, Mrs. Kan Sotheary; MoEYS, Mr. Chhit Sophal, Director, Psychology and Drug Abuse; Dr. Mony Sothara, Deputy Director, Psychology and Drug Abuse, MoH; Mr. Chin Chan, Deputy Director, Legal Protection, MoWA; Mrs. Sar Sinet, Deputy Director,

Legal Protection, MoWA; Major General Kim Pheap, Deputy Director, Anti-Human Trafficking and Intergretation, MoSAVY; Ms. Chou Phalyka, Deputy Director, Psychology and Drug Abuse, MoH; Dr. Yim Sobotra, Director, Psychology and Drug Abuse , Khmer-Soviet Friendship Hospital, MoH; Mrs. Dr. Sao Chamroeun, Official, Psychology and Drug Abuse, MoH; Mrs. Kong Dararath and Ms. Skun Ratha, Officer, Legal Office, MoWA; Mrs. Sok Chanrasmey, Officer, Legal Office, MoWA; Mr. Chhim Sotheara, Executive Director, TPO; Mrs. Ellen Minotti, General Advisor to Social Services Cambodia; Mrs. Sok Phanet, Head, Psychology Clinic, TPO; Mr. Ouk Bunthoeun, Training Supervisor, Social Services Cambodia; Mrs. Mang Chenda, Trainer, Social Services Cambodia; Mr. Phan Kimkroeun, Officer, Anger Management, Cambodia Women's Crisis Center (CWCC); Mr. Ean Nil, Professor, Psychology, RUPP; Mr. Ean Nil, Lecturer, Department of Psychology, RUPP; and Mr. Pich Panha, Clinic Governance, Transcultural Psychosocial Organisation (TPO).

Also, acknowledgement is extended to Mrs. You Sophea, former Director, Provincial Department of Women's Affairs (PDoWA), Siem Reap; and Mrs. Sin Siphon, Director, PDoWA, Kampong Thom; and their active colleagues for their arrangement of the consultation meetings with service providers and their coordination of the pilot training with district and commune stakeholders to ensure their quality and effective service delivery to survivors of violence.

Further recognition to Ms. Bou Makara, GIZ National Advisor of ATJW II, who coordinated the development process of the Minimum Standards under overall guidance from Dr. Dagmar Baer, GIZ Program Manager of ATJW II.

Special gratitude to Ms. Robin Mauney, Ending Violence Against Women (EVAW) consultant, who provided substantive inputs to improve and

finalize the Minimum Standards; and to Mr. Rodrigo Montero Cano, GIZ International Advisor of the ATJW II project, who provided additional inputs as well as technical advice in the process.

Further acknowledgement is extended also to those who engaged in the meetings of the Community of Practice held in Siem Reap and Kampong Thom to review and give feedback to improve these minimum standards: Health Department, provincial hospital, midwifery committee, Department of Social Affairs, Veterans and Youth Rehabilitation, Office of Anti-Human Trafficking, Provincial Police Commissioner; Legal Aid of Cambodia (LAC); Banteay Srei; CWCC; People with Disability; Aple; Kalyan Mit; Women's Resource Center; Cambodia Life; and POE.

Special thanks to the working group that initiated the draft minimum standards: Summer Benton; World Hope International; Mrs. Meng Daly, Advisor; Mrs. Elizabeth Hoegger, Psychology Advisor, RUPP; Mr. Seng Mang, Staff, Hagar; Mrs. Grusche Michelsen, Child Helpline Cambodia; Mrs. Ellen Minotti, Social Services Cambodia; Mrs. Sok Phanet, Staff, TPO; Mr. Tony Posnett, Hagar; Mr. Kim Rasmey, AFESIP Cambodia; and GIZ members of ATJW Project: Mrs. Linda Helfrich, International Advisor, Ms. Kristina Beck, Junior Advisor; and Mrs. Kong Sophea, National advisor.

The development and the publication of the Minimum Standards were possible thanks to the financial support of the German Federal Ministry for Economic Cooperation and Development (BMZ), the Australian Department of Foreign Affairs and Trade (DFAT) and the Spanish Agency for International Development Cooperation (from 2010 to 2013).

ACRONYMS

AECID	Spanish Agency for International Development Cooperation
ATJW	Access to Justice for Women project (2010-2013)
ATJW II	Access to Justice for Women II project (2014-2016)
BMZ	German Federal Ministry for Economic Cooperation and Development
CCWC	Cambodia Women's Crisis Center
CEDAW	Convention on the Elimination of All Forms of Discrimination Against Women
COP	Community of Practice
DFAT	Australian Department of Foreign Affairs and Trade
EVAW	Ending Violence Against Women
GBV	Gender-based violence
GIZ	Deutsche Gesellschaft für Internationale Zusammenarbeit
LAC	Legal Aid of Cambodia
MoH	Ministry of Health
MoSVY	Ministry of Social Affairs, Veterans and Youth Rehabilitation
MoWA	Ministry of Women's Affairs
PDoWA	Provincial Department of Women's Affairs
NAPVAW	National Action Plan to Prevent Violence Against Women
RGC	Royal Government of Cambodia
RUPP	Royal University of Phnom Penh
TPO	Transcultural Psychosocial Organisation
VAW	Violence Against Women

DEFINITIONS OF KEY TERMS

Basic counseling: The way service providers communicate with survivors and provide care for their immediate emotional and practical needs.

Counseling: A process, organized in a series of steps, which aims to help people deal with or adapt to situations they are facing. This involves helping the individual to understand their emotions and feelings and to help them make positive choices and decisions.

Coercion: Forcing, or attempting to force, another person to engage in behavior against her/his will by using threats, verbal insistence, manipulation, deception, cultural expectations, or economic power.

Consent: Making an informed choice freely and voluntarily to do something. There is no consent when agreement is obtained through the use of threats, force or other forms of coercion, abduction, fraud, deception, or misrepresentation.

Domestic violence: Domestic violence as defined by Cambodian law includes violence against a husband or wife; dependent children or persons living under the roof of the house and who are dependents of the households.

Duty bearer: Duty bearers are those actors who have a particular obligation or responsibility to respect, promote and realize human rights and to abstain from human rights violations. The term is most commonly used to refer to State actors, but non-State actors can also be considered duty bearers. Individuals (e.g. parents), local organizations, private companies, aid donors and international institutions can also be duty-bearers.

Gender-based violence: Gender-based violence is defined in this document as “violence that is directed against a woman because she is a woman or that affects women disproportionately. It includes acts that inflict physical, emotional, mental or sexual harm or suffering, threats of such acts, coercion and other deprivations of liberty.”

Intimate partner violence refers to behaviour by an intimate partner or ex-partner that causes physical, sexual or psychological harm, including physical aggression, sexual coercion, and psychological abuse and controlling behaviours.

Perpetrator: A person, group or institution that directly or indirectly inflicts, supports, and condones violence or other abuse against a person or a group of persons.

Service provider: All organizations, staff, volunteers and duty-bearers providing services and support to GBV survivors.

Sexual violence is any sexual act, attempt to obtain a sexual act, unwanted comments or advances or acts to traffic, or otherwise directed toward a person’s sexuality, using coercion, by a person, regardless of their relationship to the victim, in any setting, including but not limited to home and work.

Survivor: A person who has been physically, sexually and/or psychologically violated and is being served by a service provider. Some service providers call survivors clients, patients, crime victims or other labels.

Violence against women any act of gender-based violence that results in, or is likely to result in, physical, sexual or mental harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life.

1. INTRODUCTION

Gender based violence against women is a human rights violation with consequences that impact women's lives. According to the World Health Organisation 1 in 3 women in the world will experience physical and/or sexual violence by a partner or sexual violence by a non-partner.¹ Service providers have a responsibility to respond to survivors taking into account the social dynamics of gender based violence and the specific, individual rights and needs of the survivor. Gender-based violence survivors commonly will not trust service providers, will minimize their experience of violence, and will work to protect the perpetrator. These factors will impact your interactions with survivors and are important areas for further training. Additionally, service providers operate within a framework

¹ http://www.who.int/reproductivehealth/publications/violence/VAW_infographic.pdf?ua=1

Gender-based violence

Gender-based violence is "violence that is directed against a woman because she is a woman or that affects women disproportionately. It includes acts that inflict physical, mental or sexual harm or suffering, threats of such acts, coercion and other deprivations of liberty."

- (a) Physical, sexual and psychological violence occurring in the family, including battering, sexual abuse of female children in the household, dowry-related violence, marital rape, female genital mutilation and other traditional practices harmful to women, non-spousal violence and violence related to exploitation;
- (b) Physical, sexual and psychological violence occurring within the general community, including rape, sexual abuse, sexual harassment and intimidation at work, in educational institutions and elsewhere, trafficking in women and forced prostitution;
- (c) Physical, sexual and psychological violence perpetrated or condoned by the State, wherever it occurs.

Sources: CEDAW General Recommendation 19; Beijing Platform for Action

of a multi-sectoral response² and this requires knowledge of other service providers' roles and responsibilities.

Basic counseling is the interactive process between the service provider and a woman during which information is exchanged and support is provided so that the woman can make decisions, design a plan and take action based on her own informed choices. The Minimum Standards for Basic Counseling for Survivors of Gender Based Violence Against Women and Girls (Minimum Standards) will provide service providers on the front-line talking to women that have experienced gender based violence guidance for the treatment of survivors.

1.1 PURPOSE

The Minimum Standards aim to improve the quality of basic counseling provided to survivors of gender based violence against women (see insert on previous page) by front-line service providers. The Minimum Standards are based on the premise that all staff, volunteers (including community level volunteers) and duty-bearers who provide support to survivors of gender based violence require basic skills in counseling, even if they are providing services such as legal advice, training, reintegration support or health care.

The Minimum Standards guide how service provider staff and volunteers communicate and interact with survivors, including those who are working in counseling roles and those who are working in other roles. As such they represent the basic set of skills and attitudes needed to respond appropriately to survivors.

² The multi-sectoral response calls for holistic inter-organizational and inter-agency efforts that promote participation of people of concern, interdisciplinary and inter-organizational cooperation, and collaboration and coordination across key sectors, including (but not limited to) health, psychosocial, legal/justice and security. **Source:** <http://www.endvawnow.org/en/articles/1503-the-multi-sectoral-model.html>

1.2 LEGAL FRAMEWORK ON VIOLENCE AGAINST WOMEN IN CAMBODIA³

The Royal Government of Cambodia has made significant strides in setting a national policy and legal framework to address gender based violence against women. Following is a summary of these laws and policies.

Convention on the Elimination of All Forms of Discrimination against Women (CEDAW): Cambodia ratified the CEDAW in 1992 and its' Optional Protocol in 2010. As a signatory to CEDAW, and in compliance with the responsibilities set forth in the Beijing Platform for Action, Cambodia has demonstrated a firm commitment to enact legislations and policies that can address and respond to VAW.

The Constitution (1993) enshrines the right of all Cambodians to life, personal freedom and security (Article 32), and guarantees there shall be no physical abuse of any individual (Article 38).

The Law on Prevention of Domestic Violence and Protection of Victims (2005) establishes the responsibility of local authorities to intervene in cases of domestic violence and provides for protection orders to be issued by the courts to protect the victim from any further violence.

The Law on the Suppression of Human Trafficking and Sexual Exploitation (2008) establishes the law against kidnapping persons for labour or sexual exploitation and Article 31 makes managing an establishment for prostitution illegal.

The Penal Code makes acts of domestic violence a crime that can be punished with imprisonment under different offenses in the code, such as intentional violence on a spouse or child. The Penal Code states that the legal age of sexual consent

³ Adapted from the National Action Plan to Prevent Violence Against Women 2014-2018

is 15 years of age. The Penal Code also offers imprisonment provisions for rape.

The Civil Code (2007) states that members of families shall respect each other's rights and freedoms and prevent domestic violence.

Under Article 172 of the Cambodian Labour Law (1997) and **the Criminal Code (2010)** sexual harassment and indecent behaviour in the workplace are both prohibited.

The Safe Village/Commune/Sangkat Policy (2010) issued by the Ministry of Interior (Mol) designates rape, domestic violence and anti-trafficking as priority areas for commune, municipal, district, and provincial councils to address. This policy urges collaboration between the local authorities and all sectors including political parties, NGOs, private sectors, and citizens to build collective forces, actions and measures to implement the policy.

1.3 WHO SHOULD IMPLEMENT THE MINIMUM STANDARDS?

The Minimum Standards are intended to provide guidance to all staff, volunteers and duty-bearers coming into direct contact with women who have experienced gender based violence against women. Service providers are encouraged to apply the Minimum Standards within their organizations to ensure quality services and protect the rights of GBV survivors. The Minimum Standards should be used by service providers and duty bearers providing health care, shelter and supportive services, legal interventions, and protection responses.

1.4 LIMITATIONS

The Minimum Standards represent an essential set of basic skills for all service providers working with survivors of gender based violence against women, however, they cannot serve to certify any person as a professional counselor; and

applying them cannot substitute the long-term process of acquiring professional counseling skills through the study of counseling at an accredited university and award of a respective degree.

All services delivered to GBV survivors should follow an effective case management process. This document does not outline minimum standards for case management.

Additionally, the Minimum Standards should be do not address the specific needs for basic counseling with children of GBV survivors, as this is in itself a specialized field.

Men and gender based violence

Men may also be victims of partner violence and sexual assault. However, generally women experience more sexual violence, more severe physical violence, and more controlling behavior from male partners than women do.

While the Minimum Standards are designed to focus on violence against women, much of the advice is also relevant to violence against men.

2. GUIDING PRINCIPLES AND VALUES FOR PROVIDING SURVIVOR CENTERED CARE

Human Rights Approach

Gender based violence against women is a human rights violation and unacceptable in any form.

Ensure Safety

The first priority is the safety of the survivor. All actions are aimed at restoring or maintaining safety and not placing survivors at greater risk.

Empowerment in Practice

Providing information on options can help the survivor make informed choices for themselves. Survivor's opinions, thoughts and ideas shall be listened to and treated with respect. This is called using a survivor centered or empowerment approach. While information can empower the survivor to make informed choices the survivor has the right to decide what assistance they want and can refuse any service.

Non-blaming and Non-Judgemental Attitude

Survivors of intimate partner violence, sexual violence or other violence will not be blamed for the violence. Any violence against women is against the law of Cambodia and the perpetrator is responsible.

Privacy and Confidentiality

At all times the privacy and confidentiality of the survivor and their families shall be respected. Services should be provided in quite, private space.

When a survivor discloses violence if other people are around asking them to leave or move to another area when no one can hear can protect their privacy.

GBV survivors' identities should not be shared or discussed in any meeting or with other service providers without the survivor's permission. For consultation or advice on how to manage the case from another service provider do not use the survivors name unless permission is given.

Non-Discrimination

All survivors are equal and shall be treated the same and have equal access to services. There shall be no discrimination or different treatment for any GBV survivor based on ethnicity; religion; social class; disability; age; sexual orientation; or other factors.

3. MINIMUM STANDARDS OF BASIC COUNSELING FOR WOMEN AND GIRL SURVIVORS OF GENDER BASED VIOLENCE

STANDARD 1: BASIC COUNSELING: ENGAGING WITH THE SURVIVOR OF GBV AGAINST WOMEN

Service providers intervening in or responding to a survivor of gender based violence against women should respond in a way that helps the survivor to be empowered through listening, interpreting and responding in a systematic way to help the survivor to make decisions for themselves.

Outcome: All survivors of gender based violence against women are treated with respect when they seek help or support from service providers

1.1 At the first point of contact the service provider shall engage with the survivor treating them with respect and courtesy. This includes:

- ❖ Introduce yourself to the survivor
- ❖ Take the survivor to a private place to talk
- ❖ Use active listening skills to create a positive climate to learn about her needs and concerns
 - Talk politely and respectfully to the survivor inquiring about her needs and concerns. Let her tell her story without interrupting.
 - Ask her about the history of seeking help or interventions. Ask open ended questions, and provide time for the survivor to talk.
 - Reflect back what she has said in to be sure you understand.
 - Use body language such as eye contact, nodding the head and leaning forward to show you are paying attention.

1.2 Service providers will aim to understand the issue from the survivor's point of view and never blame the survivor for the violence.

- ❖ Do not ask the survivor what they did to cause the violence, or why the person perpetrated the violence. The survivor is never to be blamed for the violence.

Note: This is the most important response you can provide. Even if this is all you can do is listen and treat the survivor respectfully you have helped. Remember you are not responsible for solving the survivor's problems, and the survivor's right to make her own decision and her privacy and confidentiality should be respected at all times.

STANDARD 2: BASIC COUNSELING: SAFETY PLANNING FOR THE SURVIVOR OF GBV AGAINST WOMEN

Outcome: Safety assessment and planning is conducted with survivors of gender based violence against women seeking help

The safety of the survivor and her children is paramount. The service provider should assess the physical and psychological danger to the woman, her children and the service provider.

2.1 Service providers shall help the survivor assess immediate and longer-term safety. This includes:

- ❖ Assessing the physical safety of the survivor. If no other protocol is available, some questions to ask are:
 - Is the perpetrator a threat right now? (If so, consideration should be made to call the police)
 - Has the violence happened more often in the last 6 months?
 - Has he used a weapon or threatened you with a weapon?
 - Have you ever been beaten when pregnant?
 - Is he extremely jealous of you?

- ❖ Safety planning should be a standard part of all service providers first interaction with survivors. If the woman answers yes to at least 1 of the questions above, it may not safe for her to return home and she should be referred to a safe place such as a friends or family members home or safe shelter if she agrees.

2.2 Service providers provide an environment where survivors feel emotionally and physically safe including:

- ❖ Communicating with respect to ensure survivors do not feel threatened by questions from the service provider (See Standard 1).
- ❖ Ensure overall safety by keeping information about the survivor (including location) confidential. This is of particular importance to protect the survivor by not putting her at risk by sharing that she has reported and from further trauma that may result from disclosure of personal information (see Standard 5).

STANDARD 3: BASIC COUNSELING: PROVISION OF INFORMATION ON SERVICES AND RESPONSE FOR SURVIVORS OF GBV AGAINST WOMEN INCLUDING THOSE FROM VULNERABLE GROUPS⁴

Outcome: Survivors of gender based violence against women, including women in vulnerable groups, have available information on services and access to services and response without discrimination

⁴ This includes women and girls with disabilities; elderly women; lesbian and bisexual women; transgender people; women and girls from indigenous groups and from ethnic and religious minorities; women who experienced sexual violence and/or forced marriage during the Khmer Rouge regime; women and girls with HIV; women migrant workers; women and girls living in remote areas; women living in prison; and women engaged in prostitution and/or working in men's entertainment sector (Ministry of Women's Affairs, Cambodia Gender Assessment: Vulnerable Groups of Women and Girls. 2014)

Survivors are likely in a state of distress when seeking help. The service providers' role is to provide basic information on available response services, supportive services so the survivor can make an informed choice about options. Service providers should focus immediately on basic needs after safety (health care, food, shelter, etc.) At this time, it is important to remind the woman of her rights to live without violence and protect herself and her children as she examines options. However, service providers must accept any decision she makes.

- 3.1** Service providers will provide information on, and access to services and response for survivors of gender based violence against women without discrimination including to women with increased vulnerability as defined in Vulnerable Groups above.
- 3.2** The information that is provided should be accurate, comprehensive and in a format that the survivor can understand. This means that the service provider must pay attention to:
 - ❖ The language the survivor speaks;
 - ❖ Whether the survivor is able to read and write; and
 - ❖ Whether the survivor has an intellectual or physical disability that prevents him/her from hearing, reading or understanding information.
- 3.3** If the service provider or duty bearer is not aware of available services and response they will provide immediate referral to the Department of Women's Affairs, non-government organization or other service provider that can provide adequate information on options for survivors.
- 3.4** Service and response options may include but are not limited to urgent health care, police, legal services, safe shelter, psycho-social counseling and support groups, or other services based on the needs of the survivor. Survivors should be provided information about all options, including the importance of particular types of care. While the survivor should always be

able to decline services, she might be in a state of distress, and should be provided clear information and options so she can understand their importance. For example, a survivor of rape should be provided clear information of the importance of health care for prevention of HIV or other sexually transmitted diseases, to help her make an informed choice.

- 3.5** Service providers provide realistic information to the victims and strictly avoid creating unrealistic expectations in survivors.

STANDARD 4: BASIC COUNSELING: DEVELOPING OPTIONS, DECISION MAKING AND SELF-DETERMINATION

Outcome: Survivors make their own choices about the services or protections they choose to accept

After provided information survivors must make their own decisions about what they choose to do. After adequate information and discussion of consequences, survivors first step toward being empowered is making their own decisions and plan.

- 4.1** Service providers acknowledge that people who have experienced violence have likely been disempowered (against their wills) both physically and mentally by the perpetrator; and that empowerment (making their own decisions with adequate information) is an important part of their recovery.
- 4.2** Service providers have the obligation to provide full information about service and response options (See Standard 3), particularly services to meet immediate needs in safety, health and psycho-social support.
- 4.3** Service providers acknowledge that all survivors have the right to decide what services and response they want and do not want; what they need and do not need; and what they will and will not accept. However, service providers have the obligation to help women understand the consequences of their choices so they have full information.

4.4 Service providers should provide a referral to other service providers, or response services based on the agreement of the survivor.

STANDARD 5: BASIC COUNSELING: PRIVACY AND CONFIDENTIALITY

Outcome: The privacy of GBV against women survivors is respected and information about them is handled with confidentiality

The fear of their story being shared has been a barrier to survivors seeking help. Maintaining privacy and confidentiality is important for the survivor to know they can share their story, but it does not get shared with others without their permission. This standard is imperative to encourage more survivors to come forward to for help.

- 5.1** No information is shared (name, situation, etc.) about the survivor without their express permission. The only exception is in a situation of immediate danger when authorities must be called to protect the survivor and/or her children from imminent harm.
- 5.2** Names and private details shall not be disclosed in conversations with other persons. This includes colleagues who do not directly work with the survivor. In particular, information shall not be shared in public surroundings or on the phone.
- 5.3** Documents about the survivor are stored safely and securely to ensure the contents stay confidential. This means that documents are stored in a place that can only be accessed by those who work with the survivor or when legally requested by the Court.
- 5.4** If information needs to be shared for case consultation, service providers should refer to the survivor in a way that will protect him/her from disclosure of identity as much as possible. This means that the service provider should avoid mentioning names, relatives, place of residence or other identifying information.

5.5 All issues raised above also apply to email correspondence.

STANDARD 6: SERVICE PROVIDER GOOD PRACTICES: SELF-AWARENESS OF THE SERVICE PROVIDER

Outcome: Service providers should deliver services within the limits of their skills and knowledge in a non-judgmental and impartial way

- 6.1** Staff, volunteers and duty-bearers delivering services must do so based on the Guiding Principles and Values in these Minimum Standards. Service providers shall not judge survivors according to their own individual values/beliefs or the values/beliefs of their organization; and instead listen to them impartially and provide them with the support they need.
- 6.2** Service providers acknowledge that GBV against women is always wrong and that survivors are not responsible for the violence, abuse or exploitation they have experienced.
- 6.3** Service providers shall reassure the survivor that any harm/abuse/trafficking or exploitations they may have experienced is not their fault and that they should not feel guilty. Service providers need to be aware that women survivors of intimate partner violence often try to justify perpetrators actions or even feel guilty and blame themselves (self-blame) for suffering such violence

STANDARD 7: SERVICE PROVIDER GOOD PRACTICES: RELATIONSHIP ETHICS BETWEEN SERVICE PROVIDERS AND SURVIVOR

Outcome: Survivors are protected from deliberate or unintended exploitation by the service provider

- 7.1** Service providers maintain clear boundaries with survivors as best as possible.

