UNFPA’s GBV response in Latin America and the Caribbean in 2020

Fact Sheet

This document illustrates a subset of UNFPA’s GBV prevention and response key activities during the COVID-19 pandemic. It does not represent the full scope of UNFPA’s GBV programming in the Latin America and the Caribbean region.

REGIONAL OVERVIEW

The onset of the COVID-19 pandemic has exacerbated the risk of Gender Based Violence (GBV), especially among women and girls. With rising numbers of people enduring acts of GBV, UNFPA is working closely with partners to ensure that GBV is integrated in the COVID-19 and other response. Since March 2020, UNFPA’s GBV interventions have focused on preventing and responding to GBV amidst the challenging realities resulting from the COVID-19. UNFPA has thus prioritized the following programmatic objectives:

1. Ensuring the continuity of essential services
2. Remote service provision and service adaptation
3. Interactions with GBV survivor centers
4. Government and civil society’s capacities in GBV prevention and response programming
5. Strengthening GBV referral pathways
6. Ensuring the continuity of GBV emergency services

INTERVENTIONS HIGHLIGHTS

In the Latin America and Caribbean region, UNFPA designed a technical guide on the provision of remote psychosocial support for GBV survivors during COVID-19 and rolled out capacity building initiatives targeting GBV remote service providers in the region. UNFPA launched the GBV Essential Service virtual course within the framework of Spotlight Initiative, which reached 7,000 public servants in 20 countries. Furthermore, the Essential Services Community of Practice was created as a forum to exchange information and stimulate dialogue and reflection on GBV prevention and response programming between governments, civil society, academia and the United Nations System. As the GBV subsector’s lead within the Coordination Platform for Refugees and Migrants from Venezuela (R4V), UNFPA also developed guidance notes on how to adapt the GBV service provision to the COVID-19 operational environment.

In the sub-region of the Caribbean, UNFPA rolled out a webinar series on GBV in emergencies adapted to the COVID-19 context, and facilitated a virtual Training-of-Trainers for GBV focal points from 6 countries to support the scale up and technical soundness of GBV responses in the Caribbean. UNFPA also conducted a rapid assessment of the comprehensive GBV/SRH/HIV needs among youth to determine the critical gaps that have arisen or been exacerbated by the COVID-19 pandemic in the Caribbean.

ENSURING THE CONTINUITY OF ESSENTIAL SERVICES

Bolivia

In Bolivia, UNFPA guaranteed the continuity of GBV services in rural municipalities and distributed dignity kits and PPE in and shelters for women survivors of violence.

Colombia

In Colombia, UNFPA ensured access to confidential, quality and survivor centered GBV case management in border villages that host refugees and migrants and provided psychosocial services to support survivors’ healing, empowerment and recovery. UNFPA integrated psychosocial support services in the updated referral pathways.

Dominican Republic

In the Dominican Republic, UNFPA facilitated the dialogue between government and civil society institutions that implement GBV response and psychosocial support programs and provided technical guidance to the Ministry of Women in adapting protocols to link survivors to specialized services in a timely and ethical manner.

ECUADOR

In Ecuador, UNFPA rolled out a communication campaign to disseminate GBV prevention messages, which included videos in sign language and radio messages in Spanish and kichwa. Additionally, UNFPA delivered 1500 dignity kits to adolescents and women and ensured they knew how and where to access services in their area.

Guatemala

In Guatemala, UNFPA strengthened the Public Ministry and the ombudsmen’s GBV hotlines and trained the health personnel of the Hospital Network in clinical management of rape, continuity of essential services, self-care and women rights.

Haiti

In Haiti, UNFPA supported health facilities for the provision of clinical management of rape and supported the creation of a free national hotline and the expansion of virtual GBV service provision.

Honduras

In Honduras, UNFPA trained health personnel on the use of rape treatment kits in the municipality of Intibucá. As a response to the Hurricane Eta, UNFPA set up GBV response services in the affected areas, including PSS support, case management and Safe Spaces for women and girls.

Venezuela

In Venezuela, UNFPA created seven Safe Spaces for Women and Girls (WGSS). The WGSS offered an empowering environment for women and girls who acquired new skills, accessed multi-sectorial GBV services and received social support and lifesaving information on issues relating to women’s rights, health, and services.

