



ENDING VIOLENCE AGAINST WOMEN AND CHILDREN IN THE PHILIPPINES

OPPORTUNITIES AND CHALLENGES FOR
COLLABORATIVE AND INTEGRATIVE APPROACHES

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Individuals shown in the photos are not necessarily survivors of gender-based violence or child abuse. No images that identify survivors have been used.

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■ DEFINITION OF KEY CONCEPTS

Violence against children (VAC) refers to “all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse” against any person under age 18 (United Nations Convention on the Rights of the Child, 1989).

Violence against women (VAW) refers to “any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life” (Declaration on the Elimination of Violence against Women, 1993). In general, the term “women” is assumed to refer to females of all ages. Some institutions specify a focus on violence against women and girls (VAWG) to emphasize the inclusion of girl children in their work on VAW.

■ ABBREVIATIONS AND ACRONYMS

CSO	civil society organization
DSWD	Department of Social Welfare and Development
GAD	gender and development
IACVAWC	Inter-Agency Council on Violence against Women and their Children
NGO	non-governmental organization
UN	United Nations
UN Women	United Nations Entity for Gender Equality and the Empowerment of Women
UNFPA	United Nations Population Fund
UNICEF	United Nations Children’s Fund
VAC	violence against children
VAW	violence against women
VAWG	violence against women and girls
WCPD	Women and Children Protection Desk in police stations
WCPU	Women and Children Protection Unit
WHO	World Health Organization

EXECUTIVE SUMMARY

Background

While the fields working to end VAC and VAW have largely developed separately, recent reviews and analyses of large datasets have identified multiple intersections between VAC and VAW including: co-occurrence, shared risk factors, similar underlying social norms, common consequences, intergenerational effects, and the period of adolescence as unique period of heightened vulnerabilities to both types of violence. These intersections suggest that collaboration between the sectors is essential to a more effective prevention and response. Integration of certain aspects VAC and VAW prevention and response across services, programmes, and policies may also be advantageous. However, there are key areas of divergence between the traditional approaches in the VAC and VAW fields that have created challenges to collaboration and may suggest some disadvantages to fully integrative approaches. To date there are no evidence-based or widely accepted integrative models.

This multi country study, commissioned by UN Women, UNICEF and UNFPA, explored existing examples of collaboration and integration of VAC and VAW policies, services, and programmes, as well as challenges and future opportunities in the East Asia and Pacific region, with a focus on four countries – Cambodia, Papua New Guinea, the Philippines, and Viet Nam.

Key research questions

This research initiative sought to answer following overarching questions through dialogues and interviews with relevant stakeholders in each country:

1. What are the existing VAW and VAC policies, action plans, programmes (prevention) or services (response/support)?
2. What are some examples of policies, action plans, programmes, or services where there is some evidence of VAW and VAC integration (i.e.: addressing both VAW and VAC at the same

time)? Include any efforts to try to develop cohesive strategies or plans or collaboration.

3. How do VAW-focused and VAC-focused stakeholders collaborate or interact? How do donors drive the VAW-VAC agenda?
4. What are the areas of tension between VAC and VAW work? How do various stakeholders address areas of tension between VAW and VAC?
 - a. Under what circumstances are boy-children accommodated in places of safety?
 - b. How are adolescents' complex needs met and rights protected?
 - c. How are mothers viewed and "processed" in VAC cases?
5. What are some opportunities within the existing policies, action plans, programmes or services where integration and/or collaboration could be introduced or enhanced?

Key findings

Violence against children (VAC) and violence against women (VAW) affect the lives and welfare of millions of people around the world. Many women and children in the Philippines suffer multiple types of violence. The multiple negative sequelae of this violence can be long-lasting throughout the lifespan and across generations as well as impacting on individuals, relationships, communities, and broader society.

