

## PRECAUTION MEASURES IN GBV CASE MANAGEMENT during COVID-19 pandemic outbreak

GBV case management is one of the entry points to life saving health and mental health support to GBV survivors. During pandemic outbreaks, the increased tensions in the household might heightened the risk of intimate partner, and other form of domestic violence, hence survivors will still need to receive case management, and ABAAD will continue to offer this service to survivors while ensuring protective measures to both survivors and staff. GBV case management is founded around the survivor-centered approach which aims to create a supportive environment in which each survivor's rights are respected and in which the person is treated with dignity and respect.

The survivor-centered approach is put in place through a set of principles that guide the work of all helpers in all their interactions with people who have experienced GBV.

- The principles are:
- Right to safety
  - Right to confidentiality
  - Right to dignity and self determination
  - Non-discrimination



The relationship between the caseworker and the survivor is integral to helping the survivor achieve her or his goals. Each interaction between the case worker and the GBV survivor should be in line with the survivor-centered approach, regardless of the exceptional circumstances caused by the pandemic outbreak. While ensuring high safety precautions as listed below, case workers are expected to continue to offer non-judgmental and empathetic care to survivors and to prioritize the wishes and wellbeing of survivors. The case worker need to avoid any behavior that might perceived as "lack of trust, or acceptance" to the survivor.

### PRACTICAL MEASURES TO TAKE DURING THE GBV CASE MANAGEMENT SESSIONS INCLUDE THE FOLLOWING:

#### THE GOLDEN RULES REMAIN

##### Wash your hands frequently

Regularly and thoroughly clean your hands with an alcohol-based hand rub or wash them with soap and water for at least 40-60 seconds.

##### Avoid touching eyes, nose and mouth

Hands touch many surfaces and can pick up viruses. Once contaminated, hands can transfer the virus to your eyes, nose, or mouth.

##### Maintain social distancing

Maintain at least 1.5-2 meters distance between yourself and the right holder, **Note:** Sensitively communicate with the right holder why you need to maintain the distance.

During the epidemic outbreak, prioritize scheduling sessions with survivors at high risk of GBV and those requiring immediate support only, while re-scheduling follow up sessions where survivors' situation is stabilized and they don't have the need for immediate care.

#### High-risk cases include:

- Life threatening situation/ threats of
- Rape and sexual assault survivors
- Human trafficking survivors
- Survivors with mental health disorders/ especially those who are at risk of suicide
- Children at risk
- Survivors of extreme physical abuse

- Survivors in need of CMR/ forensic doctors.
- First encounter for the admission at the emergency temporary safe sheltering service.

**FOLLOW UP ON PHONE** (phone counseling) is necessary during such situations to compensate for the limitation of face-to-face encounter.

Always **respect the wishes** of the survivors before re-scheduling sessions and make sure to receive survivors' verbal consent before making such decisions. Survivors should have a say concerning accepting one on one sessions, since they can be, not comfortable doing so due to self-health concerns. Consent around these sessions should be granted at all time.

#### BEFORE THE CASE MANAGEMENT SESSION:

- Sterilize/sanitize the room before receiving the survivor (chair/desk/door handle/ pen/etc...);
- Place the chairs in a way to keep at least 1.5m between the case worker and the survivor;
- Place the hand gel in an accessible place to both;
- Make sure to aerate the room before, during, and after the session, as possible.
- Avoid, if possible, having a desk or table that case worker and survivor can lean on or have contact with;
- Remove all the unnecessary objects from the surface of the desk;

#### DURING THE CASE MANAGEMENT SESSION:

- The case worker should be the one opening the door to the survivor;
- Avoid handshaking or any other form of physical contact (greeting, physical contact to show empathy with a distressed survivor and other circumstances)
- Keep a distance of 1.5 to 2 meters between the case worker and the survivor;
- Make sure for the case worker to wash hands with soap and water for at least 40-60 seconds before and after the session
- Offer the survivor uses alcohol-based hand gel before and after the session. Note: Hand washing and hand gel use are not both required, you can do either or.
- Ask about how COVID-19 has impacted them. Ask about their children, their livelihoods, etc.
- Normalize distress and listen attentively
- Talk positively and emphasize the effectiveness of prevention and treatment measures
- Provide survivors with children positive discipline, educational and recreational tools to support their children
- Help survivors with children to engage with their children on the mental health aspect of COVID-19
- Support living areas and WGSS with adequate WASH services for COVID-19 in line with the guiding document on home-isolation and overcrowded setting and guidelines by MoPH
- Avoid handing documents from Case Worker to survivor (leaflets, brochures, action plan, safety plan etc.);
- Avoid receiving documents from the survivor unless it's necessary, and ask the survivor to leave the documents on the desk

#### AFTER CASE MANAGEMENT THE SESSION:

- Re-sterilize/sanitize the counseling room including the door handles/chairs/desk/ etc.
- Make sure to wash hands after handling the documents after the session;
- Arrange the new handled documents/sheets in a plastic file cover and place it in a separated drawer in the iron cabinet (keep this drawer only for new forms).



#### MASKS AND GLOVES USAGE:

To avoid creating any barrier between the case worker and the survivors, it is required to use masks and gloves (by both Case Worker & survivor) **ONLY IN CASE** the caseworker or the right holder are contracting any sneezing, cough or any other susceptible symptom.

**Ensure to explain the prevention aspect behind this practice.** Healthy individuals do not need to wear masks. In fact, Studies have shown that masks do not protect healthy individuals from contracting viruses. In some cases, when used more than once or for prolonged periods and when discarded inappropriately, they can present more harm than protection.

#### CHILDREN:

- It's highly recommended to avoid having children in the safe spaces, in case this is not possible, children should wear masks, and not enter the counseling rooms
  - Hand gel should be provided multiple times to the child, by WGSS staff

**NB: SINCE SHOWING EMPATHY IS NECESSARY; INSTEAD YOU CAN CONVEY IT THROUGH YOUR BODY LANGUAGE, TONE OF VOICE AND HEALING STATEMENTS INCLUDING FACIAL EXPRESSION, NODDING, AND SOME STATEMENT (I.E: IT MUST BE DIFFICULT, IT'S PAINFUL, THAT'S REALLY SAD).**

#### 5 STEPS TO COPE WITH THE STRESS LINKED TO COVID-19

1. Decrease the time you spend on news or social media and seek information only from reliable sources. Check @mophleb @wholeb @UNICEFLebanon.
2. Set a daily routine that includes activities that you enjoy or find relaxing (such as reading, praying, family games, slow breathing, connecting with friends through phone...)
3. Talk to trusted others about any distressing thoughts or feelings you might have.
4. Maintain a healthy diet, proper sleep and regular physical activity. Even walking 15-30 minutes daily at home can make a difference.
5. Don't resort to smoking, drinking alcohol or using other substances to deal with the stress because it doesn't work and harms you on the long-term

#### LET'S BE KIND, TOGETHER WE CAN FIGHT COVID-19

1. Check-in regularly with those in hospital or home quarantine and their families through calling and texting. Show solidarity and encourage them to do enjoyable activities.
2. Listen attentively when people are sharing their concerns.
3. Provide calm and correct advice to people who may lack access to information (like older adults). Share key factual messages from @mophleb @wholeb @UNICEFLebanon.
4. Avoid stigmatizing language, such as attributing the illness to a person's country of origin, living area, religion, profession, etc.
5. Speak up against harmful practices such as discrimination against affected persons. Protect their privacy and don't disclose personal information.