Saint Vincent and the Grenadines

In Saint Vincent and the Grenadines, UNFPA collaborated with national governments and key stakeholders to develop and launch GBV referral pathways updated to the COVID-19 context.

REMOTE SERVICE PROVISION AND SERVICE ADAPTATION

Aruba, Curaçao & St Maarten

In Aruba, Curaçao & St Maarten, UNFPA supported national authorities in the dissemination of GBV key messages and assessed capacity building needs.

Belize

In Belize, UNFPA supported the expansion of a GBV hotline in the public and provided GBV GBV survivors with information on how to access services in their area.

Cuba

In Cuba, UNFPA supported the remote response to GBV during the pandemic and in collaboration with the Federation of Cuban Women, developed a guidance document which offers methodological and practical resources for personnel who provide survivor centered care for GBV survivors via telephones.

Grenada

In Grenada, UNFPA supported the provision of GBV emergency services (such as emergency travel, medical, and shelter), and also...
strengthened capacities of GBV hotline operators to enhance their skills and knowledge on how to provide an adequate response to survivors seeking help after enduring a GBV incident.

Jamaica
In Jamaica, UNFPA supported the establishment and operationalization of three state-run shelters and a toll-free hotline number. In addition, UNFPA supported the adaptation of GBV referral pathways to the new operational context and supported initiatives to build the capacity of GBV service providers.

Suriname
In Suriname, UNFPA advocated for the expansion of GBV hotlines and tele-counseling services to respond to the increase in violence resulting from the pandemic. UNFPA also developed and launched GBV referral pathways updated to the COVID-19 context.

Trinidad and Tobago
In Trinidad and Tobago, UNFPA supported the implementation of tele-counseling and GBV case management services to ensure GBV survivors can access services despite the state-imposed confinement measures.

Argentina
In Argentina, UNFPA supported the development of a virtual postgraduate course carried out by the Ministry of Women of Córdoba, to train telephone operators that provide remote psychosocial services to men perpetrators of GBV.

Brazil
In Brazil, UNFPA mapped essential services for GBV survivors available during the quarantine period and conducted remote training for professionals from the public and humanitarian network involved in GBV. This included training on clinical management of rape for health professionals in the states of Roraima and Amazonas.

Chile
In Chile, UNFPA supported the revision of protocols for the delivery of the dignity kits drafted by IOM. Moreover, UNFPA worked with other agencies to incorporate a gender and GBV prevention and response lens in the Shelter Administration Manual.

El Salvador
In El Salvador, UNFPA designed a survey to analyze trends of violence perpetrated on the grounds of sexual orientation and a survey on the prevalence of GBV during confinement.

Panama
In Panama, UNFPA provided the national government technical support to generate awareness on GBV prevention and response among public and migration officials who interact with migrant and refugee populations in the border area of Darien.

Paraguay
In Paraguay, UNFPA mentored and provided on the job training to the Ministry of Women and Child Protection’s GBV case management teams, and provided technical assistance to support the adaptation of case management protocols to the COVID-19 operational environment as per international standards.

Uruguay
In Uruguay, UNFPA supported an emergency response to ensure access to shelter to persons at risk of GBV including LGBTI people, migrants and people living with HIV and women at risk of being homeless.

Mexico
In Mexico, UNFPA translated the communication materials on GBV, SRH and maternal health into indigenous languages, supported seven Justice Centers for Women and provided training on clinical management of rape to health facilities.

Nicaragua
In Nicaragua, UNFPA prepared and launched a GBV communication campaign aimed at Afro-Latin American, Afro-Caribbean and Diaspora Women, young people living with disabilities and the LGBTIQ+ population. UNFPA also supported shelter La Esperanza, which serves the indigenous, mestizo and Afro-descendant populations.

Peru
In Peru, UNFPA promoted the adaptation of two awareness campaigns to the context of the Amazon region to reach women living in one of the most affected areas. Moreover, UNFPA adapted the technical guide on GBV remote service provision to the local context.

GBV COORDINATION IN HUMANITARIAN SETTINGS

Bahamas
In the Bahamas, the sub-sector updated the GBV referral pathways and supported the implementation of a GBV response strategy in line with the response plan to Hurricane Dorian and the COVID-19 emergency response plan.