

# Introduction to SGBV Information Management

Regional SGBV CM/IM Workshop

9-11 October 2017

San José, Costa Rica

# Learning Objectives

- Describe what is **meant** by SGBV /CP Information Management
- Identify global ethical **standards** and **good practices**
- Explain the **challenges**
- Explain how GBVIMS (also in proGres v4) can be used for **data collection** and **analysis**

# How do we collect SGBV/CP related information?



- General needs assessments, sector specific assessments, protection assessments, participatory assessments, focused SGBV/CP assessments
- Through service provision: collecting information on SGBV incidents and CP risks
- Safety Audits
- Ongoing monitoring work by specific sectors

# Inter-agency

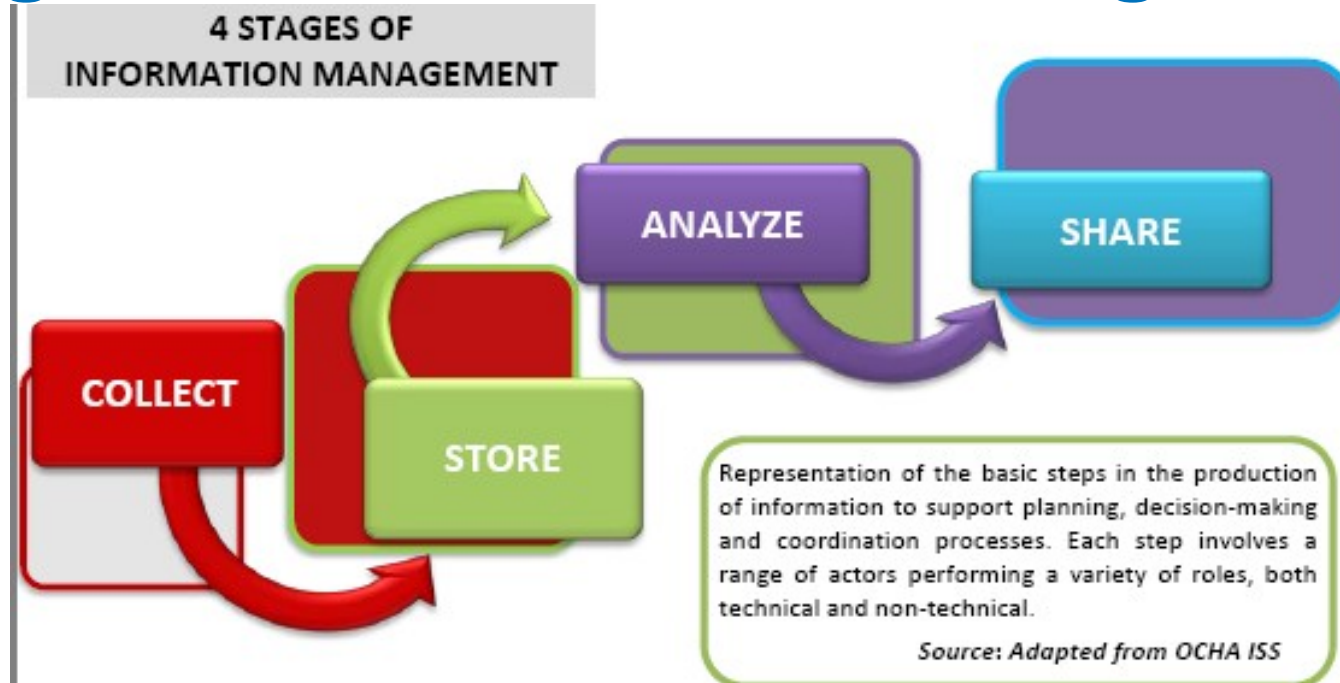
- A well-coordinated **inter-agency** effort is much more likely to be successful than efforts by individual organizations conducted in isolation.



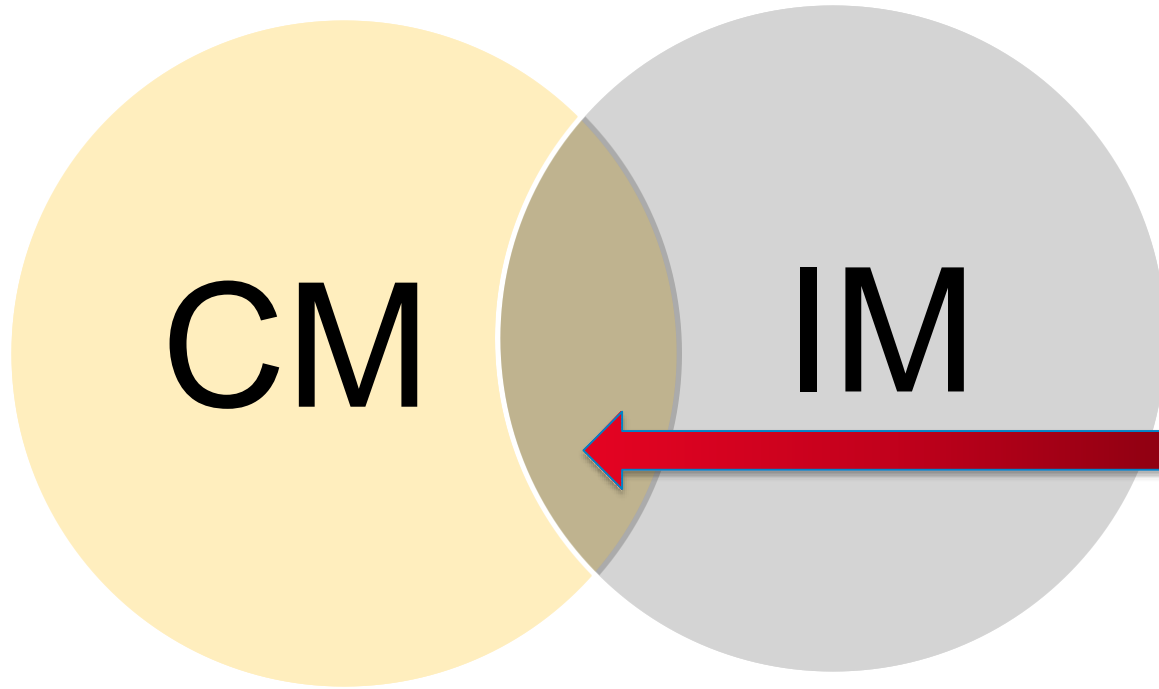
# SGBV information is sensitive

- Collecting SGBV/CP data is a delicate process that can be **traumatizing** for survivors and children.
- **Mishandling information** can have severe **consequences** for survivors, their families, communities and even service providers.
- There are various **global ethical standards** that must be understood and implemented before collecting and sharing SGBV/CP data.

# 4 Stages of Information Management



# Common areas between CM and IM



## Overlapping areas:

- Intake forms
- BIA/BID
- Referral and transfer information
- Referral tracking
- Family tracing

# ACTIVITY: Good vs. Bad Practice

- Stand up if you think the practice is a good practice.
- Stay seated if you think it is a bad practice.



**Only initiate SGBV prevention  
and response interventions  
after an in-depth assessment  
has been conducted.**

**Conduct interviews with  
survivors and children to  
obtain insight into the  
protection risks**

**Involve community  
members in  
analyzing SGBV/CP  
related information  
collected as part of the  
participatory**

**Ask for the survivor's consent  
before sharing *any* information  
about their case.**

**Spending money on locked  
cabinets for storing case files  
even if offices are well secured.**

**Share feedback with  
partners on the information  
they have shared.**

**Collect as much information as possible while you can and then sort through it to see what is useful now and what may be useful later.**

# WHO Recommendations

1. Benefits must be greater than risks.
2. Information gathering follows good practice.
3. Services are available for survivors and children.
4. Safety and security of all involved are continuously monitored.
5. Confidentiality is protected at all times.
6. Informed consent has been obtained.
7. Members of the data collection team receive adequate training and support.
8. Additional safeguards are established when children are involved.



# Statement

- Assessments are **not required** in order to put in place essential SGBV prevention and response measures prior to or from the onset of program planning.

# Key Points SGBV Assessments

- Needs assessments:
  - At the onset of program planning
  - At regular intervals for monitoring purposes
  - During ongoing monitoring of safety and security (also called protection monitoring)
- As part of broader protection assessment
- Inter-agency, inter-sectoral and interdisciplinary.

# Assessing CP and SGBV risks in All Sectors

- All sectors should explore why and how SGBV/CP related safety issues might arise in their areas of work.
- SGBV survivors should *not* be sought out or targeted as a specific group during assessments.

# Survivor-Centered Approach

- Confidentiality is **crucial** in ensuring the safety and protection of a survivor, their family and community.
- How do you guarantee confidentiality?



# Confidentiality



Individual-level, SGBV/CP information should be treated as **strictly confidential** at all times. Case information should only be shared on a need to know basis, i.e., with those service providers who are directly involved in the management the case.

# Informed Consent

- Survivors and child care givers/or young children understand the potential **risks** and **consequences** of sharing their data externally.
- Survivor and child care givers/or young children give or do not give **authorization** to use the data.

# Information Sharing

- Often an issue of **contention** that can cause tensions between different actors and lead to a breakdown in **coordination** and **trust**.
- The point where ethical considerations can easily be overlooked, since survivor consent and child assent are often disregarded in the name of intra- and inter-agency coordination.

# Information Sharing: Good Practice

- Two-way information sharing is key to strong coordination and partnerships.
- Clarify rules and procedures for inter-agency, SGBV/CP information sharing beforehand using an Information Sharing Protocol.



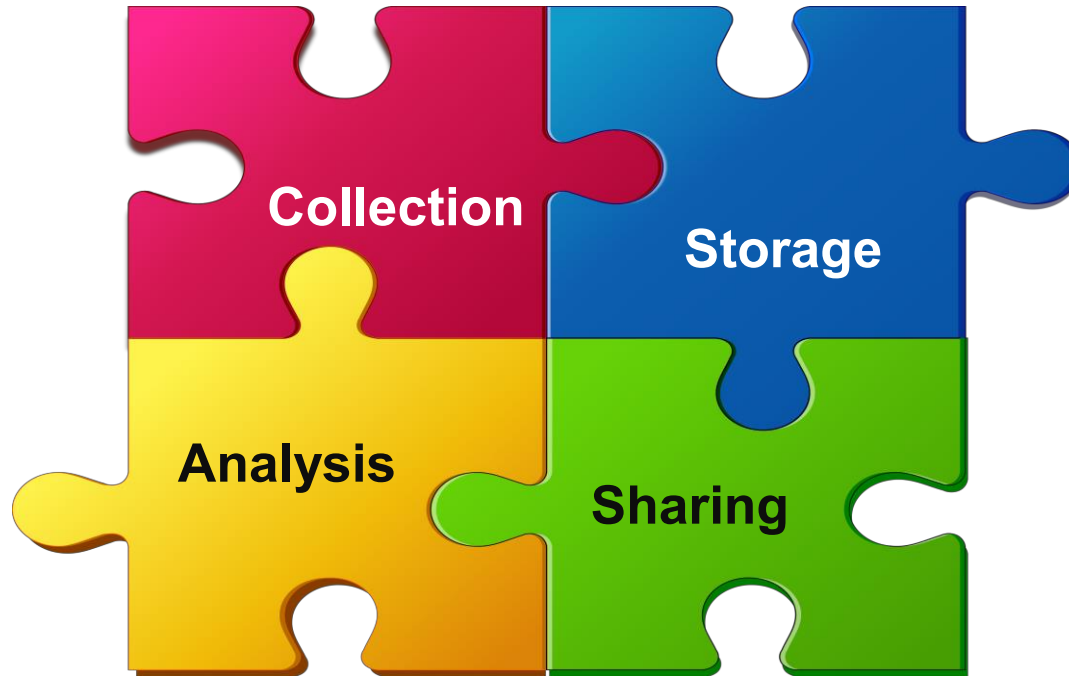
# ACTIVITY: The IM Puzzle

- **Understanding the challenges in each SGBV/CP IM stage:**
  - Collection
  - Storage
  - Analysis
  - Sharing

## Instructions:

- Put together the 4-piece puzzle under your stage of information management.
- Your group representative may need to consult with another group if a puzzle piece does not fit.

# Understanding the Challenges



# Understanding the Challenges

## COLLECTION

- **Lack of clarity** regarding what data is appropriate and useful to collect
- **Lack of prior agreement** and **standardization** on what data is collected and how
- **Human error** while recording information on forms

# Understanding the Challenges

## STORAGE

- Client files and SGBV data are not stored with adequate precautions to protect client anonymity and safety.
- Appropriate precautions such as anti-virus protection and database backup are not taken, making loss of stored electronic data common.
- Contingency plans for destruction of paper files during emergency evacuation are non-existent.

# Understanding the Challenges

## ANALYSIS

- Calculating and compiling SGBV/CP data by hand is very **time intensive**.
- Staff are not accustomed or trained to use collected data.
- Lack of inter-agency data analysis leads to **fragmented and isolated responses** to SGBV/CP.

# Understanding the Challenges

## SHARING

- Client consent over the use of data is overlooked, e.g. client files are often expected to be **automatically shared** as routine reporting versus within the confines of a referral and with client consent.
- Lack of standardization in SGBV/CP terminology, data collection tools and incident-type classification **undermines quality**.
- **Quantity** of data is prioritised over **quality** and usefulness of data.
- Requests for information are made without an explanation.

# Standardization

- What is **standardization**?
  - The process of creating **consistency** or **regularity**
- What is an example of standardization?
  - Measurements, e.g., kilograms, inches
- Why is it important?
  - Enables **the compilation** and **comparison** of information from different case workers, organizations and even countries
  - Allows for **reliable information** sharing and, ultimately, improved coordination

# The Gender-Based Violence Information Management System

**The GBVIMS is an inter-agency partnership between UNFPA, UNHCR, UNICEF, IRC & IMC**

**The GBVIMS was created in 2006 to:**

- Harmonize SGBV data produced through service delivery in humanitarian settings
- Help facilitate safe and ethical data sharing between agencies to help inform the humanitarian community's response to SGBV



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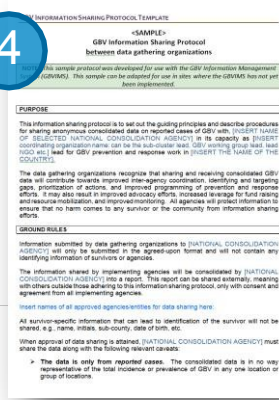
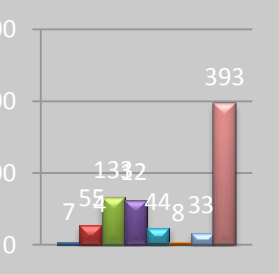
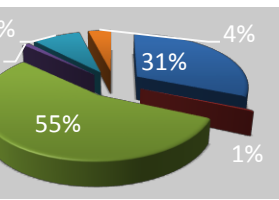
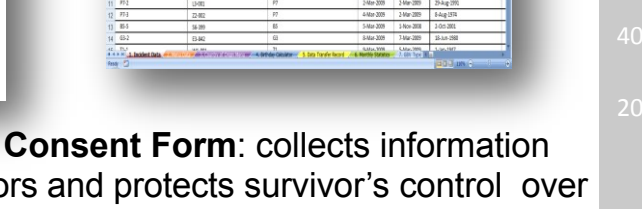
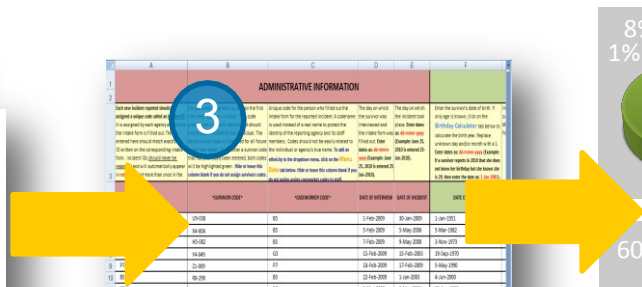
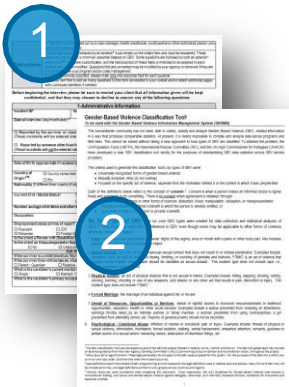
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**Intake and Consent Form:** collects information from survivors and protects survivor's control over their information.

**GBV Classification Tool:** standardizes GBV incidents making data easy to compile, compare, and analyze.

**Incident Recorder:** an Excel database designed to gather corresponding information from the intake form; automatically generates data and allows for customized analysis.

**Information Sharing Protocol Template:** regulates the sharing of GBV data with other actors such as coordinating agencies.



GBVIMS Data Informs

Reports & Proposals

Program Design

Advocacy

# proGres v4 and GBVIMS

- GBVIMS is now integrated into the proGres v4 SGBV module
- Allows for greater standardization across country operations regardless of staff member's culture or local terminology
- Partners not using proGres can still improve their practices by using GBVIMS and signing onto an Information Sharing Protocol

# Key messages



- SGBV/CP IM (such as GBVIMS, proGres or any system) is *a means to an end, not an end in itself*.
- Any SGBV/CP-incident data should be generated through service delivery. **Remember: services come first.**
- Standardization (of terms, type of data collected, systems) allows for compilation and comparison across organizations and countries.
- Carefully consider what information is required to fulfil which purposes. Collecting information to only have the information is unethical and wastes valuable time and resources.