Documentation of Day 3 – Gender stream

Gender-based violence and mental health and wellbeing.

The day focused on gender-based violence & mental health and well-being.

**Gender based violence** is violence against persons because of their gender whether it is against women, transgendered, bisexual persons. Although gender violence affects all genders, women are by far in the majority, with most other victims being children, young boys and girls and LGBTQ+ persons. The focus was therefore on violence against women. Gender based violence should be tackled from both a preventive and service perspective. Health systems are one of the weakest links for both prevention and service. Sadly, statistically women are safer outside the home than in the home or with people they know.

Gender based violence is related to power dynamics – ‘to keep you in your place’. It is a public health issue and a human rights violation.

The group discussed different forms of violence, why it happens and then shared personal experiences of gender-based violence, or witnessing incidents.

**Impact of gender-based violence on individuals and societal institution**

In groups we then discussed the impact of gender-based violence on an individual’s physical, mental and sexual and reproductive health and on societal institutions such as the family, society in general, the legal and health system, police and the general environment.

Consequences of GBV on Physical Health

- HIV / STI
- Anemia
- Injuries, Bruises, Dental injuries, Pain, illness, infection
- Burns due to acids & flames
- Miscarriage, induced abortion
- Cutting, amputation, causing disability
- Suicide, Murder, Death
- Malnutrition & related illness
- Chronic Health conditions
Impact Of GBV on Mental Health

1. Post Traumatic Stress Disorder
2. Depression/OCD anxiety
3. Suicidal Tendencies/Attempting Suicide
4. Low Self Esteem/Inferiority Complex
5. Feeling Of Not Being Useful
6. Trying To Fix Myself
   Illusions
   OCDs
7. Body Image Issues
   Hallucinations
8. Shame (of hiding their sexual identity)
9. Trust Issues
10. Addiction
11. Transference Of Violence/Crime
12. Insecurity
13. Feeling Dirty Inside
14. Loss Of Identity
15. Self Harm
16. Withdrawal From Social Interaction
Role of the health system and caring for survivors of gender-based violence

Next we discussed the role of health systems support survivors of gender-based violence and caring for survivors of gender-based violence.

Role of the health system:
- It is a public health and a social determinant of health
- Need physical, mental and social support
- Recording details is crucial for medico-legal cases
- Referrals to other service
- Medical reports often put down random mental illness diagnoses
- Often women do not ascribe injuries to domestic violence as it usually is a family member

Caring for survivors:
- Emergency treatment for STIs, emergency contraception, HIV prevention
- Treating injuries
- Sensitive counselling
- Referrals to other resources

Importance of educating health professionals.

There was then a focus on counselling and specifically on LISTENING attentively and sensitively. A technique called SOLER was introduced which was practiced in groups of through.
S – Sit square
O – Open posture
L – Lean forward
E – Eye contact
R – Relax
Human connection and feeling safe and comfortable are more important than medication in this context.

Mental health

Mental health was introduced from a personality development approach focusing on transactional analysis theory. We all have the ‘parent’ ‘adult’ and ‘child’ within us and often learn to repeat what we learn from observing our parents.

Often women in particular grow up believing:
You don’t exist (birth of a girl in many cultures is not celebrated)
Don’t belong
Don’t get close to men
Don’t succeed or become important
Don’t grow up
Don’t feel (boys) – don’t think (girls)
The linkages between mental wellbeing and violence, conflict were presented by another resource person, using examples from Central and South America. Mental Health as a public health issue continues to be marginalized; the need for public health measures of healing beyond the bio-medical; the need to develop adequate skills and human resources were emphasized.

The session ended with groups working on their projects.