Safety of Staff Working in VAWG and Case Management

How can this work be potentially harmful for staff? Working with survivors of violence against women and girls (VAWG) can be dangerous for VAWG case work staff, particularly if they are part of and known in the community. Threats to staff safety can occur both during, and outside of, working hours and locations. Perpetrators of VAWG, usually men, have a vested interest in ensuring case workers are unsuccessful in their attempts to support survivors and consequently they and their supporters can pose a threat to case workers. Perpetrators and other community/family members (who support or fail to condemn the perpetrator’s use of violence) can seek to obstruct and frustrate case workers support for survivors in a number of ways. Here are some examples of ways in which case work staff may be harmed in the course of their work.

Types of Harm/Abuse:
- Physical – an act of physical violence. Examples include: hitting, pushing, stabbing, slapping, kicking, or other attacks that result in pain or injury.
- Sexual harassment/sexual violence – GBV staff may be sexually harassed or be at risk of sexual violence in the workplace and in the community.
- Verbal – infliction of mental or emotional pain. Examples include: verbal threats of physical harm, threatening of family or friends, intimidation, humiliation, or any other acts of a threatening nature.
- Social – infliction of isolation or denial of services or privileges or access to social or community spaces or activities. Other examples include: blocking access to safety/support to referrals, spreading harmful rumors or intentionally menacing discussions to damage reputations. Other examples include: denial of opportunities to purchase market goods or access to shops/stores, rejection of encouragement not to participate in community-based committees or bullying or penalization of the case worker or their children.
- Economic – denial of access to economic resources or assets or being otherwise economically penalized. This can include: denied access to VSLAs or access to credit, being asked to pay a higher rate for goods, or pressure to pay for community justice fines for survivor safety.
The secondary trauma associated with this work are significant, including the psychological impact of the physical, verbal and social abuse outlined above, which can impact a case worker’s feelings of general safety. This trauma can be worsened by lack of or insufficient case management and work supervision, lack of organizational or institutional commitment to staff care, and a lack of self-care practice by the individual. It is important to recognize and acknowledge this potential psychological harm and seek help from supervisor, peers and trusted friends and family who can help protect from further harm and assist in receiving support. For further information on this issue please refer to the self-care practicalities and case management supervision sections.

How to plan for safety
Clearly staff working in VAWG and case management do valuable work to support VAWG survivors and any threats to their safety must be taken seriously and responded to in a timely manner. Organizations need to identify and think through the situations that are likely to put a caseworker at risk of harm and put clear policies in place for how the organization will support staff in mitigating risks, including deciding when a case needs to be transferred because of the risk it poses to a staff member. Regular consultation with case workers is crucial in order to understand their needs and concerns, the barriers they face in supporting women and girls and the risks/threats they face and to scan for changes in the context or operating environment that may affect their safety and security.

While building community acceptance for programs to support the needs of women and girls is vital, it is important that employers go beyond this strategy to safeguard their staff. They should be proactive and supportive when incidents occur. It should also be clear for staff what they should do if they are in a harmful situation, their key focal points for support and be encouraged to seek help (without risk of redress) from these focal points at the earliest possibility in risky situations.

Throughout the program cycle, there are several key opportunities to proactively plan and organize for more optimal staff safety and security. These opportunities occur: 1) when in the start-up phase of GBV programming activities or the introduction of a new site (this can include consulting with staff in developing risk mitigation plans and ensuring an adequate budget for these activities); 2) when services are being relocated; 3) when expanding services or the range of activities; 4) when phasing out or closing down services; or 5) when gathering survivors feedback on services received. These are all crucial project phases when there is a risk to staff and the opportunity to mitigate the risks they face.

Risk Mitigation Opportunities:
- Avoid lone working situations by ensuring there is more than one staff working in any location. Ensure that staff know they have management
support to look out for one another and feel able to ask one another for accompaniment support rather than go alone.

- Ensure there are policies and procedures in place for supporting staff who experience sexual harassment and abuse. GBV response/prevention organizations should ensure that honest and transparent reporting is respected and occurs without negative repercussions for the reporter and survivor. There should also be visible repercussions/sanctions for male staff perpetrating abuse and a culture of speaking up by women and men within the organization.

