

# Summit Against Gender-Based Violence

Episcopal Diocese of Davao, Matina, Davao City  
25 November 2019



**GOJUST**  
Governance In Justice  
**Human Rights**  
PROJECT

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## BACKGROUND OF THE ACTIVITY

The ***Summit Against Gender-Based Violence*** is a continuation of the initial activities conducted under the ***Gender Based Violence Observatory Project***. This project was carried out in 2018 as part of the efforts to respond and recognize continuing prevalence of gender-based violence and the continuing challenges in women's access to justice.

Through the GBV Observatory Project, the ***Commission on Human Rights***, with funding support from ***Go Just***, undertook research engagements that looked at how laws on GBV are implemented and how GBV manifests in the lived experiences of women. The GBV Observatory is envisioned to contribute to the monitoring of state's obligations in addressing GBV and in forwarding key policy recommendations. It also aims for a deeper and wider understanding of GBV, enhancing women's access to justice, and in general, in making data work for women. It further hopes to address one of the key targets of SDG 5 (Gender Equality), on the elimination of all forms of violence against women and girls in public and private spaces, including trafficking and sexual violence and other types of exploitation.

The GBV Observatory Project began in 2018 spearheaded by the Center for Gender Equality and Women's Human Rights and led by focal Commissioner for Women, Commissioner Karen Gomez Dumpit. The specific objectives of the project included the review of the roles of state actors in addressing GBV, the mapping of existing legal referral mechanisms, and the documentation of processes, key themes and discourses, including the identification of issues, gaps, and challenges.

In November 25, 2019 CHR Region XI conducted the Summit Against Gender-Based Violence. This activity gathered different stakeholders from various government agencies in the Davao Region to discuss about



**ACTUAL PROGRAM FLOW**

<b>TIME</b>	<b>ACTIVITY</b>	<b>FACILITATOR</b>
8:00 – 9:49 AM	Arrival and Registration	CHR XI
9:50 – 10:06 AM	Preliminaries  Introduction of Participants  Welcome Remarks	Niel Peter Arendain  Atty. Junitte Baroquillo
10:07 – 10:30 AM	Presentation of the Results of the Mapping of Legal Referral Mechanism on GBV: The Case of Sta. Maria	Atty. Cienna Huyo
10:31 – 11:29 AM	Plenary Discussion	Atty. Cienna Huyo
11:30 – 11:39 AM	Presentation of Synthesis/Validation	Atty. Cienna Huyo
11:40 – 11:59 AM	Closing Ceremony  Distribution of Certificates  Closing Remarks	Peter Niel Arendain  Atty. Janer Sanchez

## PROCEEDINGS

### **Arrival and Registration | 8:00 AM – 9:49 AM**

At 8:00 in the morning, participants started to arrive at the venue. The CHR XI team facilitated the registration of the participants. While waiting for the other participants to arrive, the morning snacks was served. At 9:49 in the morning a total of \_\_ participants, coming from different government agencies and civil society organizations of Davao City.

### **PRELIMINARIES: *Opening Prayer, Rationale/Welcome Remarks, and Introduction of Participants* | 9:50 AM – 10:06 AM**

At 9:50 AM, the activity was formally opened with an invocation. A multimedia presentation of the song Dakilang Maylikha by Gary Granada served as the morning prayer. This was then followed by the singing of the Philippine National Anthem.

Acting as the main facilitator of the activity, Mr. Niel Peter Arendain led the introduction of the participants. He asked the participants to stand and be acknowledged as he called each participants' names in the plenary. Mr. Arendain also introduced the CHR team to the participants.

Atty. Junitte Baroquillo also welcomed the participants. In her welcome address, she thanked all the participants for responding to CHR's invitation. She then briefly explained the rationale of the activity. He emphasized that the gathering is related to CHR's work as Gender Ombud. With this, he encouraged everyone to participate in the discussions and other related activities.