Agenda and priorities

- The Philippines has good quality national prevalence data on some forms of VAW and VAC; however, administrative data are poorly coordinated thus not allowing for a holistic picture to understand gaps between national prevalence and service delivery.
- There is no mechanism to ensure national prevalence data on VAC are regularly collected. VAW data is regularly obtained from the National Demographic and Health Survey.
- While there are no data or studies to date on VAW-VAC intersections in the Philippines, stakeholders are aware of various important

intersections in vulnerabilities. Structured data collection protocols or studies would provide useful evidence for policy and programming.

- Improved access to and analysis of reliable data, as well as dissemination of findings, could assist in strategic funding or budget guidelines for the gender and development budget and the child protection budget.

Government, legislation and policy

- Multiple government departments have a role in both VAC and VAW and serve on the Inter-Agency Council on Violence Against Women and Their Children (IACVAWC): Department of Social Welfare and Development (DSWD), Department of Interior and Local Government, Philippine National Police, Department of Justice, Department of Health, Department of Education, Department of Labor and Employment, Civil Service Commission, Commission on Human Rights, Council for the Welfare of Children, National Bureau of Investigation, and National Commission on the Role of Filipino Women. This committee did not appear to drive specific integration efforts.
- The Philippine Commission on Women is the primary policy-making and coordinating body on women's empowerment and gender equality.
- The Philippine Plan of Action to End Violence Against Children includes roles for DSWD, the Department of Education, Department of Justice, Council for the Welfare of Children and the Department of Interior and Local Government.
- The main pieces of legislation applicable to VAC and VAW are Anti Child Abuse Law (RA 7610), Anti-Rape Law (RA 8353), and Anti-Violence Against Women and their Children Act of 2004 (RA 9262).
- While there are councils and committees set up to address VAC and VAW and many service providers see both VAC and VAW survivors, there are no formal integration policies or programming guidelines.

Access to justice

- VAW desks at the barangay or village level facilitate access to justice and support services for VAW and VAC survivors primarily through referral to the Women and Child Protection Desk (WCPD) at police stations.

- Protection Orders, mediation, settlement, conciliation, or arbitration are remedies offered to survivors within the barangay level but the WCPD can refer cases for review to enter the court system.
- There are multiple barriers to accessing justice including a large burden on victims to collect evidence from multiple sources, long and drawn out justice procedures, lack of sensitive or protective judicial processes (especially for children), as well as economic and social stigma issues.
- There are no guidelines for examining intersections between VAW and VAC in any of the judicial or law enforcement protocols.

Response and support services

- There are referral guidelines for VAC and VAW survivors but these have not been integrated nor do they address intersectionality.
- While individual service providers may take an integrative approach when dealing with a VAW or VAC case, this is not protocol-driven. Most service providers called for a separation and specialization of VAC and VAW cases.
- Women and Child Protection Units (WCPU) are usually based within hospitals; however, again, there are not specific integration protocols that provide guidance on managing the various intersections between VAC and VAW but rather that adult and child survivors can access services from this Unit. The intake form for VAW cases includes a query on the children's welfare. There is collaboration between medical doctors, social workers, and police officers under WCPU; however, they are unable to complete forensic rape examinations because they do not have the facilities or kits available.
- There are few shelters available to women and children and most of them are consistently at or over capacity. Many shelters house both domestic violence survivors and trafficking victims. The shelter provides various services including psychological, livelihood strengthening, social services, medical and dental, dietary services, and orientation to the laws that protect women in the hopes that the women will be able to live independently and seek help if they experience violence again. Few shelters will accept repeat visits from the same survivor.

- The shelters are not designed for children. However, in some cases women arrive with their children and the shelters are forced to accommodate them. They generally do not accommodate boys over age 7. There are Havens for Children (separate ones for girls and for boys) but these homes are also for children in conflict with the law, trafficking victims, or orphans thus are not ideal for children having to leave violent homes with their mother. There are no recovery or support services for children within the women's shelter.
- Adolescent girls are particularly vulnerable because neither the children's home nor the women's shelter has the capacity to serve such cases. Therefore, they are often sent to shelters run by non-governmental organizations (NGOs) if such support is needed.
- Economic empowerment of women (especially survivors of violence) was a prevention strategy used by some NGOs and shelters but no evaluation data on prevention of either VAW or VAC were available for these.
- There are some prevention programmes engaging men lead by MSWD and DSWD.
- UNICEF Philippines has supported some positive parenting programmes to prevent VAC but these have not addressed VAW prevention.
- UNFPA worked with the Department of Education to operationalize school-based Comprehensive Sexuality Education, under the mandate of the national Responsible Parenthood and Reproductive Health Law. The curricula is in accordance with international standards and includes components covering gender-based violence and gender equality.
- UN Women is supporting a Safe Cities project to reduce sexual harassment in public spaces.
- Some NGOs have engaged in various prevention projects including addressing problematic gender norms within religious communities to prevent VAW, and preventing online exploitation of youth.
- While prevention programming is, theoretically, a key opportunity for integration of VAW and VAC work, most prevention programmes lack strong evaluations of outcomes and impact available, thus making it difficult to understand the effectiveness of different approaches. Further, VAC and VAW projects tend to focus on different sets of outcomes making it difficult to gain insight into integrative, accelerative, or cross-cutting impacts on both VAC and VAW.

Humanitarian emergencies

- As in other countries, humanitarian emergencies appear to offer good opportunities for innovation and collaboration on VAC and VAW issues; however, this rapid partnership work does not usually translate into ongoing cohesive and collaborative programming.
- A recent example in the Philippines is the response to Typhoon Haiyan during which GBV Watch Groups led by women were initiated by a local NGO to patrol communities to enhance protection of women and children. These Watch Groups are continuing in the communities and there are plans to initiate them in other communities in rural areas.
- It would be useful to conduct a post-emergency analysis to glean lessons learned and key success strategies to collaborative and innovative efforts that address both VAW and VAC in an integrative way.

Prevention programming

- Many stakeholders interviewed for this study considered secondary prevention approaches – for example early identification of and intervention with victims to prevent an escalation or recurrence of violence – as the main effort to prevent VAW and VAC.
- Awareness-raising was the most commonly described approach to primary prevention of VAW and VAC; however, this approach has been shown to be ineffective in preventing violence.

Integration of VAW and VAC approaches

- It appears that collaboration has worked best when VAW and VAC stakeholders come together on a specific issue (e.g., statutory rape, humanitarian crisis) rather than more broad. This means that there are no overarching efforts at dealing with areas of divergence to develop an overall integrative way forward. This focused kind of collaboration also means that some areas of convergence or synergy between VAW and VAC work may be missed.

Recommendations

- In general, the study participants suggested that integration was not an approach they felt was ideal and there were repeated calls for separated, specialized policies, services, and programmes to address VAC and VAW. However, given the lack of resources as well as the existence of several services that address both VAC and VAW, it seems that pursuing some integrative or collaborative VAC-VAW approaches are warranted.
- Services and programming for adolescents is a particular gap in the Philippines. Generally, adolescents are considered children under the law. More advocacy, research, and innovation is needed to meet adolescents' needs with regard to VAC and VAW.
- Intake forms and referral guidelines could be reviewed to prompt integrative case management for VAW and VAC survivors.
- VAW and VAC stakeholders, including UN agencies, may engage in a mapping activity to understand the various approaches they are taking and find synergies or strategic opportunities for integration or other kinds of collaboration. This activity could lead into work to develop a theoretical framework of integrative VAC-VAW approaches that are relevant and feasible within the Philippines taking into account the varied resources and needs in different parts of the country.
- Staff at WCPUs, WCPDs, and the VAW desks would benefit from on-going training and capacity building in both VAW and VAC issues - it appears that separate, specialist units are unlikely and therefore service providers will have to continue to work with both VAC and VAW survivors.
- Improvements in both national prevalence and administrative data collection and management could provide opportunities for research on adolescent issues, and intersections between VAC and VAW. The availability of reliable and high quality data could inform ongoing policy, programming, and service work to comprehensively and effectively address VAC and VAW in the Philippines.



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INTRODUCTION

Violence against children (VAC) and violence against women (VAW) are global epidemics inhibiting the fulfillