

Purpose of the Tools

Program design, along with monitoring and evaluation (addressed in the next section), refers to the process of thinking that goes into a project before it begins, during redesign, or at any other point when you have an opportunity to assess whether the project is achieving its objectives and whether its effectiveness can be improved. Design determines what results we want, based on an assessment of the needs and resources available, and what interventions are most likely to achieve them.

The tool recommended and provided in this manual for approaching program design is the Causal Pathway Framework. Tools that will assist you to identify and hire qualified staff for your GBV program in an appropriate manner are also provided. Given the sensitivity surrounding GBV programs, it is imperative that staff be respected and trusted individuals from the community. The principles guiding the planning and delivery of services in GBV programs include a belief in the dynamism of the local community and in the human potential for change; a global and multi-sectoral approach which is community-based, preventative, and focused on service quality; and a commitment to the respect of fundamental human rights.

Tools Included in this Chapter

- *The Causal Pathway Framework*
- *Recruitment Do's and Don'ts*
- *Sample Job Descriptions*
- *Screening Tool*
- *Pre-hiring Interview Guide*
- *Rights and Responsibilities of GBV Program Beneficiaries and Employees*
- *Code of Conduct*

Description of the Tools

The *Causal Pathway Framework* refers to the process of program design. This framework is "causal" because it is based on the premise that the activities you carry out should logically cause desirable results to occur, and is a "pathway" because it is based on the idea that the causal links form a technically and programmatically sound logical progression.

The *Recruitment Do's and Don'ts* offer guidelines to consider when you are ready to launch the recruitment process for your GBV program.

The *Sample Job Descriptions* provide examples of the responsibilities and duties of GBV program staff as well as the qualifications to look for when hiring staff. Descriptions are available for the following positions: Program Coordinator, Advocacy Counselor, Animators/Community Trainers.

The *Screening Tool* provides a subjective evaluation of the level of knowledge of prospective staff concerning GBV issues and comfort in dealing with them. It can provide you with useful information on the skills of GBV program employees and help you to focus staff training on areas of particular need. In addition, you may use this tool to gather baseline data on the community's knowledge and awareness of GBV during your initial phase of advocacy and training.

The *Pre-hiring Interview Guide* is a useful tool for interviewing potential program employees. The tool includes scenarios which ask the interviewee to respond to difficult situations he/she may encounter on the job. His/her responses allow the program manager to see how the individual might perform when faced with uncomfortable situations.

All GBV programs should create and post in a visible area the *Rights and Responsibilities of GBV Program Beneficiaries and Employees* to highlight the rights of beneficiaries and the responsibilities of GBV staff. These guidelines outline the practices and daily conduct expected of program staff and volunteers vis-à-vis the beneficiaries, and the type of services that the beneficiaries may expect from the program. The guidelines reflect the fundamental values of GBV programs and a commitment to the specific communities where they are established.

The *Code of Conduct* should likewise be an obligatory part of any GBV program. This tool outlines the responsibility of staff not to engage in practices that may promote GBV, particularly sexual exploitation or abuse, among the beneficiary population. The code provides grounds for disciplinary action in response to infractions.

Introduction

The Causal Pathway is a planning framework that can be helpful in the project design, monitoring, and evaluation process.

INPUTS → ACTIVITIES → OUTPUTS → EFFECTS → DESIRED IMPACT

→ DESIGN DIRECTION

A causal pathway can be designed in the five steps outlined below.

Step 1: Determining the Desired Impact

Impact refers to the change in the health status, social status, or economic status of the population of interest. In other words, improving health, social, or economic problems is our ultimate goal or desired impact. For example, the desired impact of a GBV program might be improved mental and physical health and well-being of the specific population with whom you work in the community. The stated impact is often a long-term goal and, in many cases, the results at this level are not measured within the time frame of the project.

Step 2: Determining the Effect Changes in the Population

This step starts with a question: “What has to happen that can contribute to the desired impact?” An answer is: “Changes in GBV-related knowledge, attitudes, skills, intentions, and behaviors of the population.” We use effect indicators to measure levels of these changes. Desired effects for GBV programs might include:

Knowledge: The population should know...

- Women and men have equal human rights according to international law.
- Interpersonal violence is a violation of human rights.
- Survivors know where to go for help.

Attitudes: The population should believe that...

- Women and men are equal.
- Interpersonal violence is wrong and unacceptable in society.
- Survivors of violence deserve assistance, not blame.

Skills: The population should be able to...

- Avert potential violence by recognizing risks and taking safe action.

Behavior or Practices: The population should/could...

- Not commit acts of interpersonal violence.
- Support and assist survivors.
- Report incidents of GBV.
- Seek assistance (survivors).
- Condemn interpersonal violence.
- (Men) Assist other men to learn to live without using interpersonal violence.

Step 3: Determining the Outputs

Once we have figured out what the population needs to know, agree with, and do differently before the desired impact can occur, we need to decide what we need to put in place to enable people to make those changes. *Outputs* are products and services that must be in place before the effects can occur.

22. The IRC Causal Pathway Framework: A Guide to Program Design, Monitoring and Evaluation. International Rescue Committee, May 2001.

23. Reproductive Health for Refugees Consortium: Monitoring and Evaluation Tool Kit. Draft for Field Testing, January 2003.

Step 4: Determining the Major Activities

The next question we have to ask is, “What does the project have to do, and in what logical sequence, to produce these specific products and services in appropriate numbers and quality?” The technical and support tasks required to produce the outputs are referred to as activities, examples of which may include the following:

- Meet with community leaders and women’s groups to begin awareness raising and promote community leadership in GBV prevention and response;
- Develop assessment, supervision, training curricula, and plan for GBV response among service providers (health, police, social services, judiciary, camp leaders/elders, etc.); and
- Ensure adequate logistics for supply of emergency contraception.

Step 5: Determining the Essential Inputs

In the Causal Pathway Framework, we begin the project design process by deciding where we want to end up, and we end by deciding what we need in terms of people, skills, money, equipment, and supplies to achieve that impact. *Inputs* are resources required to support your activities.

The Design Direction

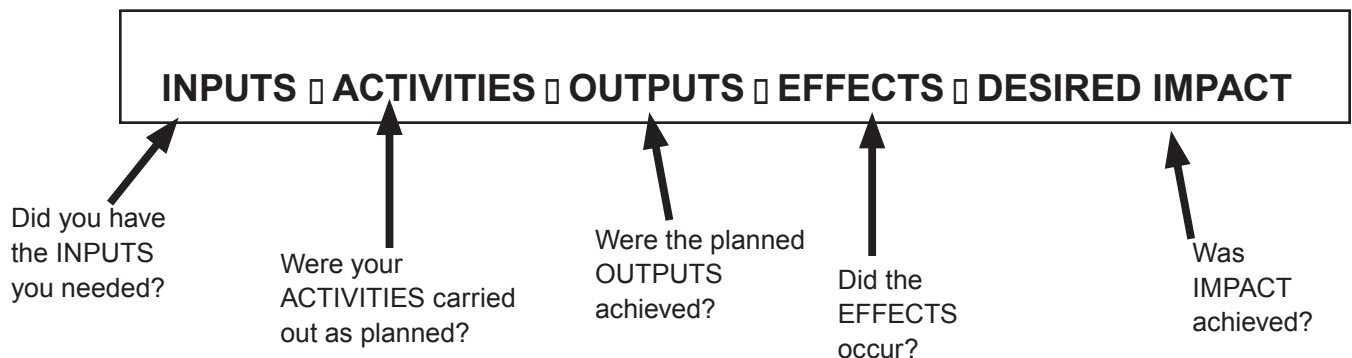
An essential feature of the Causal Pathway is the design direction; that is, the pathway starts by deciding on the impact and working backwards through effects, outputs, activities, and inputs. Once you have thought through the logical links in the Causal Pathway, it is useful to summarize your program design in a paragraph called the Causal Hypothesis. In general, the Causal Hypothesis takes the form:

“This set of inputs and activities will result in these products and services (outputs), which will facilitate these changes in the population (effects), which will contribute to the desired impact.”

Monitoring and Evaluation Using Indicators

When you summarize your program in the form of a Causal Hypothesis, it pushes you to ask some questions about how you will know whether your expectations are met. How will you know if your outputs are achieved? How will you know if the population’s knowledge and behavior changed?

In general, we want to know if the steps in the Causal Pathway actually occurred as you expected them to:



The purpose of a program’s Monitoring and Evaluation system is to help you answer these questions. You must decide, at the design or redesign stage, what information you need so that the information collection can be built in from the very start of the project.



We measure the steps in the Causal Pathway using INDICATORS. Indicators should be formulated precisely so that the measure is consistent from one time to the next. Indicators are typically formulated as numbers (#) or proportions (%). For a sample list of GBV indicators, please see page 175.

Setting Project Objectives

In the Causal Pathway framework, the “Project Objective(s)” are what the project promises to accomplish *and measure*. You can think of it as the farthest point(s) along the Causal Pathway for which you will have evidence, or data. In most projects, the objectives will be one or more of the OUTPUTS or EFFECTS you have specified in your Pathway; in some cases, it will be the IMPACT. PROGRAM PLANNERS SHOULD AIM TO DEVELOP OBJECTIVES THAT ARE S M A R T:

- S Specific
The project’s intended accomplishments must be clearly identified.

- M Measurable/quantified
The intended accomplishments must be quantified and good indicators and methods must be available to measure them.

- A Attainable
This is a reality check: consider the context and resources you have, and whether the size of the planned change is feasible.

- R Relevant
Your objective (and your program) must address a problem identified as important in the N&R Assessment.

- T Time-bound
Specify a time limit for your objective and program.

Examples of project objectives from Association Najdeh’s Domestic Violence Program for Palestinian Refugees in Lebanon:

- The percent of men and women among Association Najdeh’s beneficiary population who believe that violence is not an acceptable way of dealing with conflict will increase to 80% as indicated from the baseline and end of project surveys.

- 30% of domestic violence clients documented by Association Najdeh and recommended for counseling will utilize counseling services as recommended by the counselor.

It’s All in the Process!

Creating a causal pathway is a collaborative process. It is most useful to complete these steps with a group of experienced aid workers, including human resources, logistics, and finance staff, and the project participants or beneficiaries. One person should play the role of facilitator. Encourage a relaxed atmosphere that promotes brainstorming, creativity, and application of lessons learned. Then, using brightly colored markers and three sheets of flip chart paper on the wall, the group identifies the desired impact, effects, outputs, activities, and inputs. It may take several hours to refine a project pathway.

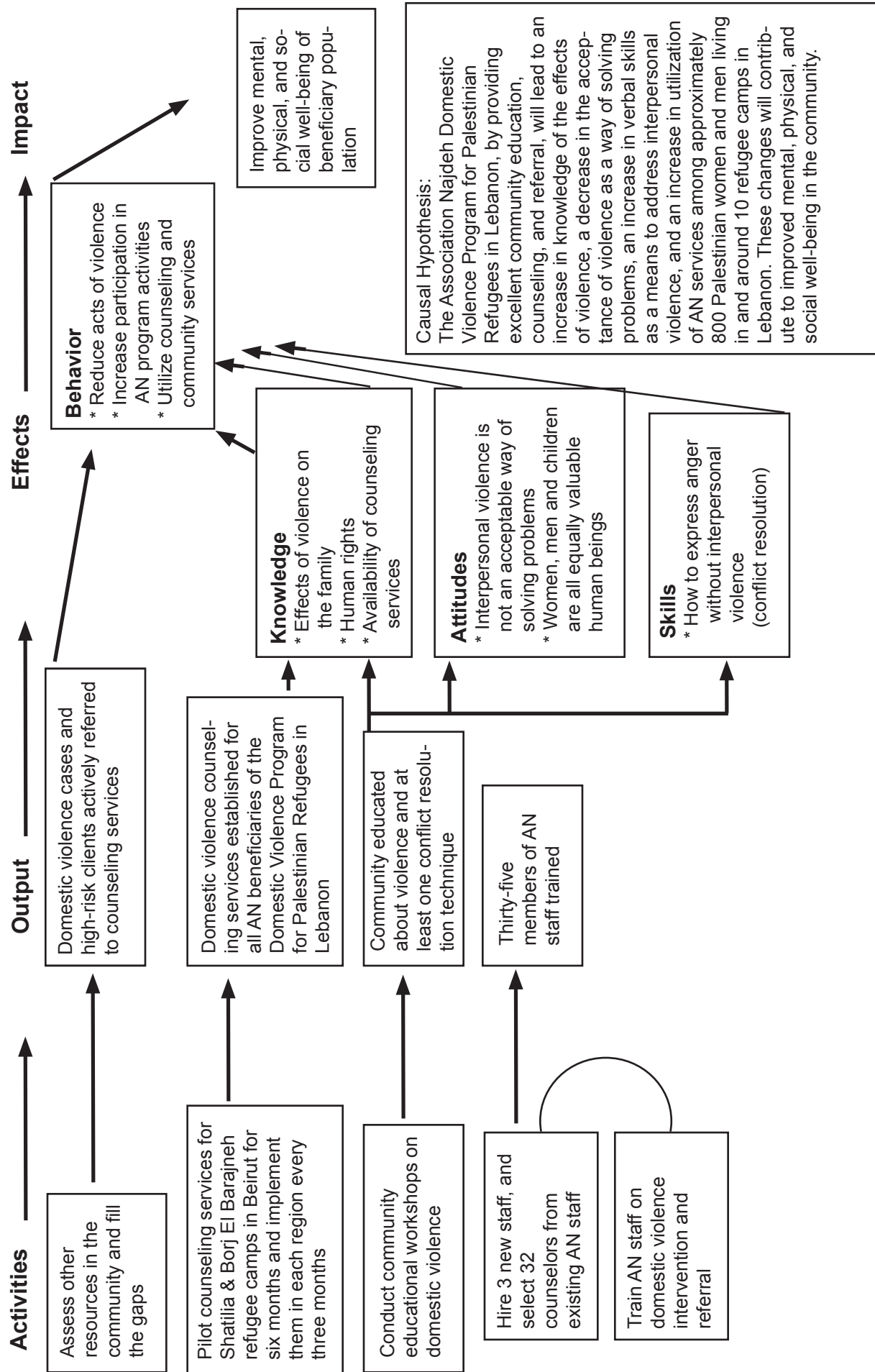
CAUSAL PATHWAY WORKSHEET

The Causal Pathway worksheet below is meant to serve as a guideline during your program design process.

NGO/DONOR INPUTS (human resources, finances, logistics, technical advisors, M&E, community participation, coordination committee)	↑																		
ACTIVITIES * (activities that make up the services or products)	↑																		
OUTPUTS * (the actual products and services produced/delivered)	↑	Services				Products						Education							
POPULATION EFFECTS (the expected and necessary changes needed in population knowledge, attitude, and behavior, their KAB)	↑	Knowledge				Attitude						Behavior							
POPULATION IMPACT (the expected health, social, or economic outcomes, including protection, security, and human dignity as a result of the combination of the products and services and changes in KAB)	↑																		

* Program planners often find it necessary to plan more than one set of activities and outputs.

Association Najdeh Domestic Violence Program for Palestinian Refugees in Lebanon Project Causal Pathway 2000-2003



These recommendations assist in identifying issues and strategies related to hiring GBV staff.

- Recruitment and selection of GBV staff is a HIGHLY visible activity.
- This is the first time the community is learning about you, the GBV program, and observing how you work.
- One of the most important factors affecting the success of GBV programs is the trust of the community. Recruiting and selecting staff is your first opportunity to demonstrate your integrity, fairness, transparency, and general trustworthiness.

Do ensure that all community members have access to recruitment information and that all community members have the opportunity to apply for the position.

Do involve the leaders in gathering applications and helping get the word out.

Do provide clear written information in flyers summarizing the job and the qualifications needed, and method for application (e.g., written C.V., cover letter), location for delivering application, and deadline for submitting applications – translated into the community's language(s).

Do use a variety of methods for active outreach to find qualified candidates – especially targeting areas where women go. Some examples:

- Post many flyers around the community: schools, NGO offices, market areas, community centers, churches/mosques, skills training centers, etc.
- Meet with leaders of the various groups and clubs in the camp, and give them copies of the flyer so they can inform their group.
- Give copies of the flyers to implementing partners and other national programs so they can inform their staff.

Do not rely solely on local leaders or community announcements to find qualified candidates.

Do be prepared to receive many applications.

Do use objective measures for first screening applications (check for qualifications).

Do use objective measures for second screening of applicants (written test).

Do select a few individuals to serve on an interview panel, such as highly respected local leaders or staff members from related projects, national supervisors of related NGOs.

Do consider representation for all ethnic groups/languages among staff.

Do use consistent methods for interviews (interview questions same for all interviewees).

Do ask a few community members you know and trust to give you confidential feedback about candidates – only community members will know who is respected and who is not.

Do not select anyone until you check with other community members you know and trust.

Do post a list of those you select – in several locations around the camp – and give a list to the leaders – so that everyone can know the results.

24. Adapted from Beth Vann, Global GBV Technical Advisor, RHRC, JSI Research and Training Institute, 2000-2003.

TITLE: Gender-based Violence (GBV) Program Coordinator

The GBV Program Coordinator manages and implements the GBV Program at field office and camp levels. The GBV Program is a multi-sectoral prevention and response program involving multiple organizations and actors from the refugee community, NGO and government implementing partners, UNHCR, other national and international organizations providing related services. The job duties include staff/volunteer management, training and sensitization, liaison and coordination with organizations working in the refugee setting, community mobilization with refugees, and overall program development, monitoring and evaluation. In the early phases of the program, the GBV Coordinator must work with technical resource people to develop a program implementation plan, tools, forms, formats, and guidelines for program development, implementation, and monitoring/evaluation. The GBV Program coordinator must have experience, comfort, and confidence in working with children and adults.

DUTIES AND RESPONSIBILITIES

Staff and Volunteers

1. Draft job description for refugee staff and volunteers.
2. Recruit, hire, and supervise refugee staff and volunteers.
3. Develop training curriculum in collaboration with identified training organizations.
4. Arrange for staff and volunteer orientation, training, and refresher courses.
5. Develop and implement strategies for volunteer retention and recognition.

Community Mobilization

6. Using participatory methods, engage refugee leaders and other refugee groups and individuals in active participation with all phases of program planning, development, and implementation.
7. Organize and facilitate monthly camp-level discussion and coordination meetings to build refugee capacity and strengthen community-based prevention and response to GBV.

Multi-sectoral and Inter-agency Program Development and Coordination

8. Establish close working relationships with NGOs, host government agencies, and UNHCR in the setting; meet regularly with individuals and groups from these organizations.
9. Organize and facilitate regular (monthly) coordination meetings with these organizations.
10. Lead the effort to develop a multi-sectoral and inter-agency prevention and response program to include referral and reporting mechanisms, information sharing, coordination, and monitoring/evaluation. Establish written guidelines and procedures.
11. Working closely with partner organizations and training resources, facilitate and organize training workshops for skills building, sensitization, and capacity building of staff for appropriate response to GBV. Includes: health center, police, refugee officers, community services, UNHCR, and others.

Monitoring and Evaluation

12. Conduct Situation Analysis of GBV in the setting, using participatory methods: collect data and information from multiple sources, including from among refugees, NGOs, host government, and UN agencies.
13. Revise GBV Incident Report Form as needed for the setting. Train partner organizations and other sectors in use of this form.
14. Maintain awareness of all GBV cases reported in the setting through immediate review of Incident Report Forms, regular meetings with field staff/volunteers.
15. As needed for difficult or complex cases, provide direct advocacy and assistance.
16. Collect, compile, and analyze GBV report data monthly.
17. Collect and compile program activity information, evaluating progress toward achievement of program outcomes.
18. Develop monthly report formats that capture relevant information and that support the analysis and evaluation of program progress.

25. Adapted from Beth Vann, Global GBV Technical Advisor, RHRC, JSI Research and Training Institute, 2000-2003.

Administrative and Miscellaneous Duties

19. Maintain awareness of budget and expenditures in order to manage program within budget.
20. Write monthly work plans, monthly reports, and other reports as needed or requested.
21. Assist in writing program proposals.
22. Arrange for comprehensive and progressive gender-awareness training workshops with all staff of this organization.
23. Other duties as required.

DESIRED QUALIFICATIONS:

1. University degree in social work or other social sciences, public health, community health, or related field.
2. Awareness and knowledge of gender and/or gender-based violence; prior training in gender.
3. Knowledge of reproductive health issues.
4. Knowledge, skill, and experience in participatory methods for community development and mobilization.
5. Group facilitation skills and experience.
6. Counseling skills and experience.
7. Training skills; at least one year training experience.
8. One year of experience in program management in NGO preferred.
9. Experience working with refugees preferred.
10. Belief in and commitment to gender equality.
11. Diplomacy and assertiveness; the ability to confront and discuss sensitive issues with respect and care.

TITLE: GBV Advocacy Counselor

SUPERVISOR: GBV Program Coordinator

DUTIES & RESPONSIBILITIES:

The GBV Advocacy Counselor is a camp-based position, working to establish community-based systems and raise community awareness to prevent gender-based violence and to respond to any incidents in a timely, compassionate, and caring manner. The GBV Advocacy Counselor works in close collaboration with camp-based women's organizations, camp leadership, and community groups.

1. Counseling and assistance to survivors of sexual and gender violence.
2. Cooperation and coordination with camp authorities, host country authorities, and health care workers.
3. Work closely with women's organizations to establish programs for women in the camp.
4. Establish an advisory group (men and women) and work closely with them on program activities.
5. Conduct community education and awareness-raising activities.
6. Coordinate with staff of other NGOs and organizations working in the camp.
7. Write reports and maintain confidential records as required by this agency.

DESIRED QUALIFICATIONS:

1. Refugee woman, resident in the refugee setting.
2. Must be respected by the community, proven trustworthy, and able to follow through with commitments.
3. Must be able to discuss sensitive subjects in an honest, open, effective, and respectful manner; in groups and with individuals.
4. Must possess interest and commitment to human rights and gender equality.
5. Must be fluent both in English and the language spoken by most refugees in the camp.
6. Prefer ability to read and write in English; if not, must be able to read and write in mother tongue.
7. Prefer high school diploma.
8. Prefer previous work or volunteer experience in community development, counseling, reproductive health, community services, or social services.

TITLE: GBV Animators/Community Trainers

DUTIES AND RESPONSIBILITIES:

1. Perform two roles:
 - Trainers, to raise awareness about human rights, gender issues, gender violence, etc.
 - Information-gatherers/problem-identifiers and facilitators for solving identified problems.
2. Work in refugee camps and towns hosting high numbers of refugees.
3. Offer and provide training and facilitation with refugees, NGOs, and UN organizations.
4. Generally assigned to regions, working in pairs: one man, one woman. Regional assignment is based on languages spoken.
5. Assess community needs in relation to gender violence using the techniques of Participatory Rapid Appraisal. Use PRA and adult education techniques to assist communities in developing community-driven prevention and response plans.
6. Conduct education and sensitization activities in the refugee sites and with NGOs and UNHCR – for multiple purposes:
 - raise awareness and promote changes in attitudes and behavior re: gender, gender equality, power/abuse of power, and GBV;
 - develop prevention strategies;
 - promote active community participation in prevention and response to GBV;
 - strengthen awareness of security/protection and gender issues for women and girls in NGO/UNHCR programs and services;
 - specifically target men and promote their involvement;
 - actively target youth/adolescents and promote their participation.
7. Target community education for different groups – men’s groups, women’s groups, refugee school teachers and PTAs, health educators and animators, adolescents, camp leaders, etc. Education will range from sensitization to specific gender violence topics to human rights, peace education, and conflict resolution.
8. Develop community education methods along with the community – may include workshops, drama, games, debates, poster contests, youth clubs, and other creative methods.
9. Monitor and evaluate community education, IEC (information, education, communication), awareness-raising, training, and other activities; revise strategies as needed based on results and outcomes.

DESIRED QUALIFICATIONS:

1. Prior training in at least one of the following: community development/ participation, PRA/RRA methods, Delta, community animation, social work, community health, public health.
2. Prefer at least one year of experience in community development or animation program using participatory methods.
3. Refugee.
4. Must possess interest and commitment to human rights and gender equality.
5. Must be fluent both in English and the primary refugee language, and at least one of the languages of ethnic groups (if they are different) in the refugee population.
6. Must be able to read and write in English.*
7. Prefer high school diploma.

* NOTE: This literacy requirement may make it difficult to recruit qualified women among refugee populations where the norm is to discourage girls from education. If this is the case, consider changing the program to accommodate illiterate staff. Using pictures and other visual aids, staff who do not read can indeed learn.

This screening tool can be used as a pre- and post-test for recruitment training to assist you in narrowing down a field of candidates. In addition, you may use it when you conduct community education to get a baseline idea of what people in the community know.

Note: Remember that you are not using this with a representative sample so you may not generalize the findings to the whole community. Using this tool during community education could help you to identify individuals who score well on the tool and who you may want to invite to come for an employment interview.

Please use the following scale to respond to each of the statements. Please check the appropriate box.

- a) I know nothing about this subject and I do not feel at all comfortable intervening in this situation.
- b) I have very little knowledge on this subject and I am reluctant to intervene in this situation.
- c) I have some knowledge on this subject and I feel somewhat able to intervene.
- d) I have basic knowledge on this subject and I feel able to intervene.
- e) I know a lot about this subject and I feel able and comfortable intervening.
- f) I am an expert on the subject and I feel very capable and comfortable intervening.

Level of knowledge, competence and/or comfort	a	b	c	d	e	f
I can distinguish between sexual violence and domestic violence						
I can define domestic violence and explain it to others						
I can give examples of physical forms of domestic violence						
I can give examples of psychological forms of domestic violence						
I can give examples of socio-economic forms of domestic violence						
I understand the cycle of violence and can explain it to others						
I can identify particular risk factors for domestic violence and can explain them to others						
I can identify particular risk factors for domestic violence in a refugee setting specifically and can explain them to others						
I can recognize a woman who has experienced or is experiencing domestic violence even if she does not tell me so directly, and feel able to assist her						
I can recognize a man who may have violent behaviors, and feel able to assist him						
I understand the basic principles of working with victims of domestic violence and feel able to help them						
I understand the impact of domestic violence on children and can explain this to others						
I can recognize children who may be witnesses to or survivors of domestic violence by their behavior						
I can define sexual violence and explain it to others						
I can give examples of sexual violence						
I can identify particular risk factors for sexual violence and can explain them to others						
I can identify particular risk factors for sexual violence in a refugee setting specifically and can explain them to others						
I can recognize a woman who has experienced or is experiencing sexual violence even if she does not tell me so directly, and feel able to assist her						
I am familiar with the consequences of sexual violence on victims and can explain them to others						
I am familiar with the consequences of sexual violence on perpetrators and can explain them to others						
I understand the basic principles of intervening with a victim of sexual violence and feel able to help her						
I can name several awareness-raising strategies in my community and feel able to employ them						
I feel able to plan and lead an awareness-raising session in my community						

26. Adapted from Maria Caterina Ciampi, SGBV Technical Advisor, in collaboration with SGBV Program Manager Jean-Pepin Pouckoua and SGBV Assistant Manager Morel Kiboukioulou, International Rescue Committee, Republic of Congo, 2001.

I can recognize symptoms of post-traumatic stress in individuals and feel able to assist them							
I can name several communication techniques to use with victims of violence and can employ them in the context of an interview							
I understand the importance of respecting confidentiality							
I am familiar with several strategies to use with members of my community to avoid breaching confidentiality							
I can name several personal resources or strategies I can draw on to keep a sense of balance between my personal life and my work							
I understand the importance of using a guide to <i>Rights and Responsibilities of GBV Program Beneficiaries and GBV Staff</i> in a program addressing issues of Gender-based Violence Prevention							
I understand the importance of following a Code of Conduct and commit myself to it							
I recognize which Program documents I need for the interventions I make and know how to use them							
I know how to draw a map of my community							
I know how to collect information on sexual violence and domestic abuse in my community							

COMMENTS: _____

This Pre-hiring Interview Guide gives the employer a chance to evaluate GBV knowledge of potential employees and as such can serve as a useful tool in making hiring decisions.

This interview aims to test your knowledge on issues of sexual and domestic violence. Please answer sincerely, as your answers will help us evaluate you. We wish you the best of luck. (Read information below to applicant and fill in accordingly.)

Family Name: _____ **First Name:** _____

Sex: F M

Date and place of birth: _____

Civil Status: Married Divorced Single Widowed

Profession/Occupation: _____

Nationality: _____

Present Residence: _____

Desired Position: Community Educator Community Counselor

Date: _____

Preliminary Questions (*Read aloud.*)

1. Can you introduce yourself?
2. Describe your activities in the last year.
3. For what reason(s) have you applied for this job?
4. What qualities do you possess that will allow you to successfully execute the tasks related to the position?
5. What are your weak points?
6. How would you organize information sessions in your community?
7. What is, in your opinion, gender-based violence?
8. How would you approach and deal with (intervene with) a woman who experienced gender-based violence?
9. How would you approach and deal with (intervene with) a male perpetrator of gender-based violence?

27. Adapted from Maria Caterina Ciampi, SGBV Technical Advisor, in collaboration with SGBV Program Manager Jean-Pepin Pouckoua and SGBV Assistant Manager Morel Kiboukiyoulou, International Rescue Committee, Republic of Congo, 2001.

Scenarios (Read aloud. Do not comment on applicant's response during the interview.)

For Prospective Community Counselors:

1. A woman consults you after being raped. The next day, the camp/village leader or chief calls you into his office and asks you for information about the woman. How will you answer him?
2. A man comes to see you and accuses you of having advised his wife to leave him. He wants to know where she is. What do you do?
3. A Community Educator sees you are busy with a case, but does not know the details of the situation. After you have finished dealing with the case, he asks you what happened. How will you answer him?

For Prospective Community Counselors and Educators:

4. A man confides in you, stating that he wants to kill his wife. What is your reaction?

For Prospective Community Educators:

5. A woman comes to see you and reveals that she was raped the night before. What do you do?
6. You have planned an information session on the sexual harassment of students in school and a Community Counselor asks you to modify your program. She wants to address, rather, the notion that victims of rape need compassion. What do you do?
7. During an information session, a community member interrupts the activity and says, "There are no problems of domestic abuse in our community. It is only since you have been here with your program that women are starting to complain. You want them to leave their families. You are disturbing us. Get out of here!" What is your reaction?

Close the interview by thanking the candidate for his/her time and let him/her know when he/she should hope to hear from you about the position.

RIGHTS AND RESPONSIBILITIES OF GBV PROGRAM BENEFICIARIES AND EMPLOYEES²⁸

Introduction

GBV staff members must hold themselves to the highest standards of professionalism in order to gain the trust of the community, and community members should be able to expect a standard of care that is commensurate with that level of professionalism.

Although the Rights and Responsibilities of GBV Program Beneficiaries and GBV Staff are imperative for GBV programs, they are also relevant to all humanitarian aid programs. GBV programs should provide a model to all other programs in utilizing these rights and responsibilities. The aim of Rights and Responsibilities of GBV Program Beneficiaries and Employees is to:

- Protect the beneficiaries of the program and the public in general.
- Establish expectations so that staff can manage, assess, and improve their own work.
- Establish standards against which deliveries of services can be evaluated.
- Regulate the behavior of staff members to improve the quality of their work, and enhance their credibility and integrity.

Managers of GBV Programs should remit a copy of Rights and Responsibilities of GBV Program Beneficiaries and Employees to each program employee involved in carrying out activities against sexual and domestic violence, as well as collaborators and beneficiaries who request it.

Rights and Responsibilities of the Beneficiaries:

The term “beneficiary” refers to a person who has experienced sexual or domestic violence, and/or his or her family, or community members who make a request for services, information, orientation, referrals, or psychosocial follow-up in the GBV program. This term is interchangeable with “client,” “service user,” “victim,” or “survivor of violence.”

Rights of Beneficiaries:

- Beneficiaries have a right to receive quality services.
- Beneficiaries have a right to receive services in their mother tongue, and the Program commits to addressing beneficiaries in a language they understand.
- Beneficiaries have a right to participate in the planning of the services they request.
- Beneficiaries have a right to be accompanied by a person of their choice when they receive information, undertake an action under the program, or obtain other services.
- Beneficiaries have a right to expect confidentiality in their communications with Program staff, unless this jeopardizes their lives and the lives of others. Issues of confidentiality with children under the age of 18 will be based on their capacity to give informed consent.
- Beneficiaries have a right to lodge a complaint against an employee if a mistake was made in their case.
- Beneficiaries have the right, in every situation, to be treated with courtesy, equality, and understanding.
- Beneficiaries have the right, in their dealing with the GBV Program Staff, to relationships exempt from sexual harassment or any discrimination or pressure aimed at obtaining favors in exchange for services.

28. Adapted from Maria Caterina Ciampi, SGBV Technical Advisor, in collaboration with SGBV Program Manager Jean-Pepin Pouckoua and SGBV Assistant Manager Morel Kiboukiyoulou, International Rescue Committee, Republic of Congo, 2001.

Responsibilities of Employees:

“Program staff” refers to any person who is employed or a volunteer in the context of the GBV Program, be it a program manager, assistant manager, community educator, or community counselor, and carries out activities against sexual and domestic violence.

All persons working in the GBV Program must:

- Represent the GBV Program with honor and integrity in his/her contact with the beneficiaries.
- Provide beneficiaries with services that are humane and characterized by empathy, courtesy, respect, and understanding.
- Help beneficiaries express their needs and adjust intervention plans to meet their specific needs.
- Answer beneficiaries’ questions and offer necessary information to help them understand and appreciate services rendered.
- Exercise absolute discretion and confidentiality in dealing with information obtained in the line of duty. Abstain from having conversations about the beneficiaries and do not reveal to anyone that an individual approached them with a request for services, unless the situation requires it.
- Take all the precautions necessary to respect the privacy of the beneficiaries if they have to provide any form of intimate care.
- Address the beneficiaries according to the usual norms, corresponding to the habits or traditions of the individual.
- Establish and maintain relationships with beneficiaries on a professional basis.
- Advise beneficiaries of conflict of interest that may come up.
- Do not solicit or accept tips, or additional money or gifts or favors from beneficiaries.
- Collaborate with all persons the client chooses to involve in the program aiming first and foremost for the betterment of the beneficiaries’ condition.

Introduction

Humanitarian agencies have a duty of care to beneficiaries and a responsibility to ensure that beneficiaries are treated with dignity and respect and that certain minimum standards of behavior are observed. In order to prevent sexual exploitation and abuse, the following core principles must be incorporated into humanitarian agency codes of conduct:²⁹

- Sexual exploitation and abuse by humanitarian workers constitute acts of gross misconduct and are therefore grounds for termination of employment.
- Sexual activity with children (persons under the age of 18) is prohibited regardless of the age of majority or age of consent locally. Mistaken belief in the age of a child is not a defense.
- Exchange of money, employment, goods, or services for sex, including sexual favors or other forms of humiliating, degrading, or exploitative behavior is prohibited. This includes exchange of assistance that is due to beneficiaries.
- Sexual relationships between humanitarian workers and beneficiaries are strongly discouraged since they are based on inherently unequal power dynamics. Such relationships undermine the credibility and integrity of humanitarian aid work.
- Where a humanitarian worker develops concerns or suspicions regarding sexual abuse or exploitation by a fellow worker, whether in the same agency or not, s/he must report such concerns via established agency reporting mechanisms.
- Humanitarian workers are obliged to create and maintain an environment which prevents sexual exploitation and abuse and promotes the implementation of their code of conduct. Managers at all levels have particular responsibilities to support and develop systems which maintain this environment.

To ensure the maximum effectiveness of the Code of Conduct, each GBV program director is required to post the Code of Conduct in clear view in the public areas of their offices. Examples of such areas include waiting areas and lobbies of field offices, NGO-run schools, and health clinics. In addition, the Code of Conduct is to be given to all employees and each employee shall be asked to acknowledge his or her receipt in writing. Please retain the originals of all acknowledgements in the appropriate employee files. All posted and distributed copies of the Code of Conduct should be translated into the appropriate language of use for the field area.

The sample **Code of Conduct**³⁰ (see next page) may be modified to make it more effective or understandable in a particular culture or country. The Code must not, however, be modified in such a way as to weaken its effectiveness or diminish any of the core principles.

29. Excerpted from the Inter-Agency Standing Committee Task Force Recommendations on Protection from Sexual Exploitation and Abuse in Humanitarian Crises. 2002

30. Adapted from the International Rescue Committee Code of Conduct on Sexual Exploitation and Abuse in Humanitarian Crises, 2003.

To: All staff

From: President or Director of Humanitarian NGO

Re: Code of Conduct for all Staff

In accordance with the mission and practice of [YOUR ORGANIZATION] and principles of international law and codes of conduct, all [YOUR ORGANIZATION] humanitarian staff, including both international and national, regular full- and part-time staff, interns, contractors, and volunteers, are responsible for promoting respect for fundamental human rights, social justice, human dignity, and respect for the equal rights of men, women, and children. While respecting the dignity and worth of every individual, the [YOUR ORGANIZATION] humanitarian worker will treat all persons equally without distinction whatsoever of race, gender, religion, color, national or ethnic origin, language, marital status, sexual orientation, age, socio-economic status, disability, political conviction, or any other distinguishing feature.

[YOUR ORGANIZATION] humanitarian workers recognize that certain international standards of behavior must be upheld and that they take precedence over local and national cultural practices. While respecting and adhering to these broader frameworks of behavior, [YOUR ORGANIZATION] specifically requires that [YOUR ORGANIZATION] humanitarian workers adhere to the following Code of Conduct.

Commitment to [YOUR ORGANIZATION] Code of Conduct

- (1) A [YOUR ORGANIZATION] humanitarian worker will always treat all persons with respect and courtesy in accordance with applicable international and national conventions and standards of behavior.
- (2) A [YOUR ORGANIZATION] humanitarian worker will never commit any act that could result in physical, sexual, or psychological harm to the beneficiaries we serve.
- (3) A [YOUR ORGANIZATION] humanitarian worker will not condone or participate in corrupt activities or illegal activities.
- (4) [YOUR ORGANIZATION] and [YOUR ORGANIZATION] humanitarian workers recognize the inherent unequal power dynamic and the resulting potential for exploitation inherent in humanitarian aid work, and that such exploitation undermines the credibility of humanitarian work and severely damages victims of these exploitative acts and their families and communities. For this reason, [YOUR ORGANIZATION] humanitarian workers are prohibited from engaging in sexual relationships with beneficiaries.* Sexual activity with children (persons under the age of 18) is strictly prohibited.
- (5) A [YOUR ORGANIZATION] humanitarian worker must never abuse his or her power or position in the delivery of humanitarian assistance, neither through withholding assistance nor by giving preferential treatment including requests/ demands for sexual favors or acts.
- (6) It is expected of all [YOUR ORGANIZATION] humanitarian workers to uphold the highest ethical standard of integrity, accountability and transparency in the delivery of goods and services while executing the responsibilities of their position.
- (7) A [YOUR ORGANIZATION] humanitarian worker has the responsibility to report any known or suspected cases of alleged misconduct against beneficiaries to senior management (as outlined in the reporting pathway) immediately. Strict confidentiality must be maintained to protect all individuals involved.

*NOTE: Different considerations will arise regarding the enforcement of some of these principals for humanitarian workers hired from the beneficiary community. While sexual exploitation and abuse and the misuse of humanitarian assistance will always be prohibited, discretion may be used in the application of the principles regarding sexual relationship for this category of humanitarian worker.

I, the undersigned, hereby declare that I have read and understand this Code of Conduct. I commit myself to exercise my duties as an employee of the Gender-based Violence Program in accordance with the Code of Conduct. I understand that if I do not conform to the Code of Conduct, I may face disciplinary sanctions.

Name: _____

Function: _____

Signature: _____

Date: _____

Manager's Name: _____

Signature: _____

Date: _____

Health protocols and tools

The American College of Obstetricians and Gynecologists. *Female circumcision / female genital mutilation: clinical management of circumcised women*. Washington, DC: American College of Obstetricians and Gynecologists; 1999. To order this publication, contact: The American College of Obstetricians and Gynecologists, Women's Health Care Physicians, 409 12th St., SW, P.O. Box 96920, Washington, DC 20090-6920.

American Medical Association. *Strategies for the treatment and prevention of sexual assault*. Chicago, IL: American Medical Association; 1995. Order information available on AMA website: www.ama-assn.org/ama/pub/category/3548.html

Burns AA, Lovich R, Maxwell J, Shapiro K. *Where women have no doctor: a health guide for women*. Berkeley, CA: Hesperian Foundation; 1997. Order form can be found at: www.hesperian.org/hesporadr.htm. The book costs US\$20 + shipping and tax.

Castle MA, Coeytaux F. *A clinician's guide to providing emergency contraceptive pills*. Los Angeles, CA: Pacific Institute; 2000. Available online: www.piwh.org/publications.html

International Planned Parenthood Federation Western Hemisphere Region. *Tools for service providers working with victims of gender-based violence*. New York, NY: International Planned Parenthood Federation Western Hemisphere Region; 2000. Available online: www.ippfwhr.org/whatwedo/bastatools.html Available in English and Spanish

Kelley N. *Working with refugee women: a practical guide*. Geneva, Switzerland: International NGO Working Group on Refugee Women; 1989.

Leye E, Githaniga A, Temmerman M. *Health care strategies for combating violence against women in developing countries*. Ghent, Belgium: International Center for Reproductive Health; 1999.

Nduna S, Rude D. *A safe space created by and for women*. New York, NY: IRC; 1998. Available online: <http://www.theirc.org/resources/index.cfm>

UNHCR. *How to guide: sexual and gender violence programme in Guinea*. Geneva, Switzerland: UNHCR; 2001. Available online at www.rhrc.org/resources. Look under GBV category.

UNHCR. *How to guide: sexual and gender violence programme in Liberia*. Geneva, Switzerland: UNHCR; 2001.

World Health Organization (WHO). *Clinical management of rape survivors*. Geneva, Switzerland: WHO; 2001. Available online: www.rhrc.org/resources Look under GBV Category

World Health Organization (WHO). *Emergency contraception: a guide to the provision of services*. Geneva, Switzerland: WHO; 1998. Available online: www.who.int/reproductivehealth/publications/FPP_98_19/FPP_98_19_table_of_contents_en.html In English, French, and Spanish.

Training

Moreno A, Grodin MA. *Caring for refugees and survivors of torture*. Boston, MA: Boston Center for Refugee Health and Human Rights, Boston Medical Center, Boston University Schools of Public Health and Medicine [serial online] 2000. Available from: URL: dcc2.bumc.bu.edu/refugees

Osattin A, Short LM. *Intimate partner violence and sexual assault: a guide to training materials and programs for health care providers*. Atlanta, GA: CDC; 1998. Available online: www.cdc.gov/ncipc/pub-res/pdf/newguide.pdf

United Nations Population Fund (UNFPA). *A practical approach to gender-based violence: A programme guide for health care providers and managers*. New York. 2001. www.unfpa.org/publications/gender.pdf