- Avoid home visits. Home visits should be avoided for the safety of staff and survivors. If your staff are known to provide GBV case management services or talk about GBV in the community, you immediately jeopardize a survivor’s confidentiality by visiting her/his home. In such situations, case workers are also putting their lives at risk of harm from perpetrators and/or community members.

- Do not conduct mediation sessions.

- Build in resources for and ensure there is regular case management supervision for staff where issues of staff safety are routinely discussed.

- Ensure staff have access to communications devices (e.g. mobile phones with credit or satellite phones in remote locations) to call in emergency threats to their safety.

- Ensure that transportation modes are considered which mitigate risk (e.g. not walking alone if walking is the only option; keeping the driver with the project vehicle close by when accompanying survivors to access referral services).

- Identify a community entry strategy which delivers clear and consistent messages about VAWG project activities and why they are of benefit to the community to build community acceptance and foster support for programs and staff safety.

- Ensure a no-retaliation policy is in place for reporting breaches of safety and security policies and procedures or for reporting safety or security incidents (including near misses).

- Foster an organizational culture where staff can seek help and raise concerns related to their safety and wellbeing, without fear of reprisal.

- Ensure staff know who to call in an emergency. For example, implement a phone tree to clearly communicate to staff who to call in an emergency or who will call them to alert them in case of an emergency.

- Monitor field sites for staff safety issues and adherence to policies and protocols

- Ensure implementation of field safety and security plans. These should include the provision of safety equipment (fire extinguishers and PEP kits) in field offices for staff emergency use.

- Dedicate financial resources to staff safety and wellbeing and ensure this is routinely added to project budgets—caring for the carers should not be optional!
For more information on home visits or mediation, see the associated guidance.

Institutional Support of Staff Safety
Every context and organization will have unique circumstances in which they work. In general, however, all organizations have a duty of care to support their staffs' safety and to provide adequate resources for this. Policies and protocols are one way to systematize consideration of staff safety and some sample of these are mentioned above. In the event of a safety/security incident follow organizational policies and procedures and seek help from a trusted source for your safety and wellbeing.

Additionally, case management supervision when implemented regularly and effectively is also a form of institutional support for staff safety, since one of its functions is that it provides an opportunity to monitor and manage staff stress and offers a space for staff to reflect on their personal values, beliefs and behaviors and how these impact their work with survivors. Both of these aspects can promote a discussion on staff safety levels and risks to staff safety to enable problem solving and risk mitigation as needed.

All organizations providing GBV case management should have at least one case supervisor responsible for ensuring staff are trained and prepared for their case management role, and who regularly monitors caseworkers’ practice and provides the support needed for them to provide quality care. Case supervisors should also be on hand for consultation in emergency situations. Ideally, case supervisors are people with several years of direct experience working on GBV cases.

Providing support for staff in crisis
When staff are in crisis either because of a professional or personal experience that may be impacting their work, the following may be important:

- Create opportunities for staff to share experiences and stressors (e.g. through supervision)
- Watch for case workers who may be suffering in silence and actively reach out to them
- Connect case workers to sources of support – e.g. if they are suffering psychological impacts, connect staff to mental health professionals on a regular basis (if available in the area)

Multiple Choice Questions
1. At what project stages can organizations support staff safety?
   a) At the start-up phase when thinking about implementing VAWG services
b) At all stages of the project organizations have a duty of care to support the safety of their staff

c) None. It is the staff members’ responsibility to keep themselves safe.

2. VAWG staff should:
   a) Conduct mediation with survivors and perpetrators to support their safety
   b) Conduct home visits to survivors and their family members to support their safety
   c) Ensure they have a colleague accompany them, in the community center/safe space or when out in the field to support their safety

3. VAWG staff can experience the following types of harm/abuse when trying to do their work
   a) Physical, psychological, verbal, social and economic
   b) Physical and verbal
   c) Physical and economic

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\[ ^{1} \] At all stages of the project organizations have a duty of care to support the safety of their staff; Ensure they have a colleague accompany them, in the community center/safe space or when out in the field to support their safety; Physical, psychological, verbal, social and economic