



**SAFE  
CONSULTATIONS  
WITH SURVIVORS  
OF VIOLENCE  
AGAINST WOMEN  
AND GIRLS**





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# INTRODUCTION

## **Violence against women and girls (VAWG) is the most pervasive of human rights violations, rooted in unequal power relations, structural inequalities, and discrimination**

It is estimated that, globally, 736 million women - almost one in three - have been subjected to physical and/or sexual intimate partner violence, non-partner sexual violence, or both at least once in their life (30 per cent of women aged 15 and older). This figure does not include sexual harassment.<sup>1</sup>

Violence against women and girls is both a cause and consequence of gender inequality. It can take many forms, including: domestic violence; sexual violence, including sexual harassment or rape; femicide; human trafficking; female genital mutilation; child marriage; or online and ICT-facilitated violence, e.g., cyber-bullying or doxing.<sup>2</sup> Violence affects women and girls throughout their life cycle, irrespective of income levels or their social status. Many women and girls who experience intersecting forms of discrimination based on age, sexual orientation, gender identity, ethnicity/race/caste, disability or health status and national origin, face increased risk of violence.

Since the onset of the pandemic, nearly 1 in 2 women (45%) have reported that they or a woman they know experienced a form of violence.<sup>3</sup> The latest femicide figures from a joint UNODC – UN Women report show that, in 2021, at least 45,000 women and girls worldwide were killed by intimate partners or family members.<sup>4</sup> Most violence against women is perpetrated by current or former husbands or intimate partners.

VAWG has numerous short and long-term impacts for survivors' physical and mental health, well-being

and safety. Research has established that women and girls experiencing violence utilize health services more frequently and are more likely to report a worse health status and quality of life than those who do not experience violence.<sup>5</sup> VAWG also has a ripple effect for families, communities, wider society and the economy. For example, lost employment and productivity (work and school), impede long-term economic growth. If unaddressed, VAWG has serious cost implications and consequences for poverty reduction and development, including hampering efforts to achieve the SDGs and the 2030 sustainable development agenda.

This guidance provides information, including practical steps, safety measures, and actions that women's organizations, Government agencies and coordinating bodies can take to incorporate the voices of VAWG survivors into systemic reform efforts, through consultations with survivors. Focus group discussions (FGD) and individual interviews with survivors are often not conducted due to the fear that doing so will re-traumatize survivors. In addition, many who would like to engage with survivors do not do so because they are unsure about appropriate and useful questions to ask survivors.

It is written for anyone intending to conduct focus group discussions (FGD) or individual interviews with VAWG survivors to obtain their inputs into effective systemic reform.

- 1 World Health Organization, on behalf of the United Nations Inter-Agency Working Group on Violence Against Women Estimation and Data (2021). [Violence against women prevalence estimates, 2018. Global, regional and national prevalence estimates for intimate partner violence against women and global and regional prevalence estimates for non-partner sexual violence against women](#)
- 2 <https://www.unwomen.org/en/what-we-do/ending-violence-against-women/faqs/types-of-violence>
- 3 <https://data.unwomen.org/publications/vaw-rga>
- 4 <https://www.unwomen.org/en/digital-library/publications/2022/11/gender-related-killings-of-women-and-girls-improving-data-to-improve-responses-to-femicide-femicide>
- 5 Grisso et al. (1999), Kyriacou et al (1999), Bonomi et al. (2006).

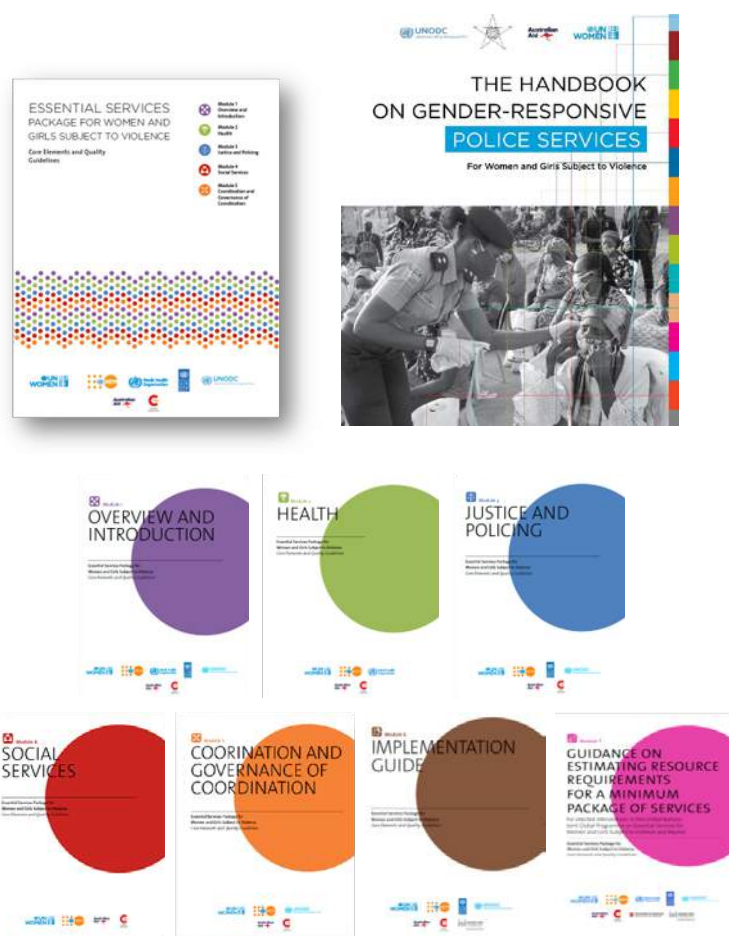
# THE ESSENTIAL SERVICES PACKAGE

***The Essential Services Package for Women and Girls Subject to Violence: Core Elements and Quality Guidelines provides technical guidance on how to provide quality essential services and responses across the health, police, justice and social services sectors and coordination mechanisms***

The Essential Services Package: Core Elements and Quality Guidelines (Essential Services Package)<sup>6</sup> was developed by the United Nations Entity for Gender Equality and the Empowerment of Women (UN Women), the United Nations Population Fund (UNFPA), the United Nations Office on Drugs and Crime (UNODC), the World Health Organization (WHO) and the United Nations Development Programme (UNDP), and launched in 2015, as an initiative of the UN Joint Global Programme on Essential Services.

The Essential Services Package reflects the vital components of coordinated multi-sectoral responses for women and girls who have experienced violence. The provision, coordination and governance of essential health, police, justice and social services can significantly mitigate the consequences that violence has on the well-being, health and safety of women and girls' lives, assist in the recovery and empowerment of women, and stop violence from reoccurring.

The guidance on *Safe Consultations with Survivors of Violence against Women and Girls* should ideally be read in conjunction with the guidance set out in the *Essential Services Package: Core Elements and Quality Guidelines* and other sector-specific guidance and tools, e.g., the *Handbook on Gender Responsive Police Services for Women and Girls Subject to Violence*.<sup>7</sup>



6 <https://www.unwomen.org/en/digital-library/publications/2015/12/essential-services-package-for-women-and-girls-subject-to-violence>

7 <https://www.unwomen.org/en/digital-library/publications/2021/01/handbook-gender-responsive-police-services>



# A SURVIVOR-CENTERED APPROACH

The Essential Services Package (ESP) has overlapping principles that underpin the delivery of all essential services and coordination of those services. Those principles include:

- A rights-based approach
- Advancing gender equality and women's empowerment
- Culturally and age appropriate and sensitive
- Victim/survivor-centered<sup>8</sup>
- Ensuring safety
- Perpetrator accountability

A survivor-centered approach places the human rights, needs and desires of women and girl survivors as the central focus of service delivery. One of the key challenges faced by countries implementing guidance on multi-sectoral response is to ensure that survivors' voices and input are

incorporated into ending VAWG initiatives. Survivors of violence against women and girls (VAWG) across the world have diverse needs and face different risks. It is imperative that policy makers, civil society organizations and those wishing to engage survivors learn about their experiences with systems intervenors and integrate lessons learned into their work, as well as incorporate survivor voices into systemic reform. The impact of decisions and actions taken by government, including health, police, justice, social services agencies profoundly affect survivors' lives. The input and voices of survivors should be incorporated into policies, practices and procedures that are developed as part of VAWG response, including implementation of the Essential Services Package. Through focus groups or interviews, survivors can describe their needs and the nuance of how a policy and/or practice impacts their lives.

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## TWO PRIMARY WAYS TO CONSULT WITH SURVIVORS

There are several ways to incorporate the voices and input of VAWG survivors into response programming. This guide focuses on two key methods to engage with survivors to incorporate their voices and input into the implementation of the ESP:



**1) Group interviews with survivors, more commonly described as focus group discussions (FGD); and**



**2) Individual survivor interviews.**

FGD with survivors and individual survivor interviews can collect qualitative data from survivors and give them an opportunity to provide input on how to improve the response to VAWG. This guide provides a step-by-step process on how to conduct FGDs with survivors and individual survivor interviews.

Throughout this guide, the icons for group and individual survivor consultations indicate when a technique or consideration fits with its respective approach.

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8 Essential Services Package for Women and Girls Subject to Violence (2015). Module 1: Overview and Introduction. Page 23. Available at: <https://www.unwomen.org/sites/default/files/Headquarters/Attachments/Sections/Library/Publications/2015/Essential-Services-Package-Module-1-en.pdf>



## What is a Focus Group Discussion (FGD) with survivors?

A FGD is a discussion with a group of survivors of VAWG who have common interests, experiences or characteristics. FGDs are convened by a facilitator who engages with the group as a way to learn and document information about issues they face. FGDs are also designed to elicit the opinions, attitudes, beliefs, and input of survivors. Unlike the one-way flow of information in a one-on-one interview, FGDs generate data through the “give and take” of group discussion. During a FGD, inquiries and responses build on each other and themes arise. Discussion often moves from the personal and individual experiences to revelations about institutions and the community,

while identifying changes that are needed. Listening as survivors share and compare their different points of view provides a wealth of information – not just about what they think, but why. They also provide information on the impact of interventions on survivors. For example, in a FGD with survivors who had been arrested for domestic violence, practitioners learned that survivor defendants stopped calling the police for protection from perpetrators after they themselves were arrested. The survivors overwhelmingly believed that what they did should have been considered self-defense because they had experienced long-term abuse and violence.



## What are individual survivor interviews?

Individual survivor interviews are one of the most common means for collecting qualitative data from survivors. A productive format is a semi-structured interview – using an open framework that allows for focused yet conversational communication. This is useful for collecting information about experiences with systems that address VAWG and survivors’ reactions to them. Unlike a survey questionnaire in which questions are formulated in advance, semi-structured interviews start with more general inquiries. Relevant topics are organized into an interview guide. Not all questions are identified in advance; in fact, most questions evolve throughout the interview, reflecting and probing further into the information being revealed. This allows for flexibility to elicit details and build on information learned.

Semi-structured interviews require skill on the part of the interviewer. For example, if the interviewer plans to ask the survivor their experience with the police or criminal justice agency, it is critical that the interviewer has an in-depth understanding of the relevant agency. This knowledge greatly informs the interviewer’s ability to listen for issues that warrant additional inquiry. Face to face conversation with survivors on highly sensitive matters requires discretion and the ability to interpret and respond to both verbal and nonverbal cues.

Some survivors prefer to meet in individually with an interviewer instead of participating in a FGD due to confidentiality concerns or hesitancy to talk in front of other survivors.



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# WHY CONSULT WITH SURVIVORS AND WHAT CAN BE GAINED BY ENGAGING WITH THEM?

## Consultations with survivors allow for direct input on whether the system or a specific intervention is harmful or helpful

### BOX 1

#### What can be learned from FGD and individual interviews with survivors?

- Identification of survivor needs and concerns.
- Identification of strengths and gaps in public policy, survivor assistance programming, survivor services, and coordinated efforts that seek to benefit survivors.
- Information about how survivors think or feel about a particular topic or system intervention.
- How personal experiences of violence are helped or harmed by institutional responses.
- The disjuncture, the divide, between people's experience and how the institution processes cases can be identified.
- How to improve the planning and design of new programmes to help survivors.
- Possible indicators for monitoring and evaluating existing programmes.
- Input into an existing strategy or effort to address VAWG.
- Survivors' ideas about system interventions and reforms that were designed to better protect them and hold violent offenders accountable.
- Where survivors go for help when they experience VAWG.
- Experiences of survivors who may not be represented in official statistics, particularly those in under-represented and marginalized communities.

