A screening tool for GBV among internally displaced populations: improving access to GBV services and HIV testing and care in Colombia

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GBV among displaced populations

- **Ongoing conflict in Colombia**, since 1960’s → 5.7 mil IDPs

- **UN Definition of GBV**: “any harmful act that is perpetrated against a person’s will, and that is based on socially ascribed (gender) differences between males and female”
  - Includes acts of sexual coercion, sexual physical, psychological, and reproductive violence including forced pregnancy, sterilization, abortion

- IPV well-documented in Colombian population and LAC

- IDPs particularly vulnerable to GBV due to family disruption, loss of protective structures, slow response by justice system
  - May be perpetrated across different periods of displacement
Screening tool and the referral pathway

Increased number in referral by screening of population

- Population of GBV survivors
- Population who self-report
- Refugee / displaced population

Entry to referral system and incident report form

- Psychosocial
- Health (inc. EC, RH, HTC, PEP)
- Protection
Objectives of the Tool

• Collaboration with UNHCR & Ministry of Social Protection to develop screening for Colombian IDPs

• **Primary**: Routine, confidential use of a screening tool to identify unreported GBV and offer referral to GBV services

• **Secondary**: to increase awareness of GBV and GBV-specific services
  – Routine discussion can begin to change norms
Phases of Research

1. Formative: Guaviare & Quibdo

2. Validation: Guaviare

3. Generalizability: Mocoa
Development – Formative Research

• San Jose de Guaviare and Quibdo, June 2012
  – Qualitative interviews with 25 survivors who had/were receiving services
  – 6 focus groups discussions and 4 interviews with service providers (n=31 participants)

• To determine breadth of violence
• Acceptability of screening, types of questions to ask, appropriate wording
• Understand barriers to reporting
• Assess needs of service providers to identify GBV
Formative Research: Results from Quibdo and San Jose de Guaviare

• Participants revealed *multiple and diverse GBV* and contexts

• **Emerging themes:**
  - *In conflict-affected area*: threats of violence, forced labor, early marriage / child kidnapping or coercion, rape, physical violence, sexual humiliation; typically perpetrated by armed groups
  
  - *In host community*: physical violence, sexual violence, kidnapping/drugging for rape perpetration; typically strangers
  
  - *Across settings*: physical violence, forced sex, forced pregnancy, forced abortion, isolation, threats of violence, trafficking; inter-generational violence; typically family members, partners,

• **Barriers to reporting/services**: low awareness of services; little trust/confidence in services; delay between institutions; feared breach of confidentiality -> further violence

  - For IPV, fear of disrupting family, losing financial support
Draft tool

• Adapted current tool from formative, qualitative research
• Brief set of direct questions about recent GBV
• Begins with information about GBV and consent

1. Threats of violence
2. Physical violence
3. Rape /sexual violence
4. Sexual coercion
5. Forced pregnancy
6. Forced abortion
7. Forced marriage

• Perpetrator and locations
• Supplementary: History of reporting, History of service
Validation Phase

• San Jose de Guaviare, October 2012
  – Tested among 19 self-identified survivors of GBV and 50 women from general IDP population

• Validity tests:
  – Compared to other violence and trauma screening tools used in non-conflict/displaced settings
  – Compared results of those previously self-reported to those who screened positive
# Validation Phase: Experiences of GBV

<table>
<thead>
<tr>
<th>ASIST-GBV type (last 12 mo.)</th>
<th>Self-reported Survivor (n=19)*</th>
<th>General IDP (n=50)</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n (%)</td>
<td>n (%)</td>
<td>n (%)</td>
</tr>
<tr>
<td>Threatened with phys./sexual violence</td>
<td>7 (36.84)</td>
<td>11 (22.00)</td>
<td>18 (26.09)</td>
</tr>
<tr>
<td>Physical violence</td>
<td>5 (26.32)</td>
<td>8 (16.00)</td>
<td>13 (18.84)</td>
</tr>
<tr>
<td>Forced sex</td>
<td>4 (21.05)</td>
<td>5 (10.00)</td>
<td>9 (13.04)</td>
</tr>
<tr>
<td>Sexual coercion for survival/protection</td>
<td>2 (10.52)</td>
<td>5 (10.00)</td>
<td>7 (10.14)</td>
</tr>
<tr>
<td>Forced pregnancy</td>
<td>1 (5.26)</td>
<td>1 (2.00)</td>
<td>2 (2.90)</td>
</tr>
<tr>
<td>Forced abortion</td>
<td>0 (0.00)</td>
<td>1 (2.00)</td>
<td>1 (1.45)</td>
</tr>
<tr>
<td>Forced marriage</td>
<td>2 (10.52)</td>
<td>0 (0.00)</td>
<td>2 (2.90)</td>
</tr>
<tr>
<td><strong>Screened positive for GBV (i.e. &gt;1 one of the GBV)</strong></td>
<td><strong>11 (57.89)</strong></td>
<td><strong>20 (40.00)</strong></td>
<td><strong>31 (44.93)</strong></td>
</tr>
</tbody>
</table>

* Self-reported survivors were participants who were enrolled from partner organizations, were known to have experienced GBV within lifetime
Validation Phase Results, Guaviare – Reporting and Service use

- **HIV testing coverage**: half of all participants, including those GBV positive
  - Much lower (20%) for those who without children
  - Median time since last HIV test: 2 years (range: <1-12)
Validation Results – GBV Summary

• 45% of all screened positive for GBV (last 12mo)
  – 19% reported physical, 13% sexual violence
• Only 36% had ever reported GBV; 15% in last yr.
• Tool identifies those who had never reported GBV
• Allows for identification of perpetrators and location to assess current risk / ongoing violence:
  – Partner/ex-partner, husband/ex-husband
Generalizability Phase

- Mocoa (February – May 2013)
- 3 mo. test of screening tool in routine setting
- **Objective:** Determine the utility and feasibility of the screening tool for integration into health services
  - Implemented in Hospital José María Hernández
  - **Participants:** female patients ≥ 18yrs attending clinic/program and providing consent
  - Two trained nurses offered screening
# Generalizability Phase, Mocoa: GBV results

<table>
<thead>
<tr>
<th>ASIST-GBV Type (last 12 mo)</th>
<th>Total (n=506)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n (%)</td>
</tr>
<tr>
<td>Threatened with phys./sexual violence</td>
<td>210 (41.50)</td>
</tr>
<tr>
<td>Physical violence</td>
<td>119 (23.52)</td>
</tr>
<tr>
<td>Rape /Sexual violence</td>
<td>182 (35.97)</td>
</tr>
<tr>
<td>Sexual coercion</td>
<td>102 (20.20)</td>
</tr>
<tr>
<td>Forced pregnancy</td>
<td>10 (1.98)</td>
</tr>
<tr>
<td>Forced abortion</td>
<td>8 (1.59)</td>
</tr>
<tr>
<td>Forced marriage</td>
<td>21 (4.17)</td>
</tr>
<tr>
<td><strong>Screened positive for GBV (i.e. experienced ≥1 of the above GBV)</strong></td>
<td><strong>319 (63.42)</strong></td>
</tr>
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</table>
Generalizability Phase: History of reporting and service use

- **HIV testing coverage**: Lower (17%) for those without children
  - Median time since last HIV test: 4 years (range: <1-14)
Summary of research and development

• ASIST-GBV screening tool developed through evidence-based approach
• Validated for Colombia among IDPs
  – Appears to be acceptable to general population
• Confidential, private screening valued by participants
• Increased number accessing services
  – Hospital José María Hernández decided to continue the screening after the project ended
• Similar processes in Ethiopia for female refugees & among male refugees in Uganda
Thank you

**Coordinators:** Decssy Cuspoca, Elliot Hohn

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