### **Presentation of the Results of the Mapping of Legal Referral Mechanism on GBV: The Case of Sta. Maria | 10:07 AM – 10:30 AM**

Prior to the presentation of the result of the Mapping of Legal Referral Mechanism on GBV in Sta, Maria, Atty. Cienna Huyo, gave a brief background of the said activity. She emphasized that the mapping activity was done in accordance with the program objectives outlined in the Gender-Based Violence Global Observatory Project- a joint initiative of CHR and GoJust.

She also explained that on its initial run, CHR XI selected the Municipality of Sta. Maria because they want to establish a formal partnership with the Municipality. After this, she proceeded with the presentation of the result of the mapping and highlighted specific points including common themes and concerns related to GBV and other significant information. Below are the information shared by Atty. Huyo during this session:

### Gender Equality Situation in the City/Municipality

Theme	Responses
Demographics	<ul style="list-style-type: none"> <li>We have a data in MPDO but not disaggregated; these area household level data <b>(MPDC)</b>.</li> </ul>
Gender equality policies	<ul style="list-style-type: none"> <li>MPDC requires that 25% of the working force must be women <b>(MPDC)</b></li> <li>No specific policies for Gender Equality in the department <b>(MPDC)</b></li> <li>No specific policies but we ensure equal treatment in dealing with clients <b>(PNP)</b></li> </ul>
<b>Experiences with GAD mainstreaming and budgeting</b>	<ul style="list-style-type: none"> <li>MSWD conducts planning and budgeting for GAD programs. GAD plans and programs are then implemented after it is approved by the DILG. <b>(MSWD)</b></li> <li>The budget for GAD programs are subsidized by the budget for health at the barangay level (5%). The Municipal Health Office's budget for GAD programs are provided by the MPDC. <b>(MHO)</b></li> <li>The PNP office also submits GAD plan and budget to MPDC. The FJDG officer takes care of the submission of the plans and budget requests. <b>(PNP)</b></li> </ul>

### Gender-based violence in the city/municipality

Themes	Responses
<b>Common forms of GBV</b>	<ul style="list-style-type: none"> <li>Women filing for child support <b>(PNP)</b></li> <li>Physical abuse and child custody <b>(MSWD)</b></li> <li>VAWC – specifically involved during the provision of health services <b>(MHO)</b></li> </ul>
<b>Affected Groups</b>	<ul style="list-style-type: none"> <li>IP women</li> <li>Women from low-income family</li> </ul>
<b>Difficult Cases</b>	<ul style="list-style-type: none"> <li>There are clients who are sometimes “toxic”. These are clients who are difficult to handle. Even if you have already provided them with the necessary counseling and other support they will still insist on what they want even if the policy will not allow it. This normally happens on cases related to child support or child custody. <b>(PNP/MSWD)</b></li> <li>There was once a rape case filed in the PNP where the father was accused of raping his daughter. The mother insisted to settle the case because according to her, the alleged accused and the victim have a romantic relationship. This case is still being litigated. <b>(PNP)</b></li> <li>MHO articulated that they have not experienced any difficult cases related to VAWC or GBV. <b>(MHO)</b></li> </ul>
<b>Challenges</b>	
<i>Reporting and investigation</i>	<ul style="list-style-type: none"> <li>Private health services/doctors refuse to provide services to VAWC related incidents especially if they are aware that</li> </ul>