26

- ❖ You are not responsible for solving their problem but to help them understand options and increase safety for the survivor and her children.
- ❖ Male service providers should be aware that survivors may have difficulty talking with a male and offer a female if available.

7.2 Service providers acknowledge that their professional responsibility to a survivor is more important than their personal interest. They must not under any circumstances exploit survivors. This includes but is not limited to sexual and financial exploitation.

7.3 Service providers must also avoid conflicts of interest.

- ❖ Conflicts of interest include providing interventions when you have a relationship with the survivor or perpetrator such as being a relative, close friend, or other close relationship
- ❖ If service providers suspect or find evidence that a service provider is taking advantage or abusing the female survivors and/or their children, they must report this situation to their superiors while ensuring that the victims will not be put at higher risk or suffer further consequences.

STANDARD 8: SERVICE PROVIDER GOOD PRACTICES: NETWORKING AND REFERRAL BETWEEN SERVICE PROVIDERS⁵

Outcome: Service providers cooperate effectively with each other to ensure survivors have access to all the services they need

8.1 Service providers acknowledge that survivors have multiple complex needs and often require specialized, comprehensive and holistic support of a variety of government and non-government service providers.

⁵ More information can be found in the Guideline for Referrals for Women and Girl Survivors of Gender-based Violence

8.2 Service providers must continuously try to learn about the other services that are available in their area; and increase and improve cooperation with other government and non-government service providers for the benefit of the survivors. Ideally, this includes regular meetings, networking, updating of others on new services and following-up on cases.

8.3 Service providers should refer survivors to other services based on their needs.

STANDARD 9: SERVICE PROVIDER GOOD PRACTICES: SELF-CARE OF THE SERVICE PROVIDER

Outcome: Service providers are able to take care of their own physical and mental health; and continue supporting survivors effectively

9.1 Service providers should take practical steps to prevent, limit or respond to the stress they experience working with survivors, for example by:

- ❖ Using supervision to discuss their experiences in working with survivors,
- ❖ Asking for support from peers or supervisors,
- ❖ Keeping a professional distance from the survivors' situation, and
- ❖ Seeking counseling for themselves.

STANDARD 10: SERVICE PROVIDER GOOD PRACTICES: SUPERVISION AND SUPPORT BY PROFESSIONAL COUNSELOR

Outcome: Service providers' work is supported and guided by a professional counselor

10.1 To ensure the professional management of cases, service providers regularly seek supervision from more experienced counselors (every 2 to 3 months).

10.2 To keep a professional distance from survivors, service providers should never work on a case alone.

10.3 Those providing supervision are professional counselors whose knowledge and competencies have been acquired through training, education, and supervised employment experience.

STANDARD 11: MINIMUM STANDARD IMPLEMENTATION: TRAINING FOR SERVICE PROVIDERS ON UNDERSTANDING GBV AGAINST WOMEN AND BASIC COUNSELING SKILLS

11.1 Service providers should receive an adequate training to implement these standards including:

Outcome: Service providers have adequate training on Basic Counseling and Understanding of Gender-based Violence Against Women

- ❖ Overview of the Minimum Standards
- ❖ Dynamics and consequences of gender based violence against women
 - Types of gender based violence against women, the dynamics in the women in the home, the community and in the workplace (cycle of violence, dynamics of rape, sexual harassment etc.)
 - Consequences of violence on children, families and communities including health, socio-emotional, health and economic
- ❖ Active Listening Skills
- ❖ Safety Planning for Survivors
- ❖ Legal Framework in Cambodia
- ❖ Overview of Services and Response Sources for Referrals

11.2 Service providers should regularly refresh and increase their professional knowledge and skills to better understand working with survivors of gender based violence against women.



Ministry of Women's Affairs

Trung Morn Street, Phum Dam Nak Thom III
Sangkat Steung Meanchey,
Khan Meanchey, Phnom Penh,
Kingdom of Cambodia



MINISTRY OF HEALTH

Ministry of Health

No. 80, Samdech Penn Nouth Blvd.(289),
Sangkat Boeungkak 2, Khan Tuol Kork,
Phnom Penh, Kingdom of Cambodia

Reprinted by:

