

GENDER-BASED VIOLENCE (GBV)

Gender-based violence occurs as a result of the normative role expectations associated with each gender, along with the unequal power relationships between genders, within the context of a specific society. Domestic violence, marital rape, dowry-related violence, child marriage, polygamy, female infanticide, witchcraft accusations, Chhaupadi, and trafficking of women and girls for sexual exploitation are common GBV issues in Nepal.

Survivors of violence can experience both physical and psychological distress. They may suffer sexual and reproductive health consequences, including forced and unwanted pregnancies, unsafe abortions, traumatic fistula, sexually transmitted infections including HIV, and even death.



9%

of 900 women surveyed were aware rape within marriage is illegal¹



27%

of women had experienced physical violence¹



15%

of women had experienced sexual violence some time in their lives¹



61%

of women who had experienced violence had never told anyone about it¹



25%

of women were aware of services available to survivors of GBV¹



41%

of 20-24 year old women were married by the age of 18²



13%

of 900 women surveyed were aware of specific laws against domestic violence¹



48%

of women reported that they had experienced violence at some time in their lives¹



Delivering a world where every pregnancy is wanted, every birth is safe, and every young person's potential is fulfilled.

GBV in Nepal: UNFPA Response

Supporting clinical protocol on the management of GBV

Developed in 2015 by the Ministry of Health and Population with UNFPA and JPHIEGO's technical and financial support and endorsed by the cabinet, the protocol aims to ensure comprehensive knowledge among health service providers to provide quality care and response to GBV survivors. The accompanying training package empowers health care providers to identify GBV cases, conduct a clinical assessment of the survivor, provide psycho-social first aid, collect evidence and refer the survivors to adequate structures, such as Women Service Centers, also called safe houses.

Supporting health response to GBV

UNFPA together with government partners, supports the establishment and strengthening of One Stop Crisis Management Centres (OCMCs) at district hospitals to provide coordinated and free services to GBV survivors through health treatment and care, as well as referral to legal services, protection and shelter. UNFPA also works together with the GoN to establish and strengthen Women's Service Centres ("safe houses") in several districts; the centres provide temporary shelter for survivors as well as food, clothes and protection. The safe houses are directly linked with the OCMCs for referral to a range of other services to ensure that the needs of GBV survivors are met.

Preventing harmful practices including child, early and forced marriages

UNFPA works to prevent early marriage by working at all levels: at community level to empower adolescent girls with life skills training and support, as well as with parents, community and influential members to create an enabling local environment. At policy level it aims to address legislative and policy gaps and build the evidence base on early marriage. UNFPA also works to ensure that girls who are already married can receive family planning support to prevent early pregnancy, which can have serious health implications.

Earthquake Emergency Response

In times of upheaval or natural disasters, women and girls without protection are at extra risk of gender-based violence, unwanted pregnancies, trafficking and child marriage. UNFPA supported the following interventions following the 2015 earthquake to prevent and respond to GBV:

Female-Friendly Spaces (FFS) in 14 districts, as a place where women and adolescent girls could go to at any time to feel safe and empowered and have access to information, education, recreational activities, support and services, including on reproductive health, legal rights, childcare and prevention/response to GBV, and get the appropriate referrals.

Dignity Kits, distributed to address women's urgent need to access culturally-appropriate clothing hygiene item and a torch, without which women would be more vulnerable after losing their belongings and houses.

Post Rape treatment kits were also distributed to all 14 most affected districts to ensure the availability of emergency and prophylaxis medicine at district hospitals and/or OCMCs.

Extensive **training on GBV including Clinical Management Rape** was carried out to health service providers.



UNFPA — Because everyone counts.

Sources:

1. A study on gender-based violence conducted in selected rural districts of Nepal, Government of Nepal 2012
2. Nepal Demographic Health Survey 2011