

This resource is for **all staff in development or humanitarian contexts.**

GBV principles & approaches

## Glossary of GBV terms

**Cash and Voucher Assistance (CVA)** refers to all programs where cash transfers or vouchers for goods or services are directly provided to individuals, households, or community recipients, not to governments or other state actors. This excludes remittances and microfinance interventions (although microfinance and money transfer institutions may be used for the actual delivery of cash).

**Child** is defined as any individual under the age of 18, irrespective of local country definitions of when a child reaches adulthood.

**Child early and forced marriage (CEFM)** is any marriage where at least one of the parties is under 18 years of age. Forced marriage is a marriage in which one and/or both parties have not personally expressed their full and free consent to the union.

**Child Abuse and Exploitation** involves one or more of the following:

- **Physical Abuse** can occur when a person purposefully injures or threatens to injure a child. This could take the form of slapping, hitting, punching, shaking, kicking, burning, shoving or grabbing. Physical abuse can be a single or repeated act. It doesn't always leave visible marks or injuries.
- **Emotional Abuse** is inappropriate verbal or symbolic acts toward a child or a pattern of failure over time to provide a child with adequate non-physical nurture and emotional availability. Such acts have a high probability of damaging a child's self-esteem or social competence.
- **Neglect** is the failure to provide a child with (when they are able to do so) the conditions that are culturally accepted as being essential for their physical or emotional development and wellbeing
- **Sexual Abuse** is the actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions
- **Sexual Exploitation / Sexual Misconduct** is any form of sexual activity with a child. It is evidenced by an activity between a child and an adult or another child who are by age or development in a relationship of responsibility, trust, or power, the activity being intended to gratify or satisfy the needs of the other person. It may include, but is not limited to, contact or non-contact activities, the inducement or coercion of a child to engage in any sexual activity, the use of children in sex work or other sexual practices, or exposing a child to online sexual exploitation material, the use of children in the creation of indecent images, performances, or material, or taking sexually exploitative images of children.

**Confidentiality** means keeping all information relating to an individual private, including but not limited to personal identifying information and health concerns unless the individual gives consent for disclosure. People have the right to choose to whom they will or will not tell their story.<sup>1</sup> Even if it is meant to help the survivor, no one should share a survivor's experience without their explicit and informed consent. This includes anonymously sharing the story in communications materials.<sup>2</sup>

<sup>1</sup> Inter-Agency Standing Committee on Gender-Based Violence. [How to support survivors of gender-based violence when a GBV actor is not available in your area](#). 2018

<sup>2</sup> The only two potential exceptions to this are in the case of mandatory reporting laws (e.g., for GBV against a child) or if the survivor's experience is completely anonymized and shared with a GBV specialist for the purpose of guiding the individual who has heard about a GBV incident in how to respond. The survivor should still be informed about why, when, and with whom, any information is shared. CARE programs should be aware of mandatory reporting procedures in the context where they work. Even in these cases, it is critical to only share the information that is absolutely required, and only share with the individual who needs to know. In all other cases, it should not be shared without informed consent.

**Disrespect and abuse in childbirth** entails physical abuse, non-consented care, non-confidential care, non-dignified care, discrimination based on specific patient attributes, abandonment of care, and/or detention in facilities.<sup>3</sup>

**Do No Harm** means considering potential risks associated with your programs and how your intervention might unintentionally increase conflict and violence. Do No Harm means that no project, service, or assessment activity should cause intended or unintended harm at any point. Harm includes, but is not limited to, GBV.<sup>4</sup> Harmful effects are often unintended and can be avoided through analysis of the gender and power norms that exist in communities and putting in place GBV integration measures from the start of the project.

**First-line support** is the immediate, brief, empathetic counseling given to a survivor upon a GBV disclosure. The WHO defines “first-line support” using the acronym “**LIVES**”: **L**istening, **I**nquiring, **V**alidating, **E**nsuring safety, and **S**upport through referrals. It is often also referred to as “psychological first aid”, but also includes safety planning and providing referrals.

**Gender** refers to the economic, political, and cultural attributes and opportunities associated with being male or female. It refers to a socially constructed set of economic, social, and political roles, responsibilities, rights, entitlements, and obligations associated with being female and male, as well as power relations between and among women, men, boys, and girls. One’s gender identity may or may not correlate with one’s sex assigned at birth, may change over time, and may intersect with other factors such as race, class, age, and sexual orientation.

