Sitakhela Likusasa Impact Evaluation

Evaluating the Effectiveness of Incentives to improve HIV Prevention Outcomes for Young Females in Eswatini

Standard Operating Procedure - #7 GBV screening and reporting
Screening for GBV and reporting violence and abuse impact evaluation procedure for the Sitakhela Likusasa Impact Evaluation

Document 0 in a series of 20 Standard Operating Procedures

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Standard Operating Procedure - #7 GBV screening and reporting

Screening for GBV and reporting violence and abuse impact evaluation procedure for the Sitakhela Likusasa Impact Evaluation

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1 Introduction to this Standard Operation Procedure (SOP)

The introduction and critical background information relating to the Sitakhela Likusasa Impact Evaluation is provided in SOP#0 (Introduction to the Sitakhela Likusasa).

At baseline, midline and endline and during the administration of all raffle rounds, all participants will be screened to determine whether they have been exposed to violence or abuse prior to the impact evaluation, during the implementation of the impact evaluation or as a result of being part of the impact evaluation. Participants will be informed that they will be referred to the Swaziland Action Group Against Abuse (SWAGAA) for post-abuse services. Procedures are outlined below.

2. Screening for GBV

During all STI testing rounds, midline and endline, participants involved in the impact evaluation will be proactively screened for gender-based violence (GBV) using the Testing and Screening Form (TSF) to determine whether they have been exposed to any form of abuse including emotional abuse, physical abuse, sexual abuse and neglect:

- The screening will be conducted by HTC counselors who will undergo GBV training by SWAGAA on identifying and referring abuse. At the end of each round of testing, the Assistant field manager (AFM) (Biomedical) will send non-urgent referrals to SWAGAA through email.
- For **urgent cases**, the HTC counselor is to contact the AFM immediately and report the case. The AFM will report the urgent case to SWAGAA in 24 hours. Urgent cases are outlined as follows:
  o Cases of sexual abuse that has occurred within the last 3 months.
  o Cases of severe physical abuse or neglect.
- The AFM will then follow up with SWAGAA to ensure that all cases have been attended; follow-ups for urgent cases will take place within one week and two weeks for non-urgent cases.

3. Impact Evaluation procedure for participants who report sexual violence during implementation

For any participant who is experiencing sexual violence, HTC counselors will inform the AFM through a phone call and a whatsapp message. The case will be reported using the participant’s ID. The AFM is to report the case to the SWAGAA case manager within 24 hours. The case will then be followed up by a SWAGAA case manager.

*For survivors who report within 72 hours of the incident*, urgent measures must be taken to ensure they are referred to SWAGAA.

*For participants who either report sexual violence or are found to have experienced sexual or domestic violence during the HTC counseling sessions after the 72-hour time frame*: these participants will be provided with post-violence counseling by the HTC counselors and referred to the AFM who will initiate SWAGAA referral for further counseling and support.

- A follow up call will be made by the AFM to SWAGAA within a week to ensure the participant is receiving post-violence counseling.

1 During endline data collection a new GBV tool designed by the World Health Organization was used for screening purposes.
4. Impact Evaluation procedure for dealing with sexual violence and abuse in the past

The HTC counselor will complete the GBV screening tool for every participant participating in that round prior to testing.

For cases of sexual violence and abuse that have occurred within the last three months, the HTC counselor will call the AFM immediately to report the case. The AFM, within 24 hours will have to report the case to a SWAGAA case manager for urgent follow-up. For cases that have occurred longer than 3 months ago, the AFM will report them to SWAGAA in the same manner as non-urgent cases.

The following process will then be followed:
- SWAGAA will support the participant to access appropriate counselling and follow up. This might include, if the participant prefers, to be escorted to a facility, or arrange for someone else (a female or trusted friend) to escort the participant.
- Remind the participant that they are free to opt out of the impact evaluation at any time.

5. Impact Evaluation procedure for participants that report any other kind of abuse other than sexual violence

The following process will be followed:
- For urgent cases such as instances of severe physical abuse or neglect that has occurred within the last 3 months, the HTC counselor is to call the AFM immediately to report the case and the AFM will report the case to a SWAGAA case manager within 24 hours.
- Non-urgent cases will be reported to SWAGAA by the data manager after the end of the round of testing.
- The medical supervisor will follow up with SWAGAA within a week for urgent referral and 2 weeks for non-urgent referrals to ensure that the participant has accessed the counselling and care they need.
- The HTC counselor will remind the participant that they are free to opt out of the impact evaluation at any time.

6. Follow up for participants referred for GBV

- SWAGAA will complete the SWAGAA follow up form (SFF) on survey solutions for every follow up they do.
- The Assistant field manager (biomedical) will make a follow up on participants who eventually did not go to SWAGGAA and find out the reasons
- If they are willing to be referred again, the AFM will refer them again and follow up within a week

SWAGAA would complete a feedback form on survey to go / survey solutions on the results of their follow