As countries implement initiatives and guidance on VAWG response, such as the Essential Services Package, it is becoming increasingly apparent that, to ensure a survivor-centred approach, there must be opportunities for survivors to provide input on proposed reforms. The Essential Services Package (ESP) provides information on how to provide survivors with greater access to a coordinated set of essential and quality multi-sectoral services. Those who work to address VAWG should not make assumptions about survivors' needs or their lived experiences. Consultations with survivors allow for direct

input about whether the system or a specific intervention is harmful or helpful. They also assist intervenors in determining the survival mechanisms that women employ to deal with the violence they experience, both on their own, and with the help of their families and friends. This is especially true for women who have no access to formal services. Understanding how survivors create pathways to a life free of violence improves the work of intervenors and more effectively supports the goals of guidance such as the Essential Services Package on ensuring safety and accountability. In addition, there is

an opportunity to document how survivors would design a response to VAWG and why. Not only can they critique what is in place but they can often say how they would prefer the response to unfold. Survivors' lives are impacted by systemic changes and they should have a right to give voice and influence to the changes that affect their lives.

Consultations with survivors also provide a means for obtaining greater insights into the settings and cultural contexts in which VAWG occurs. These consultations also allow for a deeper understanding of the dynamics of violence and abuse and how survivors, their children and communities are affected by VAWG.

## SAFETY AND ETHICAL ISSUES WHEN CONSULTING WITH SURVIVORS

Conducting consultations with survivors raises important ethical, confidentiality and safety challenges. The physical safety and emotional well-being of survivors and facilitators can be compromised if there is no adequate planning and precautions are not taken.

Also, consultations with survivors will fail if interviewers are judgmental or critical of survivors. Open, engaged listening is a key component of a successful consultation.

Ethical and safety considerations and appropriate planning and precautions for conducting FGDs and individual interviews include:

### 1. Informed Consent

Survivors need to be informed about the nature and purpose of the project, and what will happen in the focus group or interview. They also must be informed and give consent to any planned disclosure of the information that they provide. They should be informed about any recordings or notes to be taken in the interview and told how/where the information will be stored, who will have access to it, and when it will be destroyed. They should also be given a contact for follow up.

### 2. Confidentiality

Survivors' decision to participate in a FGD with survivors or an individual interview may be dependent upon whether strict confidentiality is offered to all participants.

This is especially important in small, rural and remote areas. Those conducting consultations with survivors must be clear about confidentiality guidelines and restrictions and document such restrictions in writing.

### 3. Private Setting

Survivors should be assured that the setting for the consultation is safe, private, and accessible. The consultation should be out of sight and sound of other persons.

### 4. Autonomy

Survivors' autonomy must be supported throughout the consultations. For example, if a survivor wants to end their participation, they must be given the freedom to leave the focus group or reschedule the individual interview.

### 5. Recording Interviews and FGDs

Recording and/or documenting survivors' statements is important to ensure their input is considered in reforms, policymaking, programme design, and training. However, since keeping survivors' identity and location private is paramount to ensuring safety, guidelines should be established for analyzing, storing, reporting and destroying information from survivors. If possible, notes should be taken by a notetaker and the consultations with survivors should be audio recorded and transcribed. If a recording is not possible, the interview notes should be completed immediately

after the interview in a more detailed way. It is best to analyze the information from the notes at the end of each day when consultations take place with survivors. This can be done with the interview team or group. However, notes from a notetaker with no recording will not have the same level of detail that

can be found in a transcript of consultations with survivors. For survivor consultations that are recorded, a transcript that is redacted should be created after the recording is made and a meeting scheduled of all team members to review what they have read in the transcript prior to the meeting.

## WHO SHOULD PARTICIPATE?

The purpose of the consultations with survivors should guide the selection of participants. In general, survivors should represent a range of geographic regions, ages and include survivors from marginalized communities. When choosing survivors for consultations, the facilitators should consider the group of survivors they seek to hear from, set that criterion, and then conduct the individual interviews or FGD. For example:

Purpose: To best understand the medical and psycho-social needs of survivors who have reported their violence to the police.

ESP reference: Module 3: Justice and Policing survivors who have reported violence experienced to the police. Essential Service 3: Investigation, Core Element 3.2: Victim/survivor medical and psycho-social needs:

Seek participant survivors who:

- Reported the violence they experienced to the police
- Experienced a range of victimization tactics and harm
- Reported the violence to the police at least one year ago
- Represent varying regions or precincts of the police agency
- Represent marginalized communities
- Will participate voluntarily
- Are at least 18 years of age and represent a range of ages

Purpose: To better understand why survivors have not reported the violence they experienced to the police.

ESP reference: Module 3: Justice and Policing survivors who have reported violence experienced to the police. Essential Service: 1. Prevention, Core Element 1.2: Support efforts to raise awareness and promote the unacceptability of men's and boys' violence against women

Seek participant survivors who:

- Have not reported the violence they experienced to the police
- Have experienced a range of victimization tactics and harm
- Represent varying regions or precincts of the police agency
- Represent marginalized communities
- Will participate voluntarily
- Are at least 18 years of age and represent a range of ages

Purpose: To gain insight and input from survivors on the development of effective public awareness materials for victims of intimate partner violence and non-partner sexual assault.

ESP reference: Module 2: Health Services. Essential Service 1: Identification of Survivors of Intimate Partner Violence, Core Element 1.1: Information

Seek participant survivors who:

- Are survivors of gender-based violence
- Have experienced a range of victimization tactics and harm
- Represent varying regions of the targeted group

- Represent marginalized communities
- Will participate voluntarily
- Are at least 18 years of age and represent a range of ages

Purpose: To provide input to shelters and crisis centers on individualized and group counseling offered.

ESP reference: Module 4: Social Services. Essential Service: 8: Psycho-Social Support and Counselling, Core Element 8.1

Seek participant survivors who:

- Have experienced a range of victimization tactics and harm
- Have utilized the services of a crisis center or shelter
- Have experienced individualized or group counseling in a crisis center or shelter
- Are no longer utilizing the services of the crisis center or shelter
- Are at least 18 years of age and represent a range of ages
- Do not know each other
- Will participate voluntarily
- Are from rural, remote and urban settings

Survivors who participate in consultations should also be similarly situated.



When choosing survivors for FGDs, the facilitator should consider the group of women they seek to hear from, set that criterion, and then conduct the FGD. For FGDs, the survivors should generally not know one another. This helps to address confidentiality,

inhibits participants from clustering together or dominating group discussion. It also promotes the goals of unbiased data gathering and counters the perception of a preconceived agenda.

If the goal of a FGD with survivors is to examine a particular system or intervention, separation between survivors who have engaged with the system and those who have not, is recommended. Survivors with similar situations and experiences will draw from each other's comments and enhance the discussion.



When choosing survivors for individual interviews, the facilitator should consider the group of women they seek to hear from, set that criterion, and then conduct the individual interviews.

An Example:

In the Essential Services Package, Module 3, Essential Service 3: Investigation, Core Element 3.2 states; "Victim / survivor medical and psycho-social needs are addressed." This core element highlights the importance of attending to victims' needs during a criminal investigation. FGDs and individual interviews can be organized to gain a deeper understanding of these needs. Participants for consultations with survivors should not be all be from the same jurisdiction. Generally, it is best to avoid engaging participants who have recent experiences with the violence and abuse; some level of distance between what they have experienced and the system is preferable. And, as with FGD participants, individual interviews should be conducted with survivors from a range of precincts or regions of the police agency; and should include survivors from marginalized communities.

## SIZE OF GROUPS AND NUMBER OF CONSULTATIONS



Focus groups are most productive with four to ten survivor participants. Yet expanding the invitation to between eight and twelve survivors is recommended, as it is common for some survivors

not to attend. Even survivors who have agreed to attend may have some last minute engagements and not attend. This is understandable and to be expected. Given this attrition, it may be tempting to increase the

number of invitations. However, it is important to keep in mind that the larger the group, the more difficult it is to manage interactions. It may also limit how many survivors are able to fully participate.

Organizers of FGDs should conduct as many FGDs as needed to meet with at least 20-25 survivors in total. When it is apparent that no new themes are emerging from the conversations, further FGDs are not likely necessary. The goal is to conduct as many sessions as

needed to obtain as accurate a sense of the issues as possible.



For individual survivor interviews, a minimum of 5-6 survivors for any particular subject matter is best. Here again, the goal is to speak to as many survivors as it takes to be sure that all the main themes have been addressed. When no new themes are emerging, the inquiry can end for this consultation.

## LENGTH OF CONSULTATIONS

Most focus groups and survivor interviews are 90 minutes to two hours in length. If they are two hours or longer, it is necessary to build in breaks to allow participants time

to relax and refresh. It is important to let survivors know that they have the right to leave the FGD or individual survivor interview at any time.

## WHO SHOULD ENGAGE WITH SURVIVORS?

When engaging survivors to participate in either method of consultation, safety for all involved must be prioritized. Crisis centers, shelter and community-based organizations have the most contact with survivors and are often willing to help engage them. They often have significant experience evaluating

specific safety issues in a country or region and the risk of continued violence experienced by the women and girls they support. Crisis centers, shelters and community-based organizations also have the most knowledge about survivors and the information needed to conduct safe consultations with survivors.

## FINANCIAL COMPENSATION FOR ENGAGEMENT

Organizations that engage participants for a FGD or survivor interview should receive financial compensation for their time and efforts. Often, VAWG survivor organizations provide support and assistance in engaging participants for a FGD or survivor interview. In addition to engaging, they often provide a safe place in which

to conduct the FGD or interview, as well as childcare for survivors who need it, and specialized support for survivors who may be triggered by the discussion or interview. The efforts and time to engage participants in the consultations should be acknowledged through financial compensation.



# HOW TO ENGAGE SURVIVORS

The engagement of survivors must prioritize their safety. Flyers, correspondence, and telephone contacts should be as 'neutral' as possible. Most survivors disclose their experience of violence to very few people. Some do not disclose to anyone. Thus, in addition to protecting a woman or girl's physical safety, it is equally important to protect her privacy. For example, a "women's health study" is a more neutral title for a focus group or individual survivor interview. It is important to know whether, when and how it is safe to call, text, or publish a flier/letter. As noted above, staff at crisis centers, shelters, and community-based organizations with expertise in VAWG can typically provide good guidance on the

method or method(s) that work best and are the safest for women and girls in their community.

Survivors can be engaged through:

- Telephone calls,
- Fliers in health facilities,
- Fliers in social service organizations,
- In-person communication with shelters and crisis centers staff,
- Text/WhatsApp, and
- Social media



## Sample telephone script for engaging survivors in a focus group

The following is a sample telephone engagement script used by a crisis centre. In the following example, the organizers' goal was to identify domestic violence survivors who had contact with the local police agency for inclusion in a FGD. The objective of the consultation was to learn if the survivors felt their contact with the police enhanced or diminished their safety.

*The Domestic Abuse Project is currently hosting a series of Listening Sessions and would like to invite you to join us to share your experiences with the Manila Police District (MPD) as well as your suggestions for change.*

*We are welcoming survivors who have engaged with the local police for the purposes of support for domestic violence within the last three-year time frame (2018-2021). A residence in Manila is not required for participation. The only requirement is that you have had an interaction with the MPD within the last three years.*

*The purpose of these listening sessions will be to learn about your experience engaging with the MPD. In general, we will be asking survivors if their experience enhanced or diminished their safety and well-being.*

*Each participant will receive \$2,000 pesos in cash in recognition of their participation. We will also provide funds for childcare and transportation, if needed.*

*The listening session will be facilitated by staff of Global Rights for Women. Our staff at Domestic Abuse Project will also be present in the room. Your participation in the listening session will be confidential. We will document and identify themes that develop during the listening session. If you decide to join us, we will ask you to sign a brief form that acknowledges confidentiality, as well as acknowledges the receipt of the \$2,000 pesos. Is this something you would be interested in participating in?*

For the safety of survivors, it is important that this type of message not be left as a voicemail.



# COMPENSATION FOR SURVIVOR PARTICIPATION

It is important to show that the project sponsors value the survivor's time and information. This value can be conveyed by providing financial compensation, childcare

(when needed), transportation and food for survivors who participate in focus groups and survivor interviews. The section below explores each of these in more detail.