**Gender Analysis** is a systematic approach, usually using a range of social science research methodologies such as desk reviews or primary data collection, to examine problems, situations, projects, programs, and policies to identify the gender and GBV issues and impacts. Gender analysis of a development program involves identifying the gender issues for the larger context (eg., structural factors); specific sites; and the issues and differential impacts of program objectives, strategies, and methods of implementation. Gender analysis should be done at all stages of the development process; one must always ask how a particular activity, decision, or plan will affect men differently from women in areas such as access and value of labor, property access and ownership, access to information and services, and social status.

**Gender-based violence (GBV)** is any form of violence against an individual based on that person’s biological sex, gender identity or expression, or perceived adherence to socially defined expectations of what it means to be a man or woman, boy or girl.<sup>5</sup> The most common forms of GBV are sexual assault, intimate partner violence against women, and child abuse, but GBV also includes physical and psychological abuse, threats, coercion, deprivation of liberty, and economic deprivation, whether occurring in public or private life. GBV is rooted in gender-related power differences, including social, economic, and political inequalities. It is characterized by the use and abuse of physical, emotional, or financial power and control. GBV takes on many forms and can occur across childhood, adolescence, reproductive years, and old age. GBV includes but is not limited to:

- **Intimate partner violence (IPV):** Behavior by an intimate partner that causes physical, sexual, or psychological harm, including acts of physical aggression, sexual coercion, psychological abuse, and controlling behaviors. This definition covers violence by both current and former spouses and other intimate partners. Other terms used to refer to intimate partner violence include domestic violence, wife or spouse abuse, and battering. Dating violence is usually used to refer to intimate relationships among young people, which may be of varying duration and intensity, and do not involve cohabiting. In this tool, IPV is included under the umbrella term of GBV unless otherwise specified.
- **Rape** is defined in this tool as contact between the penis and the vulva or the penis and the anus involving penetration; contact between the mouth and penis, vulva or anus; or penetration of the anus or genitals of

<sup>3</sup> Bowser D, Hill K.: [Exploring Evidence for Disrespect and Abuse in Facility-Based Childbirth Report of a Landscape Analysis](#), USAID-TRAction Project (2010).

<sup>4</sup> CARE. [SAA Global Implementation Manual](#). 2020

<sup>5</sup> Adapted from the [Interagency Gender Working Group](#)'s definition of GBV.

another person by a hand, finger, or other object, however slight. The attempt to do so is known as attempted rape. Rape of a person by two or more perpetrators is known as gang rape.

- **Sexual assault** can include rape but can also include non-penetrative unwanted sexual contact such as molestation, kissing, or fondling.
- **Sexual violence** is any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances, or acts to traffic, against a person's sexuality using coercion, by any person regardless of their relationship to the victim, in any setting, including but not limited to home and work.

**Gender-transformative approaches** create opportunities for individuals to actively challenge harmful **gender** norms, promote positions of social and political influence for women and girls in communities, and address power inequities between persons of different genders.

**Informed assent** is the expressed willingness to participate in an intervention or service after all aspects of the intervention are explained in a manner the participant can fully understand. For children who are too young to give informed consent (definition below), but old enough to understand and agree to participate in services, the child's "informed assent" is sought.

**Informed consent** requires giving participants the opportunity to make an informed decision about whether or not to participate in any intervention, service, data collection, or communications activities. Informed consent requires three elements: information, comprehension, and voluntary consent. All participants should be given information about the purpose of the engagement and how the information will be used.

Age of consent varies by country. Obtaining informed consent is necessary prior to releasing a GBV survivor's information to other parties, including the police. This is especially important in settings where there is a legal mandate to report an episode of violence to relevant authorities. It is crucial that survivors understand the options open to them and are given sufficient information to enable them to make informed decisions about their care. They also must be aware of and have the power to exercise their right to refuse to engage in an action and/or to not be coerced (e.g., being persuaded based on force or threats). **Children are generally considered unable to provide informed consent** because they do not have the ability and/or experience to anticipate the implications of an action, and they may not understand or be empowered to exercise their right to refuse. There are also instances where consent might not be possible due to cognitive impairments and/or physical, sensory, or developmental disabilities.

**Intimate partner:** A husband, wife, cohabiting partner, boyfriend, girlfriend, lover, ex-husband, ex-wife, ex-partner, ex-boyfriend, ex-girlfriend, or ex-lover.

**Lesbian, Gay, Bisexual, Transgender, Queer, Intersex+** (LGBTQI+) is an umbrella term that refers to individuals' sexual and gender preferences, expressions, and identities that may differ from the norm of heterosexuality.

**Marginalized groups or key populations** include but are not limited to: men who have sex with men, LGBTQI+ people, sex workers, persons who inject drugs, prisoners, et al. Some of these populations, such as transgender individuals, may be at higher risk of some forms of GBV.

**Minor** refers to an individual under the legal age of adulthood as per national protocols, typically under age 18. A minor may not be able to consent to receive services in some countries without the informed consent of a parent or guardian.

**Privacy** is being free from intrusion or interruption, without being able to be seen or heard.

**PSHEA – CA** is the acronym used at CARE to refer to the Protection from Sexual Harassment, Exploitation and Abuse, and Child Abuse.

**Referral directories** are lists of post-GBV services compiled through referral mapping.

**Referral mapping** is the process of identifying organizations and institutions which provide services to GBV survivors and collecting their information into a list or directory.

**Referral pathways** are flow charts or job-aids which visually depict the steps a GBV survivor should go through to access care.

**Referral protocols** are documents describing how staff must respond to a GBV disclosure; the roles and responsibilities of each referral partner; what is expected of them in terms of privacy, confidentiality, and respect for the survivor's wishes and dignity; and how data will be collected, managed and analyzed.

**Referral services** are supportive interventions for GBV survivors which include but are not limited to post-GBV health care, emergency shelter, legal aid, psychosocial or mental health counseling, economic opportunities, police, child protection, etc.

**Reproductive coercion** can include threats to coerce an individual to become pregnant against her will, destroying or removing contraceptive methods, preventing women from obtaining contraception, and other means of coercion. Research has linked these behaviors to unintended pregnancy, repeated abortion, and intimate partner violence (IPV).<sup>6</sup>

**Safeguarding** refers to the measures CARE takes to prevent, report, and respond to harm or abuse and to protect the health, well-being, and human rights of anyone who comes into contact with CARE, whether it is CARE Employees and Related Personnel, partners, program participants, and communities.

**School-related gender-based violence** refers to acts or threats of physical, sexual, or psychological violence or abuse that are based on gendered stereotypes or that target students on the basis of their sex, sexuality, or gender identities. SRGBV reinforces gender roles and perpetuates gender inequalities. It includes rape, unwanted sexual touching, unwanted sexual comments, corporal punishment, bullying, and other forms of non-sexual intimidation or abuse such as verbal harassment or exploitative labor in schools.<sup>7</sup>

**Survivor** refers to an individual who has experienced GBV. This term is preferred over “victim,” which can be disempowering.

A **survivor-centered approach** means that “all those who are engaged in violence against women programming prioritize the rights, needs, and wishes of the survivor.”<sup>8</sup> It prioritizes the survivor’s self-determination, choices, agency, autonomy, and rights over secondary considerations such as social norms or organizational reputation. It increases the survivor’s ability to make informed decisions about own care, recovery, and justice. A survivor-centered approach means that the survivor’s rights, needs, and wishes are prioritized when designing and developing GBV-related programming.

The survivor-centered approach can guide professionals—regardless of their role—in their engagement with persons who have experienced GBV. It aims to create a supportive environment in which a GBV survivor’s **rights** are respected, safety is ensured, and the survivor is treated with **dignity** and **respect**. The approach helps to promote a survivor’s recovery and strengthen her or his ability to identify and express needs and wishes; it also reinforces the person’s capacity to make decisions about possible interventions.<sup>9</sup>

<sup>6</sup> Miller E, Silverman JG: [Reproductive coercion and partner violence: implications for clinical assessment of unintended pregnancy. Expert review of obstetrics & gynecology.](#) 2010;5(5):511-515.

<sup>7</sup> USAID: [School-Related GBV Measurement Tool](#) (2020).

<sup>8</sup> UN Women: [Survivor-Centered Approach](#) (2020).

<sup>9</sup> Adapted from IASC Gender SWG and GBV AoR, 2010.