**Workshop 1 - Theoretical knowledge about family violence and abuse in Europe**

**Unit 1 - Concepts of type of violence in European families**

In this unit, the learner will learn:

* What is violence
* What is family violence
* Concepts of gender violence, child-to parents; parents-to-child, and elder abuse
	1. **Violence**

According to the WHO, violence is defined as using force or power, intentionally, by act or threat, against oneself or another, a group or community, causing, or having the likelihood of causing, physical or psychological harm, deprivation, death, and the disruption of development. Five key points emerge from this concept: its impact, its intentionality, its power, its targets, and its nature (Krug et al., 2002).

These types of situations can involve the use of physical force not only against others, but against the person him/herself, and can have consequences such as trauma, psychological damage, or death.

* 1. **Family violence**

Family violence is when a family member threatens, harms, controls, or abuses another family member. Family violence can include violence by:

* An adult in a family – for example, a partner or spouse, an adult child or an extended family member,
* An adult who used to be in a family – for example, a former partner or spouse
* A teenage child or young person in the family.

Family Violence is classified as a criminal act of assault on married couples or members of the same family. Can take place in a variety of forms, but typically requires the presence of abuse sustained by one individual member at the hands of the other member of the family.

The target of violence, in the family context, is interpersonal, occurring between family members or between intimate partners and usually within the home. Family violence stands out from other types of aggression, also, by the presence of intimacy and proximity in the relationships between the aggressor and the victim.

According to the ecological model of Corsi (1995; quoted by Alarcão, 2006), the reading of violence in the family, starts with the person's microsystem, the family, and the interactions between its members, taking into account factors such as the violent resolution of conflicts, authoritarianism, low self-esteem, and isolation, being necessary to fit them into the social, economic and cultural exosystem, or community, where the individual is inserted.

Thus, together with external risk factors such as stress, economic stress, unemployment, and alcoholism, among others, the macro system in which the family is inserted and the values intrinsic to culture, patriarchal norms, and religion, the basis of concepts such as power, obedience, the use of force and the definition of gender roles, can also jeopardise the family balance and enhance the onset of the crisis (Alarcão, 2006).

The behaviour of the family, when faced with violence as a crisis, can be predicted through the study of previous patterns, it being common to find during the elaboration of the history of that family, previous situations in which the aggressor has witnessed conjugal violence or being himself, or someone from the family the victim of ill-treatment or sexual abuse (Minuchin, 1982; Rolland, 2000; Alarcão, 2006).

**1.3** **Concepts of gender violence, child-to parents; parents-to-child, and elder abuse**

While research indicates that men are most frequently the offenders of domestic violence and that women and children are frequently the victims, not all family violence is brought on by men.

Any type of family interaction, including those between spouses, relatives, and those directed against the old or the disabled, can involve family violence.

Evidence suggests that gender inequality, or the unequal allocation of power, resources, and options based on someone's gender identity, is a significant contributor to family violence in our community. This disparity, for instance, manifests itself in personal relationships when a guy feels entitled to exert power and control over his partner and children. It may also manifest as the idea that non-binary or gender nonconforming people are less deserving of security and social inclusion.

Family violence affects people of all ages, financial statuses, and cultural and racial backgrounds. But because of things like ableism, ageism, criminal past, homophobia, racism, and other types of discrimination, some groups are subject to particular effects and systematic hurdles.

It is crucial to understand that those who employ family violence are to blame because it is a practice of coercive and controlling behavior. Violence is not the victim's fault or the victim's responsibility. Systems that can interact with the offenders, lessen their use of violence, and give them chances to alter their behavior must hold the offenders accountable for their actions. There are no justifications for employing violence, abuse, or controlling behaviors against another person, even though there may be reinforcing or exacerbating variables such as the perpetrator's own lived experience of violence, a traumatic brain injury, or the use of drugs or alcohol.

This relates to the perpetrator's parental responsibilities as well. A parent who abuses and hurts children, exposes them to the aftereffects of abuse, or engages in family violence against another parent or family member is choosing to expose their children to family violence.

* **Conjugal/ Intimate Partner Violence**

Women are the most common victim, with one in three women worldwide having been beaten, forced to have sex, or abused in one way or another in their lives, and the perpetrator being usually someone close to the woman, with 40-70 percent of homicides where the victim is female being blamed on her husband or boyfriend (Krug et al., 2002).

However, homosexual couples are also affected by this problem, and the level of stress in these cases is increased by social prejudice and psychological violence, through the fear of the social exposure of their sexual orientation and the consequent loss of important relationships in their affective life, making the victim more vulnerable to threats and pushing them to remain in the relationship and in the cycle of violence. Homophobia and heterosexism together with the victims' silence have conditioned the visibility of this type of context, making it more difficult for Lesbian, Gay, Bisexual and Transgender people to access support for victims of marital violence and support services, and the professionals' lack of preparation to deal with these victims is also a risk factor (Shipway, 2004; Redondo, Pimentel and Correia, 2012).

* **Gender-Based Violence**

Gender-based violence is a phenomenon deeply rooted in gender inequality and

continues to be one of the most notable human rights violations within all societies.

Violence committed against a person because of their gender is referred to as gender-based violence. Gender-based violence affects both males and women, but Girls and women are the most common victims. Since it is commonly known that men perpetrate the majority of gender-based violence against women and girls, the terms gender-based violence and violence against women are sometimes used interchangeably.

* **Family Violence and Child Abuse**

Child maltreatment is any non-accidental action or omission (by parents or surrogates) that prevents or endangers the child's safety and the satisfaction of his or her fundamental human and psychological/affective needs. Violence against children within the family context has long been seen as a family problem and covered up by parents as childrearing (Alarco, 2006; Gabatz et al., 2013).

Therefore, according to numerous studies, the perpetrator is typically a parent who harms the child physically (resulting in bruises, contusions, and fatal or chronic injuries), sexually abuses the child, and emotionally abuses the child (continuous harassment of the child, isolation and imprisonment). While physical abandonment differs from abuse in that it also constitutes passive violence, emotional abandonment places a greater emphasis on the psychological and emotional needs of the child (Alarco, 2006; Redondo, Pimentel, and Correia, 2012; Gabatz et al., 2013; UNICEF, 2014).

A child who experiences family violence, either directly or indirectly, is more likely to experience emotional and behavioral issues in the future, including conduct disorders, night terrors, substance abuse, depression, anxiety, post-traumatic stress disorder, psychosomatic disorders, suicide attempts, and self-mutilation, among others.

Children who have witnessed family violence may exhibit the same disorders as those who have been abused because the child's exposure to violence between the couple frequently occurs before the abuse and has an impact on the child's physical, social, emotional, behavioural, cognitive, and overall health. Exposure to familial violence in childhood may increase the likelihood that children may behave aggressively and abusively in their romantic relationships. (Alarcão, 2006; WHO, 2012; Redondo, Pimentel, and Correia, 2012; UNICEF, 2014).

* **Family Violence and Elderly People**

Its definition includes all actions, whether repeated or sporadic, committed by a close relative that causes physical or psychological harm to the elderly. Examples include physical aggression, disrespect, carelessness, a lack of medical attention, and verbal, emotional, and financial abuse (WHO, 2002; Alarco, 2006; Dias, 2009).

International organizations have really brought attention to elder abuse, largely as a result of the rise in reports. Family violence is one of the main causes of elder abuse, as 90% of incidents of violence and neglect against older persons typically occur at home.

Risk factors for the occurrence of abuse include the frailty of the affective ties between family members, social isolation, previous aggressive relationships between the elderly person and the now-aggressor, a history of violence in the family, caregivers who have experienced marital violence, and others (Minayo, 2005; Dias, 2009; Redondo, Pimentel, and Correia, 2012).

In both genders, the victims are the most helpless, reliant, and at risk, as in cases of dementia, patients with motor impairments, and patients who have trouble doing their daily duties. The elderly victim typically displays apathy, dread, and difficulties being independent as a result of the aggressor(s) lowering his or her self-esteem and dignity through mistreatment (Dias, 2009).

However, the victims themselves make these cases more difficult to identify because they are the ones who attempt to conceal what happened most of the time, because they are dependent on caregivers, their children, or other individuals for emotional and affective support, and because society itself does not always perceive it as violence because it fundamentally deprives the elderly of their status, power, and socioeconomic control from the beginning (Redondo, Pimentel, and Correia, 2012). However, many elderly abuse victims lack the mental capacity to properly disclose such incidents.

* **Child-to Parents**

Situations of filioparental violence, have been understood as isolated and out of the ordinary, and for many years it has been a neglected phenomenon. This violence was and is often hidden by parents because they are ashamed to recognise themselves as victims of their own children, for fear of being judged as guilty, or because they feel they have failed as parents.

The Spanish Society for the Study of Child-to-Parent Violence (SEIVIFIP) established the following definition: "Repeated behaviours of physical, psychological (verbal or non-verbal) or economic violence, directed at the parents or those adults who take their place".

"Any behavior by children that generates fear in parents in order to obtain power or control and is meant to cause physical, psychological, or financial harm to parents," according to Cottrel (2001), is considered child-to-parent violence.

Elements that must be present over time include violent behavior that is recurrent, harmful intent, and aimed against parents or people who stand in for them. Because it involves both parents and other people who look after, protect, and educate the offending kids.

**1.4 The different forms of violence in the family**

* **Conjugal/ Intimate Partner Violence**

**Physical:** locking their partner in the house or stopping them from leaving; restraining, pushing, slapping, hitting, kicking, strangling or burning; drugging their partner with prescription, pharmaceutical, or illegal drugs; breaking possessions or punching /kicking walls.

**Sexual:** pressuring victims to have sex or do sexual acts when they don’t want to; pressuring, forcing, or tricking partners into having unsafe sex; making partners have sex or do sexual acts with other people; sexually assaulting (raping) them.

**Psychological/emotional/verbal:** putting the victim down, e.g. telling them that they are ugly, stupid, worthless or incompetent; ridiculing; insulting; the use of swear/curse words or name-calling; humiliating partners in front of friends, family, or in public; undermining the relationship between the partner and their children; threatening to self-harm or commit suicide; intimidating and threatening to use other forms of violence against the partner or against somebody or something dear to him/her; threatening to hurt pets; threatening to harm family members or children; stalking; isolation or confinement; controlling behaviours; withholding information; disinformation; publicizing of threating to publicize private information.

**Financial**: taking the victims money, controlling their income, or accessing the victim’s accounts without consent; making and controlling all the decisions about joint money and assets; refusing to give the partner money or making them account for everything they spend; threatening to withdraw financial support as a means of control; preventing the partner from working so they become financially vulnerable or reliant on the perpetrator; manipulating and coercing the partner to sign financial contracts with third parties; making the partner responsible for all the joint bills and debts, or making the partner responsible for the perpetrator’s debts.

* **Child**

**Physical:** the deliberate or nonaccidental infliction of physical injury or pain, e.g. hitting, burning, slapping, suffocating, and shaking. It also includes administering unneeded medications or making the child ingest harmful substances.

 **Neglect:** ongoing failure to meet a child’s needs is the most common form of abuse. Children can be left hungry, dirty, lacking clothes, shelter and medical care, or not be protected from physical or emotional harm.

**Psychological/emotional:** ongoing maltreatment of a child that may involve scaring, ignoring, humiliation, or isolation. This can lead to the child feeling valueless, unloved, and inadequate.

Witnessing domestic violence is also a form of psychological abuse, and can lead to children becoming aggressive, withdrawn, anti-social, depressed, or anxious and effect school performance.

 **Sexual:** forcing or persuading the child into sexual contact of any kind. This includes in-person contact with the child (e.g. masturbation, penetration, touching the child’s genitals, and getting the child to undress), as well as non-contact abuses (e.g. grooming, getting the child to expose themselves online, and distributing/viewing indecent images). The child may not realise that such behaviours are wrong, or be afraid to speak about it.

* **Elderly people**

**Physical:** inflicting physical pain or injury on a senior, e.g. slapping, bruising, or restraining by physical or chemical means.

**Psychological/emotional:** inflicting mental pain, anguish, or distress on an elder person through verbal or nonverbal acts, e.g. humiliating, intimidating, or threatening.

**Financial/material:** illegally taking, misusing or concealing of funds, property, or assets belonging to a senior for someone else’s benefit.

**Sexual:** non-consensual sexual contact of any kind.

**Neglect:** the failure by those responsible to provide food, shelter, health care, or protection for a vulnerable elder.

**Self-neglect:** the failure of a person to perform essential, self-care tasks, which threatens his/her own health or safety.

**Abandonment:** deserting an elderly person by someone who has assumed responsibility for them.

* **Child to-Parents**

**Physical:** spitting, shoving, hitting, kicking; throwing things, breaking things and punching holes in walls or doors; bullying or physical violence to siblings; cruelty to pets; any action or behaviour that threatens a person’s sense of well-being and safety.

 **Emotional/ psychological:** verbal abuse, yelling, screaming, swearing, ‘put downs’ and humiliation; verbal intimidation; whispering campaigns; emotional and psychological intimidation; playing mind games; making threats to hurt or kill themselves or run away, in order to get their own way or to control you and the family; social media threats.

 **Financial:** demanding money or things you cannot afford; stealing money or possessions from you, your family, or friends; incurring debts that you are responsible for.

**Unit 2 - Key factors and health and social impacts of family violence**

In this unit, the learner will learn:

* The risk factors.
* The health and social impacts of family violence.

Family violence is a complex issue and there is no single cause. There are many factors that predict or 'drive' higher levels of family violence in the community.

To maximize the effects of prevention and care, WHO recommends that interventions are delivered as part of a four-step public health approach:

* defining the problem;
* identifying causes and risk factors;
* designing and testing interventions aimed at minimizing the risk factors;
* disseminating information about the effectiveness of interventions and increasing the scale of proven effective interventions.

Violence in the family is the result of factors occurring at individual, family, community, and wider society levels that interact with each other to increase or reduce risk (protective). Some are associated with being a perpetrator of violence, some are associated with experiencing violence and some are associated with both.

**Unit 3 – Roadmap**

In this unit, the learner will learn:

* Approaches to prevent and respond to family violence.
* Strategies to support and effective intervention.
* Develop a mapping exercise of services.

Mapping can be a process used to identify and understand the needs of the target group. It is important to document what services and initiatives exist and whether they are available to respond. Mapping should include criminal justice agencies, health services, counseling services, NGOs working specifically in the field, specialist community-based organisations, and development programmes. In conducting the mapping exercise, it is necessary to identify the main users of these services, whether there are any groups not being reached and why. It is also important to ascertain what forms of violence the services cover and whether they are geographically concentrated.

**Conclusions**

Violence is an urgent public health problem. From infants to the elderly, it affects people in all stages of life and can lead to a lifetime of physical, emotional, and economic problems.

Preventing and responding to family violence can help to reduce its negative, long-term effects on health and social and economic well-being. It is possible to prevent family violence from happening in the first place by promoting and supporting it.

Evidence-based, validated risk assessment tools to assess and analyse a victim's risks can assist in safety planning and identification of those at high risk. Risk assessment can also be used to help break the cycle of violence by identifying and providing appropriate support to those at higher risk of committing family violence.

| Workshop 1Theoretical knowledge about family violence and abuse in Europe |
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| LEARNING OUTCOME MATRIX |
| KnowledgeKnowledge of the concepts of every type of family violence (gender violence, child-to-parents; parents-to-child, and elder abuse) in Europe. |
| SkillsAnalyse and develop a mapping exercise of services in each country linked to responses to family violence. |
| AttitudesUnderstand the topic of violence in the family and be aware of the services that exist and how to reach them. |
| Learning objectives* To become familiar with what violence and family violence is.
* To know the concepts of all types of violence in the context of a violent family.
* Identify the risk factors and the health and social impacts of family violence.
* To recognise approaches to prevent and respond to family violence.
* To develop an ecomap when working with families.
* To know the strategies to support an effective intervention.
* To develop a mapping exercise of services.
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| LESSON OUTLINE |
| Description of the learning activities* The trainer welcomes participants and introduces the workshop- theoretical knowledge about family violence and abuse in Europe.

Explains that the workshop will be divided into 3 units. Unit 1 - Concepts of type of violence in European familiesUnit 2 - Key factors and health and social impacts of family violenceUnit 3 – Developing a service mapping exercise in the field of family violence. Unit 1* The trainer introduces and explains the relevant information and skills of Unit 1 (with the support of the learning manual to complement the presentation).
* Activity 1 (At the end of Unit 1):

The trainer gives each learner a copy of Activity 1 to carry out the activity. Read with the learners the explanation of what is an ecomap and together they explore the steps to develop an ecomap and the example.  Note: For this activity, the learner can complete an ecomap of their own or complete an ecomap of one colleague.  At the end of activity 1, the trainer promotes a reflection on the tool, with the following questions: * What can be the benefits of developing an ecomap when working with families in situations of violence?
* What was most difficult to identify and why?

 Unit 2 * At the end of activity 1, the trainer introduces and explains the relevant information and skills of Unit 2 (with the support of the learning manual to complement the presentation).
* Activity 2 (At the end of Unit 2):

The trainer gives each learner a copy of Activity 2 to carry out the activity. At the end of the activity, the learners reflect on their answers with the group. Unit 3* At the end of activity 2, the trainer introduces and explains the relevant information and skills of Unit 3 (with the support of the learning manual to complement the presentation).
* Activity 3 (At the end of Unit 3):

 Conduct a service mapping exercise The trainer divides the learners into groups and explains how to develop a service mapping exercise. Read the example of a mapping of Gender-based violence in Nepal. Ask the groups to draw/write maps of their services/entities in the area of family violence, taking into account the area they are covering or where they live- Activity 3 (print out the sheet in large size. The learners should identify the services with post-it notes and put them on the sheet.)The trainer explains that in the post-it is important to have information about the:Where are services located?Who are services available to?Who is using them?What do the services provide?Compare and discuss maps noting similarities, differences, and the services found in their geographic area. * Conclusion
 | **Duration****30 minutes** **1 hour** **1 hour****30 minutes****1 hour****3 hours** |
| TOTAL DURATION | 7 hours  |
| Materials required for the workshop * Computer;
* Projector;
* Paper;
* Activity 1, 2, and 3;
* Annex 1;
* Post-its’s;
* Pens.
 |
| References (if necessary)(please use APA Style)* Martins, E. Rato, M. Marques, E. Familiy violence: concepts, impact and intervention of health professionals. Egitania sciencia. [ermelindam\_169a.pdf (ipg.pt)](http://bdigital.ipg.pt/dspace/bitstream/10314/4195/1/ermelindam_169a.pdf)
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* NIJ. Category D: Social and Cultural Context: Domestic Violence and Children. Compendium of Research on Violence Against Women. 1993-2020. [COMPENDIUM OF RESEARCH ON VIOLENCE AGAINST WOMEN 1993-2020 (ojp.gov)](https://www.ojp.gov/pdffiles1/nij/301583-d-iii.pdf)
* ONU FEMMES. Centre de Connaissances Virtuel Pour Mettre Fin à la Violence contre les Femmes et les Filles. (February 2019). Conduct a service mapping exercise. [Conduct a service mapping exercise (endvawnow.org)](https://www.endvawnow.org/fr/articles/1813-conduct-a-service-mapping-exercise.html)
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**Activity 1**

**Ecomap**

Creating an ecomap is a graphic and useful way of assessing families in which the families themselves can participate. This method of diagramming depicts the family in its dynamic ecological system. Other important systems that influence the family are included in the ecomap. The ecomap also provides a picture of the important nurturing or conflict-laden connections between the family and the world; demonstrates the flow of resources, or lacks and deprivations; and highlights the nature of the interfaces and points of conflicts to be mediated, bridges to be built, and resources to be explored. An individual family member or the whole family can be invited to produce the map. The process can be revisited and the map redrawn at various intervals throughout the assessment and matching process to illustrate how the “picture” can change as the family “changes” and at the possible introduction of new members into the family.

Instructions for Ecomapping:

1. Draw a large circle in the middle of the map. This represents the members of household.

2. Inside the large circle, draw a genogram that describes the makeup of the household. It is often useful to add names and ages. Limited space may prevent adding additional descriptive information.

3. Inquire into what outside systems influence the family unit and its members. Examples of these outside systems may include work, extended family, church, school, health care, social welfare, recreation, and friends. Draw smaller circles around the large household circle and label them to represent the outside systems.

4. The next step is to begin to draw the connections of the family unit and its individuals to the various systems in their environment. These connections are indicated by drawing lines between the family and the circles representing the outside systems.

Some of the connections may be drawn to the family unit as a whole or to the individual members. This differentiation demonstrates the way the various family members are connected to the environment.

5. Next, indicate the direction of the flow of resources, energy, or interest by drawing arrows along the connecting lines.

 6. Finally, write a word or two beside the connecting lines or smaller circles to further describe, clarify or highlight information drawn on the ecomap. Below, you will find an example of an ecomap and a key to the symbols most commonly used on ecomaps.

Example of an ecomap:

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**Activity 2**

**Case Scenario**

Nora is a 34-year-old woman with an immigrant background. She has lived here in your country for three years with her parents and sisters. Nora married Peter two years ago. Peter is the son of a family friend of Nora’s parents. Nora’s family comes from a patriarchal culture where the community comes before the individual.

Nora’s marriage to Peter was a relief for Nora’s family since in their culture a woman at Nora’s age should not be single. However, quite soon after Nora and Peter got married, Peter started to control her everyday behaviour. Peter does not let Nora see her friends or go anywhere without him. A mandatory language course is the only place where Nora can go alone.

Peter takes away Nora’s debit card and takes loans under her name. When Nora tries to resist, Peter turns violent and abuses her. Peter threatens to send Nora back to her home country.
Nora discloses the situation to her parents, asking for help. First, the parents take Peter’s violent behaviour seriously, but suddenly Nora’s father passes away. Nora’s grieving mother is not capable of standing against Peter’s will on her own.

At the same time, Peter spreads rumours about Nora’s immorality in order to justify the claims of his violent actions toward their community. The rumours humiliate Nora’s family. The community pressures Nora’s mother and her sisters’ families to clear their name.

Nora’s mother begs Nora to stay with Peter to calm the situation and her sisters ask her not to bother their mother with the issue anymore. Nora feels that she is responsible for the violence and her family’s reputation and accepts that divorcing Peter is out of the question.

Over time, the violence gets more serious and more frequent. On one occasion, Peter strangles Nora for so long that she loses consciousness. After the strangulation, she starts to have speech impairment issues, especially in stressful situations. Nora feels isolated, helpless, and depressed.

Peter has threatened to share some private pictures of Nora in public if Nora ‘ruins his reputation as a husband’, as he puts it. Nora feels anxious since she cannot talk to anyone – even her family – about her feelings.

After analysing the case, answer the following question:

1. Which acts, situations or conditions endanger Nora?

**Activity 3**

**Conduct a service mapping exercise**



**Annex 1**

**Example: Mapping of Gender-based Violence (GBV) in Nepal**

Throughout Nepal, many local and international NGOs are working to address problems related to various forms of GBV. The programs include advocacy, awareness, capacity building, and providing support and shelter services to survivors. Their efforts have been examined in several studies, but a current and comprehensive examination of the issue throughout all of Nepal's districts was lacking, leading the Asia Foundation, in partnership with the UK Department for International Development (DFID), to conduct a preliminary mapping of GBV interventions in Nepal in early 2010. This came in the wake of a landmark show of political will by the Prime Minister of Nepal, who declared 2010 the year to combat GBV.

The mapping exercise was expected to inform the work of the Gender-based Violence Complaints Handling and Monitoring Unit set up under the Office of the Prime Minister, government ministries, organizations working in the field of GBV, and various other stakeholders. It was also intended to lay the groundwork for more extensive research to ultimately prevent duplication and contribute towards the designing of a holistic plan for effectively addressing GBV in Nepal.

The preliminary mapping, conducted with 36 NGOs based in the capital Kathmandu (but working across the country), revealed that NGOs were working on domestic violence, trafficking, girls' rights, and single women's (widow's) rights.  The scale of violence was difficult to assess, due to most cases going unreported and/or being temporarily settled in the community, or even the household, through mediation, threat, and intimidation.

The NGOs were mainly involved in 3 categories of response activities – awareness and advocacy, prevention and support. Many had recently mobilised to create the National Network Against Domestic Violence (NNADV), to pressure the government to pass the Domestic Violence Act, and once it passed in April 2009, to track its implementation.

For more information, see [Nepal: Preliminary Mapping of Gender-Based Violence](http://asiafoundation.org/resources/pdfs/GBVMappingNepal.pdf) (Asia Foundation, 2010), Kathmandu: Asia Foundation.