## Financial Compensation for Survivors

Local women's support service organizations can also provide a recommendation of what amount and how to provide for financial compensation to survivors. It is important to provide the financial compensation, ideally in cash, directly after the FGD or individual interview is

complete. Providing a check or electronic payment could compromise the safety of the survivor if the perpetrator sees evidence that the survivor participated in a discussion. Another option for a survivor stipend may be a gift card to a local merchant.

## Childcare

For many survivors, participation in an FGD or individual interview, will not be possible without care for their children. Thus, providing childcare or financial

compensation to survivors for them to arrange their own childcare, is recommended.

## Transportation

Organizers should plan for transportation. Survivors should be provided transportation or compensation for costs. If transportation is provided, safety issues for the pick-up and drop-off locations should also be considered.

### BOX 2

#### Compensation for Survivors who Participate in a Consultation

Organizers should provide:

- Stipends for survivor participation
- Childcare or reimbursement for this care
- Transportation or reimbursement for travel

# WHERE WILL THE SURVIVOR CONSULTATIONS TAKE PLACE?

Organizers of FGD and individual survivor interviews must consider where and when the session will take place. The space must be private and large enough to accommodate the number of survivors estimated to attend. If

interpreters are needed, the space must accommodate extra room for them and their equipment. In addition, if child care will be provided on site, a room out of sight and sound of survivors is required. The location must

be kept confidential in order to address survivor safety. Women's support services and government buildings with private rooms have been used as spaces for FGDs and individual survivor interviews. Considerations should also be made for survivors with physical disabilities. If the FGD or individual survivor interview is focused on a particular government agency or survivor support service, those spaces could feel intimidating and should not be used. Local women's support organizations are best situated to identify locations where survivors feel most comfortable.

### BOX 3

#### Considerations for the location of in-person survivor consultations

- Private space where confidentiality can be ensured
- Space large enough to accommodate the number of survivors
- Room for interpreters, if needed
- If childcare is provided, a separate room for children
- Space separate from the institution that is the focus of the consultation
- Space accessible for disabled survivors

## WHAT TIME OF DAY SHOULD SURVIVOR CONSULTATIONS TAKE PLACE?



FGDs with survivors are often held in the early evening during a mealtime, after regular working hours. However, in some communities it is not safe for survivors to travel during the evening because of gang and street violence. During the engagement process, organizers should poll survivors about what time of day they would prefer. The time of day selected may also impact whether childcare and transportation is needed to support the participation of survivors.



When scheduling individual interviews, organizers should poll survivors about blocks of time that the interviewer(s) may be available and then let the survivor choose which appointment times work for them. Note that a survivor who initially declines being interviewed or one who hears about the project from others may reach out for the opportunity for their voice to be heard. It can also be very useful for interviewers to have as much flexibility as possible to hear from these survivors. It is useful to consider on-line or phone interviews to accommodate survivors.

### BOX 4

#### Considerations for what time of day to schedule survivor consultation sessions

- Allow for input from survivors about what time of day works best to engage survivors
- Consider whether sessions will be in-person or remote (over the phone or video conference)
- Consider offering a meal during a mealtime and providing food for in-person focus group sessions
- Many survivors may not want to travel to and from the focus group or interview during hours of darkness.
- Community and gang violence can affect when it is safe for survivors to travel

# CONSULTATION PERSONNEL: WHO SHOULD BE ‘IN THE ROOM’ IN ADDITION TO SURVIVORS?

When conducting FGD or interviews with survivors, it is important to consider who will be involved in addition to the survivors themselves. For example, if survivors are being asked about their experience with the police, it is important that no one from the police agency be present in the room.



For a FGD with survivors, a few additional roles beyond facilitators and notetakers are important. During the focus group, a survivor may need a break, or even choose to leave the session because of the sensitive nature of the discussion. For this reason, it is important that the facilitator and the notetaker are not the only persons present. A trained survivor support person should be available to check on any survivor who leaves the room. If childcare is needed, qualified child care providers should be present. In addition, it is critical that persons trained in providing support to survivors are available to meet with survivors at the conclusion of the interview or focus group. It is possible that survivors who participate may need advocacy or emotional support following the focus group or interview. If facilitators have this expertise, they may offer this in addition to

the designated survivor support person. In summary, the roles needed are:

- Manager of the recording device
- Notetaker (2 if the session is not recorded)
- Advocate to support survivors who may need to leave the room
- Facilitator(s) – one to two
- Qualified childcare providers
- Interpreters (when needed)
- Host for those who accompany survivors to a FGD

For each of the roles listed above, it does not need to be a separate person for each role. One person can take on several of the roles listed above. It is important to pay attention to and care for those (including interpreters) who are present in the room during the survivor consultations, especially those who do not work with survivors on a regular basis. They may be impacted by the stories shared; it is important to talk about ways to cope with what they will hear during the consultations. Consideration should also be given how these reactions affect the survivors.



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# WHO SHOULD CONDUCT THE SURVIVOR CONSULTATIONS? HOW MANY FACILITATORS SHOULD THERE BE?

The facilitators of the FGDs and individual survivor interviews should have knowledge about how survivors of VAWG can be victimized and re-victimized. In order to promote openness without fear, employees of the institution being reviewed should not facilitate the session or be present in the room. For example, if the survivors will offer experience about a shelter, the facilitator should not be associated with the shelter. It is important that the facilitator conducting the consultations with survivors does not have a vested interest in defending the system's response. Any bias an institutional representative may have could inhibit the level of transparency these conversations try to evoke. However, the facilitator should have a deep understanding about the shelter policy and practice. In addition, survivors from marginalized communities

should have access to a facilitator who is from a similar cultural background and who uses their first language to facilitate the consultations with survivors.

The person(s) facilitating the FGD, or individual survivor interviews should:

- Have a deep understanding of the institution being analyzed
- Not be associated with the institution being analyzed
- Have experience and knowledge of the dynamics of VAWG
- Be from the same cultural experience and speak the same first language

# SUPPORT FOR SURVIVORS DURING AND AFTER THE CONSULTATIONS

Typically, survivors who have accepted the invitation to join a consultation are signaling they want to be heard. The role of facilitators, interviewers, and support persons is to set conditions before, during, and after the session that helps survivors express themselves. It is important to do everything possible to avoid survivors' feeling a renewed sense of crisis and leaving the session. Facilitators can avoid this by checking in with survivors throughout the consultation to ensure they are doing okay, giving survivors an opportunity to change the pacing if necessary, and providing a list of resources for additional support at the beginning (best) or end of the session (good).

For remote consultations, advance planning for unexpected disconnections is important.

The focus of consultations is to hear survivors' experience with community and legal system responses and interventions; consulting with survivors should not require them to re-tell their trauma experience. Understanding a survivor's experience with an institution or survivor organization typically involves a minimal amount of detail about the experience of violence itself. Facilitators can initiate the consultations with general questions, allowing survivors to share more details as they see are relevant. Provide space for them to do so.

It is important that facilitators be prepared for survivors feeling a range of emotions when discussing their experiences. Many survivors have described the failure of response systems as further victimization. Being blamed for violence they suffered is common. It is also common

for survivors to be told to be quiet and forget about the victimization to protect themselves from ridicule, shame, or further risk. It is important for facilitators to keep this in mind during the consultations, in order to build trust. Those experiences may themselves have been traumatizing.

## CONFIDENTIALITY AND INFORMED CONSENT

Confidentiality is a critically important component of FGD and individual interviews. Survivors must be informed of the limits of organizer's ability to ensure confidentiality. Participation in a session should not

proceed without a survivor's informed consent, and their consent must be received in writing. Informed consent should include clear information to survivors about how the information survivors provide will be used.

### **What should be included in a consent form**

A statement of consent should be provided to all survivors who participate in consultations of either focus groups or interviews. Survivors should be given the opportunity to read and understand what will happen during the session and know the risks and benefits. A sample consent and confidentiality form can be found in the appendices.

As survivors may be talking about their own life experience of violence and/or how others responded, it is likely that sensitive issues may arise and trigger painful memories. The consent form can help survivors prepare for this.

The consent form can also note that support and resources will be available during or after the session. This is important information for survivors, so as they can make an informed decision as to whether to proceed with the consultation.

Although every effort should be made to ensure confidentiality, there is a risk that other participants or observers might share information that they hear during the consultation and thereby not honor confidentiality. A consent form should indicate any limitations organizers have to ensure confidentiality and what risk survivors

may face if they participate. If the organizers become aware of a violation of confidentiality, they should immediately inform the survivor whose confidentiality has been violated.

The decision whether to participate in a FGD or individual survivor interview should not affect a survivor's current or future relations with any service organization or government agency. If a survivor decides to take part in a FGD or individual survivor interview, they are free to withdraw at any time without any impact on those relationships. A statement to this effect should also be included in a consent form.

There are also benefits to participating in a FGD or individual survivor interview that can be stated in the consent form. For example, they provide the opportunity to survivors to have insight into the impact of intervenors' actions and suggestions for reforms. In addition, many survivors who have participated in FGD and individual survivor interviews have made new and long-lasting connections with other survivors. They often report leaving the experience feeling empowered. Ultimately, the goal is to improve the safety of survivors and their children.



# RECORDING AND NOTE-TAKING IN CONSULTATIONS WITH SURVIVORS

It is advisable to audio record the sessions or if that is not possible, detailed notes are necessary. If there is an audio recording, only a redacted transcript should be made available for viewing by others.



It is also important to inform survivors of the benefits of audio recording and how it will be used. Organizers should explain that the benefit of an audio recording is that it most accurately captures the survivors' statements. Before audio recording a FGD with survivors, the organizers must receive permission from each person.

If survivors are not comfortable with a recording device, then it is recommended to have two notetakers to record as many details as possible.



For individual interviews, each survivor should be consulted about whether they are comfortable being recorded. Again, as with FGDs, it is important to explain the benefit of the recording, who will have access to the recording, and when the recording will be destroyed. It may also be useful to offer survivors the option to strike any section or response from the recording or notes. As recordings do fail from time to time, it is important to also have an organizer take notes. The interviewer may also take a few notes, if this can be done without compromising the connection between interviewer and survivor.

## GUIDE FOR THE FACILITATOR: QUESTIONS TO ASK SURVIVORS

In preparation for the FGD and individual survivor interviews, organizers and facilitators should develop list of questions for survivors. Input from multi-agency coordination bodies is helpful in the development of these inquiries. As noted above, facilitators should be familiar with the policies and procedures of the institution that is the focus of the consultation. This will inform the inquiries to survivors.

It is important to collect demographic information from each survivor. Prepare questions consistent with the goals of the consultation. Discuss with team members how and when the lead facilitator may deviate from those questions. Plan for how team members should alert the facilitator if they or the participants seem confused or unclear.

The following questions are sample questions designed specifically for survivors who have used a shelter along with an economic empowerment service.

- Introductions of survivors should include:
  - Age
  - Number and ages of children
  - Timeframe services were used
  - City or residence
- What happened that brought you to the shelter/service?
- How many times have you received assistance from the shelter/service?
- What type of assistance did you receive from the shelter/service?

- When you reflect on your needs at that time, what assistance was helpful? Were there any needs that were not addressed by shelter/service? If yes, what were they unable to help with?
- How did you find out about the shelter/service?
- Was there any way in which the programme was administered that made things difficult or unsafe for you? If yes, please describe.
- How did the shelter/service enhance your safety? Did the shelter/service diminish your safety? If so, please describe how that happened.
- Were the services provided to you culturally relevant?

- Describe the ways in which the shelter/service empowered you as a woman.
- Are there ways the shelter/service could improve in relation to empowering survivors? If so, please describe.
- If you were to participate in the programme again – what should stay the same? What should change?

Note: Facilitators need not ask every question to every survivor. This type of survivor consultation is not a research model that requires that continuity.

## Documentation

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Recording a session, with the survivor's permission, may make it possible to have an audio file sent for transcription - however, it is important for them to read the terms and conditions of those services and understand the privacy policy. If a transcription service will be used, encourage the survivor to use an alias and not provide any identifying location information.

Ensure any recordings of sessions are stored in password protected areas with firewalls to prevent malware and hacking. If this cannot be assured, include a notetaker for the consultation session. Keep the recordings only if needed and plan to destroy the files as soon as the project is completed. Limit access to the raw recordings

to only those persons who need to have access to do the work associated with the project. Ensure they sign a confidentiality agreement indicating they understand that the material is highly confidential and should not be shared with anyone outside the limited and immediate circle of those working on the project (ideally fewer than 3 people). Transcriptions without any identifying information (name, address, date of birth, location), may be shared with the team conducting the analysis.

If recordings are not done, but notetakers are used, follow the guidance given above for in-person sessions and the handling of data.

## Care for Survivors

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It is important to provide a trained survivor support person who can assist interviewers by creating a calming environment, assisting interviewers by watching a survivor's body language and reactions, and debriefing a survivor after the consultation, as they shift from the session back to their daily life.

Facilitators, interviewers, and support persons should watch for survivors who may seem stressed or need a break. If this happens, it is important to transition from questions regarding the consultation to survivor care:

pausing for a moment, moving into slow, deep breaths together, checking in with the survivor on what they are feeling or thinking at the moment (if appropriate), providing grounding for the survivor by inviting them to look away from the interviewer and describe the room to you, or the sounds they are hearing (e.g. reconnecting with their senses) are all techniques that can support the survivor to reconnect with you and those around you. If the survivor wants to continue, an assessment should be made whether to continue the consultation or to provide additional resources and move to closing the session.

# DATA ANALYSIS AND IDENTIFYING THEMES FROM THE SURVIVOR CONSULTATIONS

If the consultation was recorded and transcribed, transcriptions should be redacted to delete survivors' personal identifying information. If the consultation was not recorded, the notetakers should combine the

information they each collected into one document. This document should not include any personal identifying information of the survivors.

## Data Review Committee – Members and Function

The data review committee should include local VAWG experts and representatives from the government or civil society agency that is being reviewed.

The 'internal' agency representatives should exhibit a willingness to better understand survivors' experience with their respective agency. They should be stakeholders who, rather than being defensive, are open to improvements, reforms and change. Frequently, these representatives will appreciate learning more about how their agencies either enhanced victim safety or diminished it.

Organizers of the survivor consultations should take care to repeatedly emphasize the goal of identifying important systemic reforms – not shaming or blaming individual practitioners.

Meetings to review the data should be scheduled and, in advance, committee members should either read

the full transcription of the consultation or the notes with redactions.

Committee members should review the transcripts, recordings, and/or detailed notes prior to a committee meeting and then discuss it together. Committee members should look for themes that emerge amongst survivors that are consistent amongst a number of survivors. For example, in one FGD with survivors of domestic violence who had been arrested and convicted, many survivors discussed the difficulties in getting new housing because of their conviction. The committee members were aware that the law allowed landlords to do background checks on potential tenants. This was one of the effects of convictions on survivors when they themselves were arrested and convicted for domestic violence. It made it much more difficult for them to leave their abusers.<sup>9</sup> This was an important identified theme from the FGD, as this could be an effect on any survivor who was arrested for domestic violence in this community.

## Summary Report

The FGD and individual survivor interviews should be documented in a summary report. The report should include:

- An introduction that describes the question(s) being explored, for what purpose, and by whom.

<sup>9</sup> In Their Own Words: Victims of Battering Talk About Being Arrested and Convicted. Melissa Scaia for the National Clearinghouse on the Defense of Battered Women. 2017. Available at: <https://drive.google.com/file/d/1-jb8k1wdvnd3zR3-9fFu1pIdroWN4JTf/view>



- The process and any criteria used in engaging survivors to participate in FGDs or individual interviews.
- The number of survivors who participated in the FGD or individual interviews.
- Demographics of the participant survivors.
- Description of the process.
- Geographic region represented by survivors.

- Scope and focus of the inquiry.
- Themes discovered through the survivor consultations. Quotations that support the themes are important but should not include personal identifying characteristics of survivors.

A sample FGD report is included in the appendices.

## CONSIDERATIONS FOR CONDUCTING FOCUS GROUPS OR INTERVIEWS WITH STAFF OF VAWG SURVIVOR ORGANIZATIONS

Interviews or focus groups with organizations that support VAWG survivors are important. Staff at these agencies have the most direct and confidential contact with survivors and the most detailed information about their experiences. When possible, interviews or focus groups should be conducted in addition to and not in place of interviewing survivors.

When deciding who should participate in a VAWG survivor organization focus group, the following should be considered:

- Current staff of VAWG survivor organizations.
- Representatives of all VAWG survivor organizations.
- Former staff of VAWG survivor organizations.

Focus groups and interviews with practitioners of VAWG survivor organizations can be useful in gathering information about what systemic interventions are working well and what is problematic. Confidentiality must also be provided for practitioners. Themes can be identified but personal identifying information of VAWG survivor organization staff should be removed from any report.

Below is an example of an outline for a focus group with counselors at a crisis center.

Introduction: Our goal is to deepen our knowledge about how, when, and if the criminal justice system ensures the safety of victims and the accountability of offenders. Help us shape the scope of our work to improve the criminal justice system. We will be asking you about:

- What is working well.
- The impact of different systems: i.e., emergency services, law enforcement, prosecution, judiciary.
- What to look and listen for in our interviews with survivors.
- Other possible interviewees with important information.

Questions for staff of crisis centers in evaluating the law enforcement response:

- From your perspective working in a crisis center, what do survivors experience when they call the police for help?
- What do officer/s do that is helpful? What makes things worse or more dangerous?

- When a survivor’s partner is arrested and taken to jail, does the jail contact her to let her know when he will be released? How and when?
- What should we ask about, look and listen for in conducting our analysis?
- What questions should we ask survivors?

## REMOTE SURVIVOR CONSULTATIONS

While in-person consultation sessions are preferred, there may be times when one or more remote sessions through phone or videoconference are a better fit. Some factors that may point organizers to choosing remote options include: significant geographic separation between interviewers or facilitators and survivor participants, significant budget constraints for travel, safety issues connected to traveling through one or more regions, and possible preference and convenience of the survivor being consulted. During the public health crisis in the COVID-19 pandemic, for example, it was necessary to do many survivor consultations through videoconference or telephone, to minimize travel, to comply with public health restrictions and to limit possible infection.

While remote consultations may address some challenges associated with in-person survivor consultations, they also introduce new considerations and challenges associated with safety, facilitation, documentation, and care for the survivor participants. Without sufficient technology, thoughtful preparation, and skilled facilitation, it is often difficult to replicate the conditions that arise more naturally with in-person focus groups or individual interviews. For remote survivor consultations, organizers will have to prepare an alternative

method of payment to survivors, since they won’t be meeting in person. These are important considerations, as the overall experience of participating in a survivor consultation should not revictimize a survivor, nor should it feel exploitative in any way. By attending to key details, however, remote consultations with survivors can work and should be considered if in-person sessions will not be an option.

Note that a combination of approaches may also be useful. For example, if facilitators are not able to travel to a region due to travel safety issues, the local community service agency that engaged participants may be able to host a an in-person focus group session and add-in facilitators via videoconferencing or provide a safe/central location for survivors to be interviewed by a remote interviewer. These hybrid options can provide help address the challenges of remote consultations.

The information that follows provides guidance on conducting remote sessions over videoconferencing services. Telephone consultations should only be considered if no other options are available, and they can be done safely.

### Video Conferencing for Survivor Consultations

Video conferencing provides remote interviewers or facilitators the best opportunity to build rapport with the survivor(s) being interviewed and gauge survivor understanding to specific questions. By adding visual information, facilitators can see how survivors react and adjust or adapt the interview as needed. This is

especially critical for any sessions with survivors in which an interpreter is being used (e.g., language, sign) as the survivor’s voice is already being filtered to some degree. Even if bandwidth or internet connections are unstable, starting an interview or focus group on camera with introductions, a session overview, confirmation of

consent, and response to any questions can help establish rapport with a remote facilitator or interviewers, even if the camera is later turned off. If on-site facilitators are assisting a remote facilitator, participants should be able to see everyone who is participating in the session.

This section will review considerations for safety, facilitation, documentation, and care for survivors before, during, and after the consultation session. Information about the technology resources needed to conduct successful videoconference consultations can be found at the end of the section.

## Safety Considerations for Remote Consultations with Survivors

### Location

If a physical location is selected for remote focus groups or individual interviews, location safety, accessibility, and transportation issues are similar to those addressed for in-person consultations.

For sessions that engage the survivor from their home, both physical and psychological safety should be considered. Is the survivor safe in their home? Will other family members have access to the survivor during the consultation? Will they be able to see or hear what is being discussed? Are certain rooms in the house already associated with the violence or trauma experienced? If not, will the consultation serve to associate the space to the trauma?

If a survivor are not safe in their home, it is best to work with her to identify an alternate location from which she can join the remote consultation. For example, if a friend or relative provides the safety, privacy, and technology needed, that may be a good alternative. If an alternate location is not an option, other options can be explored - is there a time of day where she does expect to be alone? Does she know technology well enough to use the on-line chat or exit an on-line meeting quickly and appear to be viewing something else? Are there code words that she can use to signal the conversation needs to change or that she is unsafe?

To limit the ability for others to overhear the conversation, a survivor participant is advised to use a headset or headphones. Additional measures include the ability to close doors and play background music or a television in a nearby room. However, if a survivor is living with an

abuser and there is no way to ensure the abuser is not present at the scheduled time of the consultation with the survivor, then the consultation should be cancelled and rescheduled.

Children should not be present during these meetings. Arrangements for childcare should be made in advance, to both protect children and allow survivors the chance to fully participate. If childcare is not an option and children will be able to see or hear the consultation, the facilitator or interviewer should adjust the questions significantly or reconsider whether the consultation should occur. The consultation should be cancelled and rescheduled if the children are old enough to understand what the survivor is discussing, and she is not able to ensure that they won't overhear the conversation.

Finally, if the survivor does not have many options from the space or room from which she joins the consultation, it is important to be sensitive to how this space or room may be associated to the call. If possible, add time at the end of the consultation to invite survivors to decompress and transition back into their own space before disconnecting.

### Privacy Protections and the Consent Form

As with an in-person session, informing a survivor about the risks and benefits of participating and giving them the opportunity to consent or refuse participation is essential. In remote consultation planning, a consent form can be reviewed at the time of engagement, and then signed and submitted by email (if safe to do so and

the technology exists). In the hybrid context (pairing an in-person location with a remote facilitator or interviewer), a support person should review the consent form prior to the start of the consultation session. The remote facilitator or interviewer should then confirm this has been done and review the main points related to survivor safety and choice (e.g., who is participating, why the consultation is being done, what is the focus, who will have access to the information, and the right to pause, question, or stop at any time). Only if it is impossible or unsafe to receive a written consent form should verbal approval be accepted. This consent should be documented either on a recording or by a note-taker. One additional consideration for the consent form for a remote session is to include a provision that prohibits participants and other team members from taking screen shots during the session.

## Impersonation

There is a risk with remote engagement for survivor consultations that another person will impersonate a survivor to gather information or undermine the survivor. An abuser may believe impersonating the survivor will give them access to information about whom the survivor is contacting and what she is saying. Others may impersonate a survivor, believing it will give them more information about the experiences the survivor has had. Finally, someone may impersonate the survivor in attempt to take the financial compensation provided. These risks are minimal for in-person sessions but should be considered for remote sessions.

## Remote Consultation Team

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The team for managing a remote consultation may include:

- Facilitator or interviewer—remote and possibly in-person (for hybrid sessions)
- A survivor support person (on-site in hybrid sessions, on-line in sessions where the facilitator does not have training in survivor support)
- A tech support person who is not on camera (to help manage the chat, troubleshoot, communicate with people in the waiting room, help re-establish connections)
- One or more interpreters—remote and possibly in-person (for hybrid sessions)
- A live captioning service (if applicable)
- A note taker who is not on camera for documentation or back up to a recorded session
- While observers are discouraged, if the goals of a specific consultation require an observer, they should not be on camera and the organizers should ensure they are prepared to abide by the same guidelines as other team members and that the survivor-participants agree to have them present.

## Facilitation and Interviewing Considerations

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Facilitation or interviewing from a remote location involves similar and different issues to in-person settings. The following section provides recommendations for facilitators and interviewers before, during, and after a session and should be read in conjunction with the facilitation guide for an in-person session. This section presumes that accessibility accommodations have been identified through the registration process as discussed above (including the need for qualified interpreters) and that these accommodations have been addressed in the planning for the remote session.

### Pre-Session Preparation for the Remote Facilitator

- Test the technology and its features to ensure you are comfortable using them. Ensure you or other members of your team know how to add in interpreters, start closed-captioning services, etc. (see Technology Considerations below).
- Create a call - welcoming and private space from which you will join the remote session. Turn on your camera and notice what others will see of

you and your background. Ensure your lighting is sufficient to capture face and facial features (central to building rapport). Remove any items from your background that could be disturbing or distracting.

- Ensure your own sound is good (best to use a headset), and that there will be no background noise to distract or interfere. Plan beforehand with others who have access to your meeting space to leave you alone during sessions. You may want to put a sign on a door that notes when you will be next available.
- Work with the team involved in running the session and review their roles. Ensure the interpreter or closed-captioning provider understands their process for joining the consultation. If relevant, provide an outline of the session, your expectations, and any written materials that can assist team members in doing their job (e.g., questions, definitions of key words or acronyms likely to be used). Review expectations around privacy and confidentiality. Plan for technology challenges or failure. Consider adding a chat option through texting or Whatsapp to allow team members to communicate about important matters or challenges without disrupting the session itself.
- Prepare questions consistent with the goals of the consultation. Discuss with team members how and when the lead facilitator may deviate from those questions. Plan for how team members should alert the facilitator if they or the participants seem confused or unclear.
- In a focus group session, clarify how the interpreter wishes to handle multiple speakers. If possible, have two interpreters so they may take turns. In a long and intense session, this will help them to interpret more accurately.
- Research and identify local resources available to survivors should they need additional support after the session. Have these available to add to a chat, provided on-site (in a hybrid option), or emailed to a survivor (if safe to do so).
- Ensure the proper preparation for the survivor (see care for survivor below), the hosting location (if relevant), and any other necessary participants.

- Ensure the process for compensating the survivor is in place and will not put the survivor at risk.

## During the Session


- Use a waiting room so that others cannot join the session without approval and at inappropriate times
- Introduce all team members participating in the call. Invite the survivor to use an alias if they prefer.
- Specifically review how any interpretation or other assistive methods will work. Test them with the survivor.
- Develop a code phrase if someone else walks in the room or they want to suspend the interview.
- Confirm the survivor's consent to participate (see Privacy Protections and Consent Form for additional information).
- Discuss options for pausing the session (survivor may bring up another programme on their computer) or change the topic to maintain confidentiality. Provide permission for them to end the contact as they need to, and clarify what you will do if the session ends but you are unclear whether they intended to do so or are safe (e.g., disrupted internet, safety issue with self or others).
- Speak slowly, calmly and clearly. Use words and phrases that are not technical, but easy to understand. This is especially useful if interpreters are involved.
- Take breaks as needed - invite participants/team members to look away from the screen from time to time to limit fatigue.

## Closing the Session and Providing Follow-Up

- Thank survivors for their participation.
- Remind them of the goals of the consultation, how you will be using their information, and who they can contact if they have additional questions about the project.
- Provide the list of additional resources if this wasn't already done at the beginning.
- Allow some decompression time for the survivor-participant to return to their day and location.

- See ‘Care for Survivors’ below for more information.
- After the survivor leaves the session, invite team members to stay on to share any concerns or debrief as needed.
- Review the processes for compensating the survivor and ensure the survivor receives her compensation.

## Care for Survivors

 One reason a hybrid model can work well for individual interviews is the ability to add on-site support. If a community organization hosts the sessions for the interviews with a remote interviewer, they may be able to provide a trained survivor support person who can assist interviewers by creating a calming environment away from a survivor’s home, minimizing anxiety associated with handling the technology required for a remote session, assisting interviewers by watching a survivor’s body language and reactions, and debriefing a survivor after the consultation, as she moves from the session back to her daily life.

Facilitators, interviewers, and support persons should watch for survivors who may disconnect or be temporarily

unavailable during a session. If this happens, it is important to transition from questions regarding the consultation to survivor care: pausing for a moment, moving into slow, deep breaths together, checking in with the survivor on what she is feeling or thinking at the moment (if appropriate), providing grounding for the survivor by inviting her to look away from the screen and describe the room to you, or the sounds she is hearing (e.g. reconnecting with their senses) are all techniques that can support the survivor to reconnect with you and those around you. When the survivor reconnects, an assessment should be made whether to continue the consultation or to provide additional resources and move to closing the session.

## Technology Considerations

Since video conferencing is the preferred method for remote consultations, the technological considerations are significant. Having an internet connection and a computer or mobile device that can run the session are a good start, but ensuring remote consultations are safe, accessible, and satisfactory involve knowing the privacy policy of the software being used, and possibly adding and practicing with additional equipment. The table

below provides more detail on these issues following a ‘good, better, best’ format. Each column builds on the column to its left. For example, the ‘better’ column includes the features of the ‘good’ column. The ‘best’ column represents the features every remote consultation should seek to include. If features under the ‘best’ column are unavailable or unachievable, discuss with the team how to mitigate the risks to safety.

Good	Better	Best
Internet	Stable and sufficient internet	High-speed internet that can power multiple devices
On-line conferencing service with private log-in (e.g., unique code, waiting room feature, passcode)	On-line conference service that has end-to-end encryption. Software that only collects enough data to provide the service and does not retain it for its own purposes. Ensure you know what data the company incidentally collects and make sure it will not identify a survivor (e.g., IP address, username, geolocation, phone number, etc.). Determine that any recordings (and incidental data associated with the recordings) are only available to you and will not be retained by the company in any way after you delete them. You will need to review the company's privacy policies. Sometimes a higher subscription level provides these options.	
On-line conferencing service with a chat feature, so survivors being interviewed have a non-auditory way to communicate as relevant and needed (Deaf survivors as well as a non-verbal way to communicate safety issues for any survivor).	On-line conferencing services that provide for simultaneous language translation if the session will involve a spoken language interpreter and the option for live, integrated captioning for Deaf and Hard of Hearing participants.	On-line conferencing services that allow users to control their engagement via keyboard commands with a mouse, non-auditory alerts such as a chat box and emoticons (e.g., raised hand), and interfaces with screen-readers that make all features accessible to screen-reader users.
Laptop or computer that can run video conferencing software	Multiple laptops or computers to provide back-up in case one fails, or provide more than one view of a focus group Organizer-provided laptop or tablet to control privacy protections	One or more laptops with a separate videoconference camera to capture image at eye/face level, while the keyboard may be at a lower level. Organizer-provided laptop or tablet to control privacy protections
Stable electricity to power laptop		
Laptop or computer includes a camera and a microphone	Headset for individual interview participants and interviewer	Remote microphone or two-way speaker for focus group sessions.
Natural light/normal room lighting	Natural light/normal room lighting that illuminates the faces of participant(s) and interviewer(s).	Video lighting from more than one angle to make it possible to see everyone's faces well on both end of videoconference





# APPENDICES

# Sample #1 Consent Form for Focus Groups

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You are invited to be a part of a discussion group with other women who have experienced violence. The discussion group will inform organizations and government agencies in the city of Minneapolis about how to better serve victims.

If you agree to participate, you agree to the following:

1. Participation in one focus group lasting up to two hours.
2. Agree to respect the confidentiality of the other discussion group members.
3. Receive a stipend of \$50.00.

## Risks and Benefits of Being in the Focus Group

First, since people in the group may be talking about their own life experience during the focus group, there is a possibility that sensitive issues may arise. Therefore, there is a risk that you may become upset or that the discussion may trigger painful memories. If this happens, we have staff ready to provide you with support.

Second, although every effort will be made to ensure confidentiality, there is a risk that other participants or observers might share information that they hear during the discussion group and thereby not honor the confidentiality. If, for some reason, we became aware of a violation of confidentiality we will inform you right away. We have worked to prioritize your safety and confidentiality.

A benefit from being a part of the project is that you will have the opportunity to provide your insight, experiences, and suggestions to make changes to how the police and the government can better help victims. Ultimately, our goal is to improve safety and the lives for victims and their children.

## Confidentiality

Every effort will be made to ensure that your identity remains confidential. You may use a pseudonym or a made-up name for yourself and your children so that you will not be identifiable. Any information that is gathered may be generalized.

## Your Participation is Voluntary

Whether you accept or decline participation in the focus group, it will not affect your current or future relations with any helping or government agency.

## Contacts and Questions

The persons facilitating the focus group are with Global Rights to Women (GRW) and Domestic Abuse Project (DAP). You may ask questions of the GRW and DAP staff who are facilitating this focus group at any time.

This discussion group was requested by Melissa Scaia of Global Rights for Women (GRW) in Minneapolis, MN in the US. GRW is contracted with the Minneapolis Foundation to work on this project. You can contact Melissa at any time via phone or text at 218-969-3498 or [mscaia@grwomen.org](mailto:mscaia@grwomen.org)

## Statement of Consent

I have read and understood the information above and give my consent to participate in this focus group. I agree to maintain confidentiality of other group members.

Name (please print) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

## Sample #2 Consent Form for Focus Groups

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### Consent to Participate in a Survivor Focus Group Discussion

#### Introduction

You are invited to participate in a survivor focus group discussion with (Name of Organization or Organizer). To participate in the survivor focus group, you need to give your informed consent. Informed consent means you understand what the information from the focus group will be used for, the potential risks of participating, and your rights and protections. This document gives information that is important for this understanding. Please take as much time as you need to decide if you want to participate. You do not have to participate, and you can stop participating at any time with no consequence to you. You can ask questions at any time.

#### What is the purpose of this research?

The purpose of this research is to find out how the shelter met the needs of survivors in its Gender Based Violence – Women Economic Empowerment program. You were invited to participate because you participated in this program as a survivor of gender-based violence in the last two years. We would like to hear your thoughts about how this program impacted your life as a survivor.

#### What will happen during this research?

If you decide to participate in this research, you will be part of an in-person focus group discussion with up to ten other survivors. The focus group will take about two hours in length. The conversation will be recorded, and then typed up. We will tell you when the recording starts and stops. We will not ask for any information that may identify you. We ask that you do not give any identifying information about yourself or others, either.

#### Do I have to participate in this research?

No. Being in this study is completely voluntary. It is your choice whether to attend the focus group, and you can refuse to participate. You can also skip questions or stop participating at any time. Whatever you decide, there will not be any negative consequences for you. You will still be able to receive the same services from the shelter. You will still receive full compensation for participating even if you skip questions or stop participating.

#### What are the potential risks or discomforts if I participate?

Since this is a group discussion, there is a change that what you say may become public. We will try to reduce the risk of this happening. The group facilitator will ask all focus group participants not to share what they hear in the group with anyone outside the group. Still, we cannot control what other participants may do. So, it is possible that they could talk about what you say in group to others.

The group facilitator will ask everyone in the group to maintain a respectful tone. However, it is possible that disagreements may occur. In rare cases, the facilitator may stop the discussion and/or ask anyone acting disrespectfully to leave. The facilitator will also try to ensure that everyone's voice is heard, and so may call on you if you have not spoken for a while. Even though we wish to hear from everyone, you may always refuse to answer any question at any time. You may also stop participating at any time, with no consequences to you.

You may feel upset or uncomfortable during the focus group. If that happens, the group facilitator will talk with you. S/he can also refer you to someone who may be able to help you, at no cost to you.

**What are the potential benefits if I participate?**

Being a part of this research may not help you directly. But the information we learn from the focus group may help us to improve our all survivors who get help from the Tarango shelter are assisted.

**How will my information be kept private?**

We will keep your records private. Any information obtained in this research and that can be identified with you will remain confidential and will only be disclosed with your permission or as required by law.

We will not ask for your name or other information that might identify you. We ask that you do not give any identifying information about yourself or other, either.

**Whom can I contact about this research?**

If you have questions, concerns, or complaints about this research, please contact XXXX at XXXXX.

**How do I give my consent to participate in this research?**

If you understand and agree with everything stated above, please check the box below. We will also give you a copy of this consent form.

**Are you willing to volunteer for this research and be recorded?**

Yes                      No

\_\_\_\_\_  
Signature of Facilitator / Person obtaining consent

\_\_\_\_\_  
Date

# Sample #3 Focus Group Discussion (FGD) Participant Agreement

---

## Focus Group Participant Agreement

Thank you for agreeing to participate in this focus group. The (shelter advocacy program) and the Domestic Abuse Intervention Programs (DAIP) are conducting focus groups as part of a federal grant project funded by the Office on Violence Against Women. The project is focused on improving the way our government systems respond when victims of domestic and sexual violence ask for help.

The DAIP will do everything we can to ensure confidentiality. However, because this is a focus group, we cannot control the behavior of other participants after the focus group has concluded. If we become aware of any breach of confidentiality, we will inform you immediately. Know that we have done our best at choosing participants who will respect the confidentiality of other participants.

What you share in the group will be handled as follows:

The session will be recorded and the recording given to a DAIP advocate who is a professional transcriber. The advocate will transcribe the entire focus group but will remove any names used during the session. This transcript will be used by (shelter advocates) and DAIP to determine themes or common experiences of women who intersect with the criminal systems in (city, county, state, or country) due to domestic violence. A report will be produced with those themes and will include

excerpts from the focus group participants which will be used to give context to the themes. No names will be used or long quotes so as to protect the identity of the participants. Agency names will not be removed unless requested by a participant in the focus group.

Excerpts from the focus group may be used for training people on how to conduct focus groups. Any transcript used will remove all identifying information including names, addresses, agencies, or any other information that would identify the location in which the focus group took place. If used for training, the location of the focus group will not be disclosed by the trainer to the participants.

Any participant can withdraw from the focus group at any time and still receive their stipend.

We appreciate your willingness to participate in this focus group. It is our goal to create a victim centered community response and your input is essential. This agreement will only be kept for the duration of the project. Upon completion of the project, all signed agreements will be shredded. If you wish to be present at any celebration or gathering when the project is complete, please circle: **Yes**. If not, circle **No**

\_\_\_\_\_  
Name of focus group participant

\_\_\_\_\_  
Date

# Sample #4 Focus Group Discussion (FGD) with Survivors of VAWG Outline

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A rapid analysis of essential services for women and girl survivors of violence in the context of the COVID-19 pandemic in **Haiti**.

## FGD with Survivors Outline

**Overarching Goal/Purpose of the Study:** To analyze the quality, availability, suitability, and accessibility of essential VAWG services in Haiti, especially for marginalized women and girls. Also, to identify the major gaps and challenges in service provision, governance, and coordination of services.

**Date of Focus Group:**

**Facilitator:**

**Introduction:**

This focus group is part of an analysis of services being provided for survivors of family violence against women and girls in Haiti. VAWG includes any physical, sexual, emotional, or economic harm by any member of the family. We will not be asking you to tell us about the violence you may have experienced. Rather, we will ask you about whether anyone helped you, and what your experiences were like with any services you were provided. We welcome you to talk about violence you have experienced, but only if you would like to. Your input will help us to understand how we can improve services to better protect women from violence and help women who have experienced violence. We are analyzing services provided by the police, courts, health care facilities and social services organizations.

This is a confidential conversation. That means that we will not share your name or any other personal information about you. Your information will not be included in any written reports. If we use quotes or information given by you in a written report, we will not attribute the information to you. We will not tell anyone that you participated in this group. We ask that you also keep the information that other women share in this group private.

**List ages of participants:**

**List departments where participants live:**

**Opening Questions:**

- When you were experiencing violence or abuse, what did you need most?
- What did you do to stay safe?
- For those who sought help from an organization, health care provider, police or a court, what was your experience like when you tried to get help?

**Interview Topics:**

- What participants needed when they were experiencing VAWG  
Listen for: Safety needs, material needs, barriers to accessing services
- Whether participants sought help and who they reached out to  
Listen for: Services with strong availability and access, who is providing front-line support
- What kinds of services they received  
Listen for: Services being most provided, gaps in what survivors need and what is provided

- Experiences with service providers  
Listen for: Quality, access, concepts, and theories about VAWG embraced by services providers
- Actions taken by participants to keep themselves safe  
Listen for: what keeps women safe in Haiti, what do survivors see as the safest options
- Experiences that made participants less safe  
Listen for: Barriers to accessing services, services that are not survivor-centered, gaps between what survivors need and what the system is providing
- Examples of what is working well in the health, policing/justice, or social service systems  
Listen for: Concrete examples of quality, accessible services
- Examples of negative experiences with the health, policing/justice, or social services systems  
Listen for: Concrete examples of services that do not meet survivors' needs
- Suggestions for improvement  
Listen for: Women's ideas about how services could be improved

# Focus Group Discussion (FGD)

## Facilitator's Notes: Introductions

---

- Introduce facilitator, note taker, and any observers
- Explain project and Informed Consent form; collect signed forms

**Emphasize: participation is voluntary and confidential**

- Explain process for collecting compensation at the end of discussion
- Why we are here: We want to know more about the experience of women whose husband or boyfriends have been threatening, abusive, or violent toward them.
- I'll be asking about your experience.....and your recommendation for change

**Emphasize: There are no right or wrong answers. Be candid. We want to hear positive and negative comments. It's OK if you disagree with each other.**

Ground rules for all focus groups:

- All comments are confidential

- Use first name only during the discussion. We ask that you not use your last name.
- One person speaks at a time
- Your name will not be attached to comments in the report
- The names of participants in the focus group will not be shared with anyone else.
- To ensure accurate notes, we'd like to record the discussion. Once the notes are checked, we will destroy the recording. If anyone is uncomfortable with being recorded, we'll not record.

Any objections?

Is it ok to turn the recorder on? Feel free to say no.

- The session last about (2) hours..... I want to hear from everyone.... apologize in advance if I need to interrupt you to move on to another person or question.
- Any questions before we begin?
- So that we get more comfortable with each other, let's go around the table and introduce ourselves. Please give your first name only, and tell us your favorite ..... (flower, food, television show, etc.)



# Focus Group Discussion (FGD)

## Guiding Questions and Facilitator's Cues

---

Read the following examples of focus group questions as cues to the facilitator, reminders of paths you might want to follow or should be listening for in the discussion.

**Caution:** Don't get so attached to the questions that you miss the insights and opportunities for dialogue that participants provide.

### Introduction

1. Who are we? (The entity facilitating the focus groups)
2. Why this focus group is needed
  - Goal of the focus group
  - What's working well?
  - Impact of different systems: i.e., emergency services, law enforcement, crisis center, shelter
  - Help us figure out what to look for
  - Help us figure out who else to talk with
3. Individual comments are confidential; not to be shared outside of the room

### Discussion

1. How many of you have had contact with 911 (emergency services) because your partner was scaring or hurting you?
  - What did the call taker do that was helpful? What kinds of questions were you asked?
  - Did the call-taker do anything that made things worse, more dangerous?
2. How many of you have had contact with the police – law enforcement – because your partner was scaring or hurting you?
  - What did the officer/s do that was helpful?
  - Did the officers do anything that made things worse, or more dangerous?
3. If your partner was arrested and taken to the jail, did the jail contact you to let you know when he would be released? How and when?

4. What should we ask about, look for/listen for in analyzing the system?

### Discussion

1. What has been the most helpful to you in dealing with your husband or former husband's abusive behavior? How has this been helpful?
2. Who has attended marriage or couples' counseling with their husband?
  - Why?
  - Whose idea was it?
  - What effect did it have on his behavior?
  - Did his harmful or hurtful behavior 1) decrease? 2) stay the same? 3) increase?
3. Has your husband ever attended any kind of counseling for his abusive behavior?

NO: Why not?

- Would that be or have been helpful to you? Why?

YES: Was it in a group with other men or was he by himself?

- Did he go voluntarily or because a court ordered him to go?
- What did you hope would happen because of this counseling?
- What happened?
- Did his harmful or hurtful behavior 1) decrease? 2) stay the same? 3) increase?

4. What would you like to see happen for your husband? What kind of services should be available?

**Discussion:**

1. What has been the most helpful to you in dealing with your son or daughter's abusive behavior? (or other family member) How has this been helpful?
2. Has your son or daughter ever attended any kind of counseling because of his or her harmful or hurtful behavior?

NO: Why not?

- Would that be or have been helpful to you?
- Why?

YES: Was it in a group with other men or was he by himself?

- Did he go voluntarily or because a court ordered him to go?
- What did you hope would happen because of this counseling?
- What happened?

Did his harmful or hurtful behavior 1) decrease? 2) stay the same? 3) increase?

3. There is a special relationship and connection between a mother and her child. How does this influence the decisions you make about your son or daughter?
4. What would you like to see happen for your son or daughter? What kind of services should be available?

# Sample #5 Focus Group Notes for University Campus Sexual Assault Survivors Involvement with a Criminal Justice System Response<sup>10</sup>

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## Description of persons in the focus group notes

1. Focus Group Facilitator
2. **JULIE** used to attend State University, but now works at a local coffee house. She was attacked during the first month of her freshman year. The perpetrator grabbed her from behind and pulled her alongside a campus parking ramp, where he threatened her with a knife and raped her. The attack on Julie was one of several rapes on or near campus, committed by the same perpetrator. She tried to return the second semester but dropped out after a few weeks. She hasn't told her parents why she left school.
3. **AMBER** is a senior at State University. About eighteen months ago she was raped at a fraternity party by Jake, someone she'd known from camp when she was in junior high. She thinks she passed out during the attack. She learned later that he'd videotaped the rape and shown it to his fraternity brothers.
4. **SHAWNA** is a student at Community Tech. Two years ago, she attended State University on an athletic scholarship, but dropped out after an assault. She'd gone to a weekly party in the athletes' dorm, hosted by the football players. She was raped and badly beaten by Rod, whom she'd briefly dated when she first started school.
5. **MEI** is a visiting student from Yunnan, China, who is getting a PhD in physics at State University. Shortly after she arrived on campus last year, she was attacked by Donald, whom she'd met through the International Student Center and had socialized with occasionally. He raped her after inviting her to dinner at his home. After the rape he called her many times a day saying he loved her and then hacked her email account.

## Introduction by the Facilitator

Talking with women/survivors is one of the essential skills that helps contribute to the strong knowledge base that is essential for systems advocacy. It is a key way to learn about the circumstances women face when they engage with institutions after experiencing violence.

Before beginning, as the facilitator I reviewed the purpose of the discussion, the distinction between a focus group and a support group, the ground rules for participation, how the information would be used, each woman's right to not answer a question or share specific details about her experience, and the availability of support and advocacy. **The women were not required to go into detail beyond what they were comfortable with sharing with the group. The purpose of the discussion was to learn about the system's response when a woman has reported a sexual assault.**

Let's begin by hearing from each of the women.

## Survivor introductions

### JULIE

I'm Julie. I used to attend State University, but now I work at the Java House. It happened during the first month of my first year. I was out walking one night and he grabbed me from behind and pulled me back by a campus parking ramp. He threatened to kill me all the time he was raping me. I wasn't the only one - "the parking lot rapist" the TV station called him. I barely made it through the first semester. I tried again but dropped out six weeks into the second one. I still haven't told my parents why I left school.

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<sup>10</sup> Praxis International: Sample Focus Group Notes, Advocacy Learning Centre (2011). Note that, while the accounts in these transcripts are true, names and identifying details have been changed to protect the privacy of the individuals involved.

**AMBER**

My name is Amber and I’m a senior at State University. I knew Jake way back when I was in junior high, then I ran into him at a fraternity party about eighteen months ago. I tried to get out of his room and I remember trying to push him away. I think I passed out while he was raping me. I found out later that he’d videotaped everything and was showing it to his fraternity brothers.

**SHAWNA**

Hi, I’m Shawna. Two years ago, I had an athletic scholarship to State University, but that’s gone. I’m at Community Tech now. I couldn’t keep my grades up after Rod raped me and beat me up. He was someone I’d dated for just a couple of months when I first started school. Then I went to that football players’ party in my dorm, and he was there. I’ve still got a scar here by my eye.

**MEI**

My name is Mei and I’m from Yunnan, China. I came to State University to complete my PhD in physics. I met Donald through the International Student Center soon after I arrived last year. He spoke a little Mandarin and it was fun to go to movies together. But then he turned on me. He invited me to his house, then raped and punched me. He kept calling me afterwards and sending me emails, six times a day or more, saying he loved me! Then he hacked my email account. He had access to all my student records.

**Focus Group Facilitator: Who did you first go to for help, and when?**

**Julie:** I actually didn’t tell anyone. I had friends on campus, but I was still getting to know people. I was so scared that he might have followed me home and would find me, especially with all the stuff in the news about the

“parking lot rapist.” But I had a lot of bleeding and it didn’t stop, so I got scared and went to the campus health center the next day. When I finally told the doctor what happened, he said, “Why did you wait so long? You should have called 911?” He said he had to report it to campus security. I wasn’t sure I wanted to do that, but thought, well, this guy is still walking around campus. The doctor said I could talk to the campus counseling center and that one of their sexual assault advocates would come to the clinic. So, an advocate came and then campus security said that for anything to happen to the guy, *they* had to report it to the police – that’s how the police got involved.

