

REPUBLIC OF THE PHILIPPINES COMMISSION ON HUMAN RIGHTS

Region III

DMGC, Maimpis, City of San Fernando, Pampanga

2020 Mapping of Legal Referral Mechanism on Gender Based Violence during the Covid-19 Pandemic and New Normal

October 23 & November 5, 2020

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Introduction

The Commission on Human Rights, as Gender and Development Ombud under the Magna Carta of Women, undertakes regular monitoring of women's human rights, especially women in the marginalized sectors. Since the establishment of its Center for Gender Equality and Women's Human Rights Center, sectoral monitoring of women, girls, and LGBTQI human rights have been undertaken. Initial situationers were released on indigenous and rural women, women with disability, LGBTQI, girl-children, women in detention, urban poor women, and older women. From these sectoral monitoring, policy recommendations are forwarded to key government agencies. Reports drawn from women's insights and identified issues also inform submissions to human rights treaty bodies and inputs to reports of human rights mandate holders.

Through this Focus Group Discussion on GBV Mapping during the COVID-19 Pandemic, trends, issues, gaps, challenges and best practices on responding to GBV will be identified and documented. This FGD would be a great opportunity to communicate with duty bearers, government service providers and the members of the referral networks to improve existing GBV specific activities and intervention as well as to work together to ensure prompt, effective, and survivor-centered GBV response.

Objectives of the Sectoral Monitoring:

- Harness the capacities of the Commission's 16 Regional Officer in monitoring functionality of referral mechanisms, providing recommendations, and influencing enhanced functionality and responsiveness of local inter-agency mechanisms to respond to VAW. It aims to strengthen Commission's mandate as Gender Ombud;
- Gather regional data on GBV during COVID-19 Pandemic and the new normal, particularly highlighting trends, gaps, challenges, best practices, and key recommendations to enhance response:

Specific Objectives:

- 1. Document and map GBV legal referral mechanisms during the COVID-19 crisis and the impact of the pandemic on legal referral mechanisms;
- 2. Partner with the duty bearers and community women, women CSOs/NGOs in the conduct of mapping of legal referral mechanisms during the COVID-19 pandemic;
- 3. Identify the most prevalent forms of GBV during the ECQ and post ECQ period and observable trends in GBV and GBV response i.e. (case types, sectors, areas more prevalent, increase or decrease in reporting)
- 4. Document how the referral systems adapted to or failed to adapt to the ECQ period and the new normal to respond to cases of GBV (cite best policies/programs adopted)

- 5. Document key challenges posed in responding to GBV during ECQ and new normal at the Barangay level, the Women's desk level, Prosecution level and also from the perspective of community women and women's organizations.
- 6. Identify lessons learned from the Pandemic in terms of improving GBV response.
- 7. Forward key recommendations to inter-agency mechanisms mandated to address different forms of GBV.

Methodology

The CHR Representatives introduced the GBV project and guidelines to the participants which also includes CHR mandate as Gender Ombud, CHR observatory project, the general objectives of the FGD, consent form and a list of focus group questions for NGO'S, CGO's and government service providers.

The questions for each FGD session were derived using the following key factors below:

Women NGO's and CSOs

- 1. Gender equality situationer in the city/municipality
- 2. Gender-based violence (GBV) in the city/municipality (in relation to gender-based violence)
- 3. Flow of case management (specific to the services provider)
- 4. Documentation
- 5. Recommendations

Government Service Providers

- 1. Gender equality situationer in the city/municipality
- 2. Gender-based violence (GBV) in the city/municipality (in relation to gender-based violence)
- 3. Flow of case management (specific to the services provider)
- 4. Documentation
- 5. Recommendation

Demographic

Two (2) focus group discussions were conducted where thirteen (13) women representatives from NGOs, CGOs and four (4) representatives from government service providers. A total of seventeen (17) participants where each discussion lasted for 3 hours.

The participants were representatives of civil society organizations, non-government organization, residents of the barangay, barangay officials, government representative from city social welfare and development office and a representative from the Women and Children Protection Desk Unit (WCPDU) of the PNP.

The FGD came from a variety of backgrounds, ranging from women's rights focus to sexual minority, children, grassroots and community support organizations as well as aid, sustainable development and social services.

More details on the participants and their background are provided in the attendance attached in Annex 2.

Discussion

Women NGO's and CSOs

Barangay Malpitic, City of San Fernando

- 1. Gender equality situationer in the city/municipality
- Are you aware of any local gender equality or GBV policies in your city/municipality? Do you know if you have a GAD Code or an Anti-Discrimination, Anti-Cat-calling ordinances or of their barangay counterpart?

Majority of the participants has insufficient knowledge about the policies related to Gender-Based Violence in their city/municipalities.

• During the ECQ/GCQ period, have you heard of any program or policy pertaining to gender or GBV adopted by the LGU (barangay to City level)?

Participants agreed that they haven't heard any program or policy pertaining to gender adopted by the LGU.

Prior to the pandemic, are the VAWC Desks in your barangay functional?
 (Established, trained officials, able to record WAVC cases, able to respond and issue BPO) Is the answer the same during the ECQ period?

All participants claimed that their WAVC Desk is functional prior to the pandemic and even during the ECQ period. Most cases reported were documented and reported to police station and City Social Welfare and Development Office (CSWDO) of San Fernando. According to the participants, barangay officials accompanied the abused victims from their barangay all the way to the hospital for the conduct of medical examination until the reporting of the incident to the police station.

- 2. Gender-based violence (GBV) in the city/municipality (in relation to gender-based violence)
- Prior to the pandemic, what are the common forms of GBV in your municipality/city?

All participants responded that most GBV cases reported in the municipality/city were sexual abuse, physical abuse, domestic violence, cybercrime, verbal and psychological abuse.

• During the ECQ, what are the common forms of GBV have you observed/documented in the community? During GCQ?

Majority of the participants stated that most common forms of GBV documented during the pandemic were economic abuse, domestic violence, physical abuse, verbal and psychological abuse.

• Do you see/observe incidents of GBV in your community increasing or decreasing during the ECQ? Who are the perpetrators and victims of these cases?

All of the participants agreed that GBV incidents decreased during ECQ. Barangay official testified that most of the perpetrators were from family members or a friend of the victims.

- During the ECQ and GCQ period, what are the challenges/barriers women experience in:
 - a) Reporting VAW and requesting BPO with the Barangay VAW Desk?
 - b) Reporting and investigation of cases of GBV (PNP, VAW Desk)
 - c) Prosecutions and legal assistance (Prosecutor's Office, PAO, VAW Desk)
 - d) Providing support services (MSWDO, CSWDO, WCPUs)

Most participants mentioned that the only challenge they experienced was the reporting of the incidents to the PNP. According to the Barangay VAW Desk officer,

• From your experience, which group of women are most affected by the GBV forms identified (e.g. urban poor, women farmers, women with disabilities, on the basis of sexual orientation and gender identity)? What group had challenges in accessing justice?

Majority of the participants answered that urban poor women were the one most affected, since majority of the women living in the area belong to said group.

They articulated that they have no issues or challenges in accessing justice except the one previously mentioned, reporting the alleged incident to the PNP.

• What are the specific challenges/barriers experienced by women and girls in seeking legal remedies in cases of GBV? What are the added challenges/barriers brought about by the ECQ and the GCQ/Normal?

The only challenge experienced by the participants was the reporting of the incidents to the PNP. Sometimes, the VAWC officer is not available or out of office.

• Can you cite specific case during the ECQ period that highlights gaps in the referral mechanisms?

Barangay official shared one case of physical abuse. They reported the incident to the PNP. During that time, there were no available desk officers to assist them. They waited for hours. Until they were informed by the PNP that they will release the alleged perpetrator since the period in filing the necessary complaint prescribed by law had already lapsed.

• Are there good practices/policies in responding to GBV that you have documented?

Some of the participants answered that they consider quick response and rescue of GBV victims and assisting them in filing complaints in police stations and in prosecutor's offices as good/best practices.

They were also instances that they helped or assisted in arresting the alleged perpetrators.

While others stated that their desk officer personally accompanied the victim for their medical examination.

3. Flow of case management (specific to the services provider)

 What are the available services for GBV survivors are community women often aware of?

The women association leader shared that they receive additional livelihood funds for the community of women but there are no specific services for GBV survivors.

Few respondents answered that GBV survivor aware of services from local government unit such as financial assistance from CSWDO/MSWDO and legal assistance from PAO.

• Which among the available services are most oftenly accessed by community women? What are the possible factors affecting their choices of what to access?

Majority of the participants explained that community women oftenly accessed was legal assistance. While other forms of assistance from the barangay were filing of cases and reporting the incidents to the police station.

• During the ECQ period, were services in relation to GBV uninterrupted? What services were unavailable or difficult to access? Why?

All of the respondents agreed that services related to GBV were not suspended nor interrupted by the pandemic. The functionality of the barangay continues for 24 hours for emergency purposes.

• What services during ECQ/GCQ are women frustrated/disappointed?

Majority of the participants claimed that their barangay officials were performing their duties well even before and during this time of pandemic. They were very satisfied of the services provided by the local government unit during the ECQ and GCQ periods.

• During the ECQ period, at which point in the process of GBV intervention do women **often exit** the formal helping system of the services provider? What do you think are the underlying reasons for these?

As per the VAWC Desk officer in the barangay, the common reason why women often exit the intervention formal helping system is because they don't want to pursue cases with the perpetrator which they are related to, sometimes the perpetrator was a family member or the breadwinner of the family.

According to the barangay officials, the underlying reasons for these were family and financial issues.

4. Documentation

• Does your organization conduct documentation/research on GBV in your area? Can you provide a brief description of the documentation/research?

Majority of the participants answered that they don't conduct any research yet on GBV in their area. However, they documented all the cases occurred or reported in their area of jurisdiction. The offices of CSWDO and DILG San Fernando, Pampanga were copy furnished.

• During the ECQ period, were you able to document GBV cases? Can you share trends and observations?

The barangay officials and barangay health workers claimed that they were able to document all the alleged GBV cases reported to them.

They mentioned that most of the GBV cases reported were VAWC on physical abuse. Other cases were child support, domestic violence and other family related issues.

• Is there also a case during ECQ that showcases *difficulty* in accessing *justice/legal remedies* in case of GBV? What contributed to the barriers/difficulties?

Majority of the participants has a concession that the City Government of San Fernando, Pampanga especially the CSWDO together with their barangay officials continue to provide services that would assist parties in accessing remedies concerning GBV cases.

• From experience, is there a government *good practice* in responding to GBV? During COVID-Pandemic, are there good practices?

Participants claimed that the prompt response to GBV cases is one of the good practices of the local government unit. Moreover, the rest explained that financial and legal assistance in relation to GBV were well provided during the pandemic.

5. Recommendations

• Considering the challenges and barriers you have observed during the COVID-19 pandemic and the ensuing new normal, what are your recommendations on ensuring prompt an effective response to GBV?

Participants agreed that the LGU especially the PNP must continue to respond quickly and effectively. The rest were satisfied with the LGU.

• Do you feel the government (members of the referral mechanisms) were able to properly respond to cases of GBV during ECQ/GCQ? What are your recommendations to improve response?

All of the participants agreed that LGU (member of referral mechanisms) effectively responded to cases of GBV during ECQ/GCQ. Some of the respondents recommended to have trained officers and workers handling GBV cases. Some suggested that seminars/trainings related to GBV be conducted.

• Other recommendations for the CHR as the gender ombud as mandated by the Magna Carta of Women?

Majority of the respondents recommended that CHR must continue the regional mapping on GBV in order for people to be more aware of GBV related issues. Others expressed their gratitude for conducting the Regional Mapping in their barangay.

Discussion

Government Service Providers

Training Hall, CHR ROIII City of San Fernando



1. Gender equality situationer in the city/municipality

• Does your office keep basic demographics on GBV? For instance sex, gender, ethnicity, and disability segregated data of GBV complaints? Was this implemented during ECQ? Post ECQ?

All participants answered that their office kept records or basic demographics on GBV and it was implemented prior to the pandemic, during ECQ and post ECQ.

 Apart from national laws and international human rights instruments (e.g. CRC and CEDAW), what important gender equality or GBV policies are in place in your office?

How are these policies operationalized? (e.g. do you have focal persons for women/LGBT/GBV?

Majority of the participants agreed that their office has different policies, program and services for GBV such as city ordinance for LGBT month,

women's month and women group organization. They also have focal person and office for women/LGBT/GBV.

• Experience with GAD mainstreaming and GAD budgeting: Is your office able to utilize the GAD Budget in addressing GBV and gaps in addressing GBV Is this also true during the ECQ/GCQ period?

The participants stated that they were able to utilize the GAD budget for programs, activities and also in addressing GBV prior pandemic and during the ECQ/GCQ. The CSWDO added that they keep the GAD budget and did not allow spending it for the pandemic.

• DURING ECQ and POST ECQ- were there specific policies or programs adopted by the LGU to respond to Gender-Based violence during the COVID-19 Pandemic?

All of the participants answered that the policies, services and programs of their respective offices are continuous during the Covid-19 pandemic in addressing GBV.

- 2. Gender-based violence (GBV) in the city/municipality (in relation to gender-based violence)
- Prior to the pandemic, what are the common forms of GBV received by your office?

Majority of the participants answered that most common forms of GBV reported were economic, physical, verbal abuses and incest rape cases.

• During the Pandemic and post ECQ, what are the common forms of GBV being reported to your office? Has there been an increase or decrease in reporting? Inquire why/theories behind increase or decrease)

Most common forms of GBV reported were economic, physical, verbal abuses and incest rape cases.

All of them manifested that cases during the pandemic decreased. However, they expressed that maybe it's because family members or the victims were not able to report because of the restrictions brought by the pandemic.

• During the ECQ/post ECQ, which groups are most affected by the GBV forms identified (e.g. urban poor women, women farmers, women with disabilities, on the basis of sexual orientation and gender identity)?

All of the respondents agreed that the most affected group of women is the urban poor.

• What are the specifics challenges in addressing/responding to GBV during ECQ? During GCQ/New Normal? What gaps in the referral mechanisms have you observed?

The CSWDO representative said that lack of communication, transportation and the cooperation of the family member and the barangay were the specific challenges they encountered. Likewise, the representatives from the barangay agreed that lack of personnel or assisting officer from the PNP was the challenged they encountered during the ECQ. The representative from the PNP agreed and explained they were only two (2) policewomen officers in the city at present. They admitted that they lack personnel or human resource.

What difficult/Challenging cases have you encountered/responded to during ECQ?
 During GCQ/new normal?

Majority of the respondents agreed that the difficult/challenging cases they have encountered were incest rape cases or those cases involving members of the family.

- What are the challenges/barriers experience during ECQ and GCQ in:
 - a) Issuance and implementation of BPO?

Withdrawal of complaints by the victims or the family was the challenge mostly experienced by the participants.

b) Reporting and investigation of cases of GBV (PNP, VAW Desk)

Lack of PNP personnel or non-availability of VAWC desk officer was the challenge in terms of reporting.

c) Prosecutions and legal assistance (Prosecutor's Office, PAO, VAW Desk)

The CSWDO representative stated that sometimes PNP do not attend hearing or proceeding whenever they were being called or required.

d) Providing support services (MSWDO, CSWDO, WCPUs)

All of the participants agreed that the services provided by the CSWDO were sufficient and they did not encounter any challenge nor difficulties. The Office of the City of Social Welfare and Development has a good working relationship with the different barangays of the City and partners as well.

• What are factors that contributed to the gaps/challenges in responding to GBV during ECQ/GCQ?

Majority replied that lack of personnel and man power contributed to the gaps and challenges in responding to GBV especially during the pandemic.

• What are the best practices of the LGU or office in responding to GBV during ECQ and GCQ/New normal?

All of the participants stated that good working relationship with the barangay, prosecutors, NGOs, medico legal officer were the best practice of the LGU in responding to GBV to provide holistic services during the pandemic. In addition, the barangay representative said that being available anytime for the community is their best practice.

3. Flow of case management (specific to the services provider)

• During the ECQ, what are most accessible entry points for GBV cases?

The respondents agreed that the most accessible entry point for GBV cases is the barangay taking into account that it is the first responder.

• During ECQ/GCQ, which among the available services offered by the service providers are most oftenly accessed by women? What are the possible factors affecting their choice of what to access?

The representative from the CSWDO relayed that their services and programs are continuous. They conducted seminars for women and implemented livelihood programs to help them survive the pandemic.

• At which point in the process of GBV intervention do women **often exit** the formal helping system of the service providers? What do you think are the underlying reasons for these?

All of the participants agreed that women often exit the formal helping system when the victims communicate and settle with the perpetrator/s.

They opted not to pursue their complaints or cases with the perpetrator because most of the time the latter was a family member or the breadwinner of the family.

They all agreed that the underlying reason was financial.

4. Documentation

• Are you able to share GBV data during the ECQ period? Can you share with CHR your data?

The CSWDO representative said that they have shared the GBV data to DILG. The PNP keep their records. While the barangay officials of Barangay Malpitic share their records to other offices such as the CSWDO, DILG, etc.

All of the representatives positively agreed to share their GBV data to CHR Office.

Have you submitted or shared your GBV data during ECQ to any other office or interagency mechanisms?

They are all agreed that they submitted or shared GBV data during the pandemic to concerned offices.

• Were inter-agency mechanisms (RIACAT/RIACVAWC/RGADC) able to meet and discuss programs and policies for GBV during ECQ, GCQ and new normal?

The CSWDO shared that they coordinated with RIACAT to respond alleged sexual online exploitation case during the pandemic.

The rest was not able to meet and discuss with other agencies.

5. Recommendation

 Considering the challenges posed by the COVID-19 pandemic and the ensuing new normal, what are your recommendations on ensuing prompt and effective response to GBV?

All of the participants agreed that having additional trained personnel will improve prompt and effective response to GBV cases.

They also recommended that providing seminar and training for the personnel will improve the response to GBV.

• Do you feel that enough guidance have been provided by the national government in ensuring uninterrupted GBV response during Pandemic? What are your recommendations to improve response?

Half of the participants agreed that the guidance provided by the national government were sufficient while the other half weren't satisfied. They recommended that issues regarding lack of personnel, providing training and seminar to improve GBV response be conducted.

• Other recommendation for the CHR as the gender ombud as mandated by the Magna Carta of Women.

All of the participants agreed that the CHR as the Gender Ombud continue to facilitate or conduct focus group discussion related to Gender-Based Violence in the community.

Issues, Concerns and Challenges

Through this FGD, participants of the women NGOs, CGOs and government service provider representatives identified several issues, concerns, and challenges related to the current situation in relation to GBV prior and during the Covid-19 pandemic.

The following details below are the several issues, concerns and challenges raised during the FGD:

Women NGOs and CGOs	Government Service Providers
 Most problems in the community were about financial assistance for their children, psychological abuse, verbal abuse and physical abuse. Inadequate knowledge and access to information, law and rights of women. 	 Lack of personnel and manpower in response to GBV. Poor communication with some barangay/officials. Lack of support from the barangay level
 Lack of awareness and promotion about Gender-based violence. Complainants/victims withdraw their complaints. 	 Victims' oftenly exit during intervention formal helping process (They were afraid to pursue charges with their family member which is the perpetrator). Poor cooperation from family member of the victim.

Best Practices

Barangay Malpitic, City of San Fernando, Pampanga

For efficient and effective administration in the barangay, the Barangay Chairman appointed or designated personnels who are committed and dedicated to perform their duties and willing to serve

The following are the best practices of Barangay Malpitic:

- 1. The barangays has a functional Violence Against Women and Children Desk Officer, in responding and assisting GBV victims in their barangay.
- 2. Regular gender and development training for barangay officials and VAWC Officer.
- 3. Rescue operations (in partnership with Local polies, CSWDO and etc.)
- 4. Referring victims of GBV to partner agencies
- 5. The growing population in the barangay increases problems affecting women and children. Hence, association of women was established to address immediate concerns of underprivileged women. The organization serves as an avenue as well in empowering women through livelihood programs and social and economic services.
- 6. The community of Malpitic has a strict curfew even before the Covid-19 pandemic.

Women and Children Protection Center of City Social Welfare Development Office - San Fernando, Pampanga

- 1. Established women organization (KALIPI Women's Group) and continuously provides services such livelihood, seminar and trainings, financial assistance and etc.
- 2. Established women and children protection center.
- 3. Comprehensive treatment plan to GBV victims that includes temporary shelter, livelihood program, educational assistance, counselling, seminar, legal and medical assistance.
- 4. Good working relationship and partnership with other agencies (NGOs, barangays, prosecutors, medico legal officer and etc.).
- 5. City ordinance celebrating LGBT month.
- 6. Regular seminar and training for LGU employee.
- 7. Continuous seminar to parent leader during Covid-19.

Women Children Protection Center of Philippine National Police City of San Fernando, Pampanga

- 1. Relief operation during the pandemic.
- 2. Regular seminar and training

- 3. Rescue operations (in partnership with other agencies) of victims of trafficking.
- 4. Linkages among different government and non-government agencies

Recommendations

The following are the recommendations in responding GBV:

Women NGOs and CGOs	Government Service Providers
 To strengthen women organizations For the PNP to conduct appropriate and immmediate response The local police must continue to respond quickly and immediately To add personnel or VAWC desk officer for prompt response to GBV To provide training and seminar related to GBV, gender and development and etc. for NGOs, CGOS and barangay officials. 	 To address issues in relation to lack of man power or personnel of the PNP. To have trained officers and other employees related to GBV Other barangays must cooperate in reporting GBV cases and communicate effectively in response to GBV. The barangay officials, VAWC and WCPC office must conduct community check within the barangay and other areas of jurisdiction to see if there is any form of abuse that are not reported because of the pandemic.

Government Service Providers