	<p>medical results will be used in the legal process <b>(MSWD/MHO/MPDC/PNP)</b></p> <ul style="list-style-type: none"> <li>• There is currently only one MHO/doctor in the municipality of Sta. Cruz. The PNP are often forced to refer VAWC victims to nearby municipalities (Malalag/Malita) for health examination <b>(PNP/MSWD)</b></li> </ul>
<i>Providing support services</i>	<ul style="list-style-type: none"> <li>• The MSWD are sometimes challenged with clients who keep on violating the agreements that they have settled for. These cases are referred to the barangay but will eventually be referred back to the MSWD. This results into repetitive interventions. <b>(MSWD)</b></li> </ul>
<b>Best Practices</b>	<ul style="list-style-type: none"> <li>• Provision of basic needs (food, support on education of children, etc) to victims of VAWC <b>(MSWD/MPDC)</b></li> <li>• Provision of livelihood interventions to KALIPI (womens' group). Livelihood interventions are not specific to VAWC victims. <b>(MPDC)</b></li> <li>• Oplan Davao Kalinaw - implementation of medical missions, distribution of school supplies, education campaign on VAWC, Rape, and other laws. <b>(PNP)</b></li> </ul>

**Flow of Management Case (specific to the service provider)**

Themes	Responses
<b>Entry points for GBV cases</b>	<ul style="list-style-type: none"> <li>• Starts by filing a blotter (pink blotter) in PNP; case is then referred to MHO for medical, and referred to MSWD for counselling <b>(PNP)</b></li> <li>• VAWC incidents that were reported to the barangay are usually referred to the PNP; most of the time no documentation of these incidents is made at the barangay level <b>(MSWD)</b></li> </ul>
<i>Available services</i>	<ul style="list-style-type: none"> <li>• GBV victims are given priority in certain need-based interventions (provision of livelihood, etc)</li> <li>• Victims of GBV are regularly visited by social workers from the MSWD.</li> </ul>
<b>Available services often accessed by women</b>	<ul style="list-style-type: none"> <li>• Financial support provided to women who are victims of GBV <b>(MSWD)</b></li> <li>• Assistance on transportation <b>(PNP)</b></li> </ul>
<b>At which point in the process of GBV intervention do women often exit the formal helping system of the service provider?</b>	<ul style="list-style-type: none"> <li>• Cases are resolved when couple are already OK or if they have already settled their issues <b>(MSWD)</b></li> <li>• When case is already filed / when warrant is already issued <b>(PNP)</b></li> </ul>



## Documentation

Themes	Responses
<b>When does documentation of GBV complaints start?</b>	<ul style="list-style-type: none"> <li>• Pink Blotter book (PNP)</li> <li>• General Intake Sheet (MSWD)</li> </ul>
<b>Filing and storing</b>	
<i>How long will they be kept</i>	<ul style="list-style-type: none"> <li>• 3-4 years (General Intake Sheet) <b>(MSWD)</b></li> <li>• Pink Blotter book / 20 years <b>(PNP)</b></li> </ul>
<i>Electronic Database</i>	<ul style="list-style-type: none"> <li>• MSWD and PNP have electronic database</li> </ul>
<b>Utilization of Data (publication of reports/cases)</b>	<ul style="list-style-type: none"> <li>• MSWD generates report for province, region, national office;</li> <li>• GBV cases are report daily to the provincial office; submits report via online database every 2pm <b>(PNP)</b></li> </ul>
<b>Who can access these files? Protocols?</b>	<ul style="list-style-type: none"> <li>• Not all information are accessible to public; sensitive data needs approval from OIC <b>(PNP)</b></li> <li>• Counseling notes are only for MSWD (everyone in the office) <b>(MSWD)</b></li> <li>• General data regarding number of cases and other are accessible only to agencies/departments where reports are submitted; DILG, CHR, etc. <b>(MSWD/PNP)</b></li> <li>• Academe also access statistical data of GBV from MSWD / interested party submits letter of request <b>(MSWD)</b></li> </ul>
<b>Which information are made public and how?</b>	<ul style="list-style-type: none"> <li>• General data like types of cases or number of cases. These are sourced out per barangay</li> </ul>

## Recommendations

Themes	Responses
<b>Are there information on gender-based violence and women's human rights which could be of use to, and you would like to be available to your agency?</b>	<ul style="list-style-type: none"> <li>• We want to know how to manage difficult (toxic) clients. <b>(MSWD/PNP)</b></li> <li>• capability/capacity building on counselling for other MSWD staff <b>(MPDC)</b></li> <li>• More seminars on process related to GBV/WHR. Specifically, learning sessions on how to handle cases and or clients? (PNP)</li> <li>• Information and or programs for GBV related to mentally challenged women</li> </ul>
<b>Are there information on gender-based violence and women's human rights which you feel women vulnerable to GBV need to have more access to?</b>	<ul style="list-style-type: none"> <li>• Any information/policies related to GBV; constant education campaign <b>(MSWD/MPDC)</b></li> </ul>

<p><b>Are there information on gender-based violence and women’s human rights which you feel the local population in general need to have more access to?</b></p>	<ul style="list-style-type: none"> <li>• Information and or programs for GBV related to mentally challenged women</li> </ul>
<p><b>Other recommendations for the CHR as the gender ombud as mandated by the Magna Carta of Women</b></p>	<ul style="list-style-type: none"> <li>• Accreditation of doctors / as response to the challenge in securing medico legal for VAWC related incidents</li> </ul>

**Plenary Discussion | 10:31 AM – 11:29 AM**

After the presentation, Atty. Huyo led the participants into a discussion regarding their own experiences and or initiatives related to Gender-Based violence. She asked each participants to share about their office mandate on GBV including common issues that they encountered related to GBV and how these issues are handled by their respective offices or organizations.

Each participant was given the opportunity to share during the plenary discussion. The following table outlines the details of the sharing that took place during this session:

Mandate	GBV Issues Encountered	How is it being handled?	Where does the management of issues end? Referral?	Gaps in the management of Women who experience GBV?	Programs/Activities recommendations to mitigate the problem?
<p>(Luna) NGO providing legal assistance to women and children victims of VAW /</p> <ul style="list-style-type: none"> <li>- Any forms of cases of VAW</li> <li>- Legal Assistance</li> <li>- Psychosocial Counseling</li> <li>- Advocacy on GBV Issues</li> <li>-</li> </ul>	<ul style="list-style-type: none"> <li>- VAWC</li> <li>- Rape (highest this year)</li> <li>- Trafficking</li> </ul>	<ul style="list-style-type: none"> <li>- Victim will reach out to LUNA / intake assess concern or case / victim will decide if they are interested in pushing the case or not (we do not decide for them – we set expectations)</li> <li>- -recommend for counselling before taking legal action</li> <li>- Provide legal assistance if victims decide to pursue legal case</li> </ul>	<ul style="list-style-type: none"> <li>- We do referral to lawyers /( mou with IDP Davao to provide free legal assistance)</li> <li>- Intervention, support continues even if cases are already referred to other agencies/support group</li> <li>- Home visitation</li> <li>- If victims articulates that they are OK; then we consider the case closed</li> <li>- Organizing of VAW victims for other support activities with aim to empower women (continuous support)</li> </ul>	<ul style="list-style-type: none"> <li>- Our struggle is availability of lawyers who are willing to handle VAWC cases</li> <li>- Difficulties in referral to IGDD for financial support (process is lengthy – feedbacking takes time)</li> <li>- “Dugay ang dagan sa kaso”</li> <li>- Lack of financial capacity of victims to work within protocols, bureaucracy (processing of</li> </ul>	<ul style="list-style-type: none"> <li>- Hopes for speedy trial and resolution of cases</li> <li>- Make psychosocial support accessible to VAWC victims</li> </ul>

		<ul style="list-style-type: none"> <li>- Prepare document, counseling, other legal services/ assistance</li> </ul>		papers, filing of papers for financial support)	
<p>(DOJ-Fiscal)</p> <ul style="list-style-type: none"> <li>- Prosecution</li> <li>- Investigate crimes, prosecute offenders</li> </ul> <p>(limited VAWC cases except if it is part of a trafficking case)</p>	<ul style="list-style-type: none"> <li>- Limited VAWC Cases /</li> <li>- Cases on Human Trafficking with VAWC only</li> <li>- Family members are mostly offenders in trafficking (Online-related cases)</li> <li>- Some Family courts fiscal are male; this posed difficulty in building sincere communication necessary to pursue cases</li> </ul>	<ul style="list-style-type: none"> <li>- Office have to do follow-ups on cases where victims/ witnesses lost interest in the case</li> <li>- Prosecutors also serve as counselors</li> <li>- GAD training to Male Fiscals handling Family Courts</li> </ul>	<ul style="list-style-type: none"> <li>- Issues do not end; we can refer to other agencies (DOLE, DSWD,</li> </ul>	<p><i>Input based on personal experience during private practice)</i></p> <ul style="list-style-type: none"> <li>- Wala mapakain, alanganin na ipakulong ang bana</li> <li>- Nagkahiwalay pero nagkabalikan</li> </ul> <p>Some women victims have difficulty attending court hearing due to specific socio-economic condition: (walay mu bantay sa anak, walay pamasaha, etc)</p>	<ul style="list-style-type: none"> <li>- Trainings, Counseling,</li> <li>- More trainings (kung pwede apil tanan)</li> <li>-</li> </ul>

<p>PSA</p> <p>Medyo hirap ako to answer this since wala naman pumupunta sa office / but we are one in this cause</p> <ul style="list-style-type: none"> <li>- Statistical coordination</li> <li>- Civil registration</li> <li>- CBMS</li> <li>- Philippine ID System</li> </ul>	<ul style="list-style-type: none"> <li>- PSA Concerned on Data</li> <li>- Admin data on VAWC cases and crime</li> <li>- Collects data from different agencies (difficulty due to duplication)</li> <li>- Challenge is to harmonize data</li> <li>- On Civil Registration – difficulty on registration of women, children, IPs and other marginalized groups</li> </ul>	<ul style="list-style-type: none"> <li>- Effort to reconcile (harmonize data)</li> </ul>	<ul style="list-style-type: none"> <li>- Work is on statistical data: Statistics on VAWC, DRUG related Data is dependent on Agency report only</li> </ul>	<p>Difficulty in issuance of document for victims from (second family); this poses challenges in acquisition of legal docs to be used for evidence in court</p>	<ul style="list-style-type: none"> <li>- Hopes for Sub poena powers can be decentralized to ease out process</li> <li>- Hope to have MOA for data sharing agreement to ease out reporting of data/generation of statistical reports</li> </ul>

<p>PopCom</p> <p>Population Management</p> <p>Policy recommendation for population management</p> <p>Monitoring related to PopCom</p>	<ul style="list-style-type: none"> <li>- Not involved directly</li> <li>- Information Dissemination</li> <li>- Preventive measures (trainings on LGUs)</li> </ul>	<ul style="list-style-type: none"> <li>- None</li> </ul>	<ul style="list-style-type: none"> <li>- None</li> </ul>	<p>No Policy on Gender-based Violence per agency</p>	<ul style="list-style-type: none"> <li>- Hopes to have gender-based policy per agencies (referral mechanisms)</li> </ul>
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### **Presentation of Synthesis/ Validation | 11: 30 AM – 11:39 AM**

The synthesis of the plenary discussion was presented by Atty. Ciena May Juyo. She presented back the participants answers and asked whether she missed out on something. The participants affirmed that the synthesis is complete and accurate.

### **Closing Ceremony | *Closing Remarks and Distribution of Certificates* | 11:40 AM – 11:59 AM**

The activity was formally closed with the distribution of Certificates of Participation and Attendance. This was facilitated by Mr. Peter Niel Arendain. Atty. Janer Sanchez also thanked the participants for their input. He assured the participants that the output of the discussion will be forwarded to the appropriate department for further action.

At 11:59 in the morning the session concluded with a photo opportunity with the participants. Lunch was also served.