**Amber:** Well, I guess I first talked to my friend who walked me back to the dorm. I don’t remember very well; I was kind of drunk and I was crying a lot. When we got back, she was worried about me so she got the RA, the resident advisor, on my floor. The RA asked if I wanted to call the police and she didn’t push me when I said no. She told me about the campus counseling center and offered to put me in touch with them, but I just took the number and said I’d do it myself. What I didn’t know is that the RA told her boss, the dorm director, who told campus security. While I was getting ready for class the next day, two security officers came to my dorm.

**Shawna:** I told my parents. I’m really close to them, so I called them right away and they came to my dorm. They just live on the other side of the county, so they got there in about an hour. My dad called 911 on the way to the emergency room.

**Mei:** The day after the attack, I went to the campus counseling center and saw a sexual assault advocate. I told her about meeting Donald and how friendly he’d been when I first got to the university. But he raped me and punched me and acted like it was nothing. He kept saying he loved me! I told her that I was concerned that he had access to all my legal information and my password and that he might try to sabotage my student visa. It took days, but the advocate helped me get my files protected and a new password and cell number and email account. She asked if I wanted to report the rape to the police. I wasn’t sure, but what he did was wrong so I said yes, that she could call them for me.

**Focus Group Facilitator: If you had contact with campus security, what happened?**

**Julie:** It happened so fast. One minute I was at the doctor getting checked out, then I was doing a rape exam, and then I was talking to the security officers. One asked most of the questions and the other took notes. They wanted to know my dorm, my phone number, Social Security, home address, student ID, class schedule. He asked me where I was attacked and when, what time, and the exact location. They had a lot of questions about the location and whether I could identify the guy. They were nice enough, but they asked so many questions. I guess I ended up telling them the whole story. It was hard to get the words out, but I got through it. Towards the end, the security guy who was mostly taking notes excused himself and said that the local police would be there soon because they had to follow up on cases like this.

**Shawna:** I didn't have any contact with campus security.

**Mei:** Me neither.

**Amber:** They came to my dorm, a man and a woman. They said that I didn't have to talk to them, but that if I did it would help them keep other people safe. I asked if someone from the counseling center could be there, too, and they said yes and called them. They also said that the RA would let us use her office if I didn't want to meet in my room. Once the advocate got there, the security officers started asking questions. Same thing as Julie said: name, birthdate, address, Social Security number, home address, dorm. I felt like I was applying for a job! Then they wanted to know about the party and what happened. They asked me to tell them where Jake had touched me and what he did, which was really embarrassing, but they said I could take my time. They were there almost two hours. They wanted to know if I'd been drinking and how much and how I knew Jake. They said that they'd pass the case onto the police and give them all the information.

**Focus Group Facilitator: What about your contact with the police – what happened?**

**Julie:** Two cops in uniforms came while I was still in the exam room. They said they had to ask me some questions that would be a lot like the ones I'd already been asked. And it was like the same thing all over again: the exact location, the date, the weather, if I'd been drinking, why I was out there at night. They wanted to know if I saw anyone before I was attacked or if I talked with anyone as I walked home. They also had me describe how I'd been hurt, in detail, and what I tried to do and why I waited so long to come in. I told them I was too scared to even move. One of the cops asked if I was feeling up to making a written statement. I wanted them to be able to get him, but when I started trying to put it on paper, I just sat there and cried. They asked if I'd like to be alone with the advocate for a while. I told her I just wanted to go home and lay down. She talked to the police and they said I could write the statement later.

**Shawna:** When we got to the ER, there was a nurse there who examined me and asked if she could do a "rape kit." She took care of my eye, too. A Det. Anderson arrived right after she finished. He asked if I wanted my parents in the room, but I didn't want my dad or mom to know any details. He had me describe exactly what happened, step by step. He had a lot of questions about how I knew Rod, how long we'd dated, how many times we'd had sex, and when the last time was. Same with what and how much I'd been drinking that night. He wanted to know about my new boyfriend, too, and when I last had sex with him. The detective asked if I fought back against Rod; I said I was too scared and he'd beat me up so badly. Det. Anderson was really patient, especially when I started crying. I had to fill out the statement, too, but he left it with me and gave me a few days to finish it.

**Mei:** The advocate, Linda, went with me to the police station. There were two officers. The woman officer asked me questions and the other one took notes. She wanted to know how I knew Donald, how often we'd gone out and what we did together, how many times I'd gone to his house, why I went to his house that night, whether

we'd ever had sex, if I drank any alcohol – seemed like a thousand questions. She asked me a couple of times why I let him drive me home. I told them that all the time that Donald was attacking me, he kept saying, "I love you." When I told them what happened, the one taking notes said, "Is it possible he misunderstood you and that there was some poor communication?" It wasn't poor communication! The police seemed disappointed when I told them I'd taken a long bath afterwards. They wanted to see my arms and took photos of where my elbows were all red from sliding on the carpet when he held me down. I told them about the phone calls from Donald and all the e-mails, and how Linda had helped me change everything.

**Amber:** The police called me at my dorm room that afternoon. They said they could come over or I could come to the police station or meet them at campus security. I met them at the security office. They asked me to meet them within 72 hours and that the sooner the better. On the way to the security office the next morning, the advocate told me that they wanted me to come in before 72 hours had passed in case I was going to go to the clinic. The cops asked me a lot of questions, pretty much the same questions as the security guys the day before, but in a lot more detail. It took a long time because they asked me to go over and over everything, like: where did he touch you, did he come inside of you, was he wearing a condom, did you shower, what time did this happen. I felt dirty just answering them; a couple of times I thought I was going to throw up. They also asked if I knew who was at the party, if I thought anyone saw it, who his friends were, and did I know where any of them lived. They wanted to know exactly how long I'd known Jake, and if we ever dated. I was in junior high!

They had a lot of questions about what I drank and how much and whether I did a lot of partying and used pot or other drugs. They asked about my friends, too: who was with me, what I told them, and where they could reach them. They said that it would be really helpful if I did a medical exam – that they'd need it for evidence in the case. I was worried about the cops talking to everyone; I didn't want everyone to know. They kept saying they were on my side and they wanted to be sure that this guy was stopped – that he'd pay for what he

did to me and that he wouldn't just get off with it. I said I didn't have any injuries and wasn't sure I wanted to go to the doctor or clinic. But really, I was afraid they'd do a blood test and find out I was smoking weed. Plus, if I went to court then my parents would find out for sure. I said I just wanted to go back to the dorm. They said OKAY, but they wanted me to fill out the statement first. I can't ever remember what I wrote on that thing, I was so tired of it all.

**Focus Group Facilitator: Did you have any follow-up contact with a police investigator or detective?**

**Julie:** The day after I went to the health center, a detective called and asked to meet with me to get my written statement. He offered to come to my dorm, but I said I'd rather come to the police station. My advocate, Kathy, had offered to go with me so I called her and she drove me there. We met the detective in the lobby and he took me to an office. He said he was sorry, but Kathy couldn't come in with me, so she waited in the lobby. After I wrote out my statement, he read it while I was sitting there. He had the police report from the day before, too, that he kept checking. He asked me to tell him again what happened. I wanted him to just ask me questions, because I was so tired, but he said that it would help to hear it in my own words one more time. He asked if he could tape it and I told him the whole story, *again*. Then he said that he was going to ask something that he knew would be hard to do, but that it was best to get it over with. He asked if he could drive me to the place where it happened and go over things just one more time. Part of me didn't want to, but I also wanted them to be able to get the guy. Fortunately, Kathy came with us. I was so scared to go back there. The detective especially wanted to know if I remembered whether there was anyone else around who might have seen anything or if I stopped anywhere on the way home. He wanted to know who I talked to about it and who my friends were that he could talk to.

**Amber:** I got a call from a Sgt. Cooper, the day after I met with the officers. He asked me again if I wanted to go get checked out by a doctor and I said no. I met with him a couple of days later and he had me tell the whole

story again. I told him that I'd heard from a sorority sister that Jake had videotaped everything and was showing it to his friends. Sgt. Cooper was very interested in that. He said he was talking to Jake that afternoon. When I told him that I was scared that Jake would find me, he gave me his direct number and said to call him or the emergency number if I needed to. Sgt. Cooper called again the next day and told me that Jake claimed that I came on to him and that I *knew* about the video! Right, like I'd do something like that! I heard later that they got a search warrant for the frat house and found the video. Sgt. Cooper talked to me every now and again. He was always positive and hopeful that the case would go ahead because of the video evidence.

**Mai:** I didn't talk with any detective.

**Shawna:** I only really talked to Det. Anderson. And the nurse at the hospital, she called a couple of times. Det. Anderson came by later to take more photos of my face when the bruises were really dark. He also explained the whole process of what happens, who sees the report, about it going to the prosecutor, and what happens if it goes to court. Det. Anderson emailed me every couple of weeks or so to let me know that he hadn't forgotten about me and to say that he was sorry things moved so slowly. At that point, I was really determined that I was going to get through my classes and stay on the team. It didn't work out that way, though.

#### **Focus Group Facilitator: How did the prosecutor's office respond?**

**Julie:** About a month later, Kathy, my advocate, called me and said the prosecutor wanted to meet with me and did I want her to go with me. We went in the next day. The prosecutor guy was so young; I kept thinking he looked the same age as my brother! I asked the prosecutor if they'd caught the guy and he said they had a suspect, but they hadn't made an arrest. He explained that physical evidence is everything in a case like this and my case would have been stronger if I'd gone to the hospital right away and not taken a shower and thrown away my clothes. He said he believed that I was raped,

but it was going to be hard to pin it on this guy. The prosecutor wanted to know how I'd feel about talking in court about what happened.

Three weeks later, I heard on the news that there'd been another rape on campus and it sounded like the same guy, but I didn't hear from the prosecutor for another six weeks. Then it was on the news that they'd caught him, so I called Kathy. The prosecutor told her that he was sorry, but they couldn't go forward with my case because they didn't have enough "hard evidence." But they had my medical records! I guess the next girl who was raped reported it right away. It went to trial and he was convicted of just that one rape. Now he's in prison.

**Shawna:** The prosecutor I talked to was really young looking, too; I wonder if it was the same guy. When I finally talked to him, I think it was almost two months later. He said that there wasn't much evidence from the medical exam because Rod had used a condom and I didn't have any bruising "down there," but they were still going to charge him with sexual assault. He said that Det. Anderson had a detailed statement from me. He'd also charge assault and battery because they had pictures of my face and the bruises. The trial was beyond horrible. Rod got off on the rape charge and only got convicted of second-degree assault. He made it sound like I was leading him on and he "just lost it." They kept bringing up that we'd had sex before. "No evidence," the defense attorney kept saying, saying there was "no evidence" that he'd raped me. Rod didn't even get any jail time, just a stayed sentence, probation, and a fine. I suppose I should be glad that something happened, but I don't know if it was worth it. During the trial, I had finals and I was trying to get my grades up so I wouldn't lose my scholarship. But I lost it anyway because I only got a 1.5 average.

**Amber:** The first time I talked to the prosecutor, she was ready to get the guy. She said the video was good evidence and that a jury was bound to convict him. She wanted to know for sure that I'd testify and not back out on them. I mostly didn't want to, but it had gone so far already I didn't think I could get out of it. And because of the video, I figured everyone already knows so I should have my side of it heard and maybe they could get him.

I figured I'd deal with it at the time and the counselor said she'd be there to help me through the trial.

Several weeks later the prosecutor's office said they wanted to see me again. Jake was still saying it was consensual – that I liked “rough” sex and that we were into that kind of thing. She asked me why I wasn't saying no on the tape, even though it looked like I tried to fight him off and then like I'd passed out. I just gave up on the whole thing at that point. There'd been so much crap from his friends about how I “liked it” and how I was going to ruin his life over nothing. The prosecutor

said they'd try to do a plea to physical assault since he did hit me and that was on the tape. I just said OK. So that's what happened. He pled to regular assault, got two years on probation and a fine, and no criminal sex record. I haven't gone to a party since then - and I don't know if I ever will again.

**Mei:** The advocate went with me to the prosecutor, too, a month or so after I talked to the police. The prosecutor explained that she'd read the police reports and that she was sorry but there wasn't enough to go on. They couldn't do anything more.



## Sample #6 Survivor Focus Group Discussion (FGD) Report

In partnership with the Women’s Law Center (WLC), Global Rights for Women conducted the first phase of an Institutional Assessment of **Moldova’s** response to domestic violence by conducting focus groups and interviews during the week of September 17, 2018. GRW began the Institutional Assessment with focus groups of domestic violence (DV) victims/survivors.

### Purpose of focus groups

Understanding the experiences of victims/survivors is essential to creating a victim/survivor-centred approach by all the relevant systems. By beginning the Institutional Assessment with victim focus groups, we can immediately identify gaps in the law enforcement response to DV and the cascading impact of those gaps in the response of the entire justice system. Victim/survivor focus groups helped orient the remainder of the fact finding and identify specific ways that interventions can better promote their safety.

### Design

The qualitative research method of semi-structured focus groups was used. GRW staff conducted two focus groups with victims of DV on September 17, 2018. Each session lasted one and a half hours.

### Participants

Each group consisted of ten adult women victims of DV. They lived in Chisinau, suburban and rural areas of Moldova. To protect their privacy, detailed demographic data is not provided. They ranged in age from 21 to 64 years. All but one had children, though some had grown children. Employment included a retired cook, university academics, a dog trainer, a security guard, a worker in a jewelry factory, a worker in social protection, and a cosmetologist. One participant described herself as disabled. Another stated she was pregnant.

### Type of data collected and questions asked

The data collected consists entirely of the comments, observations and opinions shared by participants during the focus group sessions. This report is based on notes taken by GRW staff during the focus groups. The following questions were asked of all participants:

- How many participants had called law enforcement? All
- How long did it take for the police to respond to the call? Answers ranged from 20 - 30 minutes to 2 weeks, to not at all.
- How many participants have worked with an advocacy group? All
- How many have been to court? 16
- How many have obtained protection orders or emergency barring orders: half of the participants.

Most of the data was gathered from participants’ descriptions of their experiences rather than the responses to specific questions.

### Findings and Themes

Victims’/survivors’ accounts contained several consistent themes, most of which related to law enforcement’s failure to take appropriate action in response to complaints of domestic violence. Almost all participants reported that police did not take timely and appropriate action when they called. Police placed obstacles in the path of victims who sought assistance from law enforcement, and often treated them aggressively, blaming the victims and accusing them of lying. Police shielded fellow officers and prominent men in the community instead of acting to keep victims/survivors safe. Officers failed to even recognize psychological or economic violence.

Victims/survivors reported that, in addition to failing to respond to criminal violence, police did not fulfill their statutory role of enforcing protection orders. Neither police nor other members of the justice system informed victims/survivors of their right to free legal

representation or other services available to them. Even when perpetrators were charged with a crime, the justice system often did not hold them accountable or provide victims/survivors with the relief they are entitled to.

One victim's/survivor's story incorporated many of these themes of an inadequate response to violence that led to greater harm:

*My husband is a former police officer. After the first incident of violence, I called the police and they said they would initiate a criminal case. But when my husband apologized at the police station, they asked me to change my original report to make the violence seem less serious, and they reduced the charges against him. The second incident of violence happened on the highway. He dragged me down the highway, bleeding from scratches, in the presence of my child. Witnesses called the police and they came to the scene. The police took me to the police station instead of the hospital even though I was covered in blood. I forgave my husband and there was no criminal prosecution. Six months later he broke my spine. I didn't immediately file a complaint because my husband begged me not to. I got a forensic exam but forgave him and there was no criminal prosecution.*

*When he threatened me with knife six months later, I initiated a criminal case, got a protection order, and filed for divorce. I reported that he used the knife in the criminal complaint, but I was warned that I would be charged with a false statement. The court received the forensic report of the injury to my spine, but the judge decided that I was drunk and fell and injured myself. I asked to have my child, who witnessed the assault, to testify. The court refused to take her testimony. The case was dismissed. I wasn't prosecuted for my statement about the knife, but they wouldn't consider it either. They also wouldn't consider the incident on the highway because it was past the three-year time limit.*

Of the 20 focus group participants, only one woman stated that she had a good experience with the police and the justice system. The police responded when she called, her husband was prosecuted and convicted, and she is no longer a victim of violence.

**Theme 1: Police were unresponsive to victims'/survivors' requests for assistance and often created obstacles that prevented victims/survivors from obtaining assistance.**

Police officers routinely failed to respond to calls in a timely way and often did not come at all. A sampling of victims'/survivors' experiences demonstrates this pattern.

- The perpetrator shot a gun through my window. I called the police, and it took them an hour and a half to come.
- I tried to call police and they wouldn't come. I had to apply to an international organization to get help.
- I called the police nine times, but they didn't respond.
- I called the police for the worst acts, but they wouldn't come.

Police often blamed the victim/survivor and created obstacles that prevented her from getting assistance, or they put the burden on her to keep herself safe.

- I called the police, but they said they couldn't come. They told me to take the children and leave.
- When I tried to report the violence, the police required me to go to the police station in the middle of the night to file a complaint. I had no one to leave my child with and no money for transportation. When I arrived, the police were aggressive and told me, "Go home, you're ok."
- My husband is a drunkard. I asked the police inspector what can be done. He told me that I can write a report but then my husband would have to pay a fine and it would only hurt me.

More than one participant stated that officers pressured victims/survivors to change their complaints to make the violence seem less severe than it was. The

purpose and result was to charge perpetrators with contravention violations rather than a crime, typically carrying a penalty of community service rather than incarceration.

- When my husband apologized at the police station, they asked me to change my original report to make the violence seem less serious, and they reduced the charges against him.
- Police told me to write a second statement with less violence, and say the children were not involved. It was originally a criminal case but was changed to a contravention case. He had to do 40 hours of community service.

Police tried to intimidate victims/survivors by threatening to sue them. They accused the women of making false statements, which sometimes resulted in criminal charges against them.

- The police threatened me with court for making a false report, but I have documents from the police that show that my report was correct. In October 2016, the police inspector came and said that if I kept calling the police, they would sue me. The inspector said, “We come all the time and [the perpetrator] says nothing’s wrong.”
- The police came. Afterward they accused me of making a false report and sued me for the false statement.

Police were reluctant to act against other officers or men with whom they have other connections or are prominent in the community. Often victims/survivors were unwilling to contact law enforcement because they believed that the police would not help them because of these relationships.

- I called the police many times. My husband was a former police officer. Many of his former colleagues are in high positions in law enforcement. I reported that he broke in and vandalized the apartment, but they only came when I had a physical injury. Initially the police would hide the evidence. I had to go to court to make sure the criminal case was continued.

- I was in the relationship for ten years. He psychologically abused me the whole time. I never called the police because he’s a priest. He started physically abusing me in 2016 and my brother-in-law and mother-in-law participated in the violence. When he broke my nose, I got a forensic exam, but the perpetrator fled.
- I went to the police to complain about domestic violence. . . . Nobody came to the house to inquire about what’s happened. My husband said that if I go to the police, he will only get a warning and I will get no justice. A police officer’s son helped build our house.

Several victims/survivors described psychological and economic violence, but often did not report it because police only recognize physical injuries as DV.

- It started with psychological and economic violence, but the police recognize only physical violence. It is hard to recognize psychological violence, but it has a bigger impact.
- I was in the relationship for ten years and was psychologically abused the whole time.
- I was subjected to psychological aggression. He would yell and break things but not touch me in the beginning. I went to the police after he threw the microwave & broke it.
- It started with economic violence. I was working and still breastfeeding. He wouldn’t give me money for food and I had no place to live.

## **Theme 2: Police lacked the knowledge or simply failed to enforce protection orders.**

Although police have the authority to issue emergency barring orders, none of the participants stated that they received the emergency orders. When they obtained longer term protection orders from the courts, police routinely failed to enforce them.

- The police didn’t know how to enforce the protection order. They said that it was OK for the perpetrator to stay in the apartment, even though

the order said he wasn't allowed to get close to me. The perpetrator called the police and told them that I violated the order. The police said that if I wanted to be protected, I should move.

- I had a protection order for eight months. I had to renew it four times. When my husband violated the protection order I called the police. The police officer said they would call him, but the police didn't come. Whenever my husband was in the house I would call the police, but no one would show up. I locked myself in the kitchen for one week and my husband turned off the heat. He told me to go to the police and withdraw my complaint. My husband still occupies the rest of the house.

**Theme 3: Victims/survivors were not informed of their right to legal representation or the availability of services and did not receive representation from state-guaranteed legal aid.**

The Law on Preventing and Combating Domestic Violence provides, "The victim has the right to free primary and qualified legal aid, according to Law on State-Guaranteed Legal Aid." (Art. 11(5)) Article 10 provides for services for assistance and protection of victims of domestic violence (DV) by government agencies and NGOs. The current police policy includes numerous references to the requirement that DV victims be referred to specialized services, including the following:

*The identification of critical situations and the referral of domestic violence victims to specialized services is still a state priority in order not to admit the escalation of these situations and to prevent the re-victimization cases or fatalities. (Ch. 1(4))*

Chapter 2(20)(9) requires police to inform victims of the availability of free legal aid. Yet none of the focus group participants reported receiving such referrals. Victims found legal assistance and social services through means other than police referrals. Some reported paying attorneys but receiving poor service from them.

- The police didn't give me a referral, but I found out about Women's Law Center two months ago.

- I didn't have an attorney but I received legal support from an NGO. I first contacted the NGO when I realized that the police wouldn't act without their involvement.
- I paid for a lawyer, but he did nothing for me.
- I didn't know about advocacy groups. I borrowed money and hired a lawyer.

**Theme 4: Even when the perpetrator was charged with a crime, the justice system failed to hold him accountable.**

The primary purpose of the focus groups was to learn about victims/survivors experiences with law enforcement. We also learned about problems they faced with the justice system, including prosecutors, judges, forensic doctors, and the court system itself. Inefficiency and corruption resulted in a lack of justice for victims/survivors.

- I went to the hospital with a broken arm. A criminal case was started. My husband gave bribes and records disappeared. The police officer who testified in court was also bribed. The doctor said he was bribed with bottle of vodka. My husband was never convicted. We are now in the third criminal case. The judge told me to forgive him because he's the father of my children.
- I have had three protection orders and 14 – 16 cases. Two cases went to criminal court. In the case that is now in process, he attacked me and my son with a knife. I was told that I needed witnesses for the criminal case, but the witnesses were unwilling to testify. The perpetrator fled the country, but he is able to sneak in and out. The criminal case has been suspended until he shows up.
- When he splashed acid on my face, no forensic doctor was available to document the injury. By the time the doctor was available most of the injury had faded.
- The prosecution took about a year. We lived together during the prosecution. It was stressful, and I felt in danger. I withdrew the charges because he is the breadwinner and he said I would be alone with the three children.
- My husband is a policeman. The police accused me of making a false statement. The head of criminal investigation was able to delay the prosecution

by filing information with prosecutor. The time for prosecution expired and my husband avoided any punishment. I tried to file a complaint, but the director of the police inspectorate would hide evidence to present my husband in a better light. My child was a victim of the violence and tried to commit suicide, but I was told that a child couldn't be considered a victim. Domestic violence is tolerated by leaders of the investigation process.

### **Theme 5: Fair division of property is a main concern of DV victims/survivors.**

One of the many obstacles that victims/survivors face in escaping violent relationships is the lack of a safe place for them and their children to live. Participants described the problems they faced in getting the courts to address this need.

- I have been fighting to split the property for two years. We have been living in different rooms of the house. He brings people into house to pay rent. I paid for lawyer but he has done nothing. My main concern is division of the property. Division of property is a concern in many cases of domestic violence in Moldova.
- My husband has been delaying the divorce case for a year and a half by not showing up for hearings.

I had to leave the house and he now lives there. I had to move to a university dorm. He tries to prove that he can give our child a better home because he is living there. Everything is stagnating.

- I filed a request to split the property and all of the family turned against me. The court evicted me and my children from the house. His brothers continue to stay in house.

### **Conclusion**

Moldovan law and policies provides clear direction requiring that law enforcement respond promptly and effectively to complaints of domestic violence. The law and policies require that police officers advise victims of their right to legal assistance and the availability of social services. However, the focus groups identified numerous gaps in the law enforcement response to DV. The experiences of the 20 victims/survivors in these two focus groups presented a picture of police failing or refusing to help, putting obstacles in their paths when they seek assistance, and pressuring them to reduce the report of their injuries to avoid criminal charges. Overall, law enforcement and justice system response or lack of response increased victims' danger from their violent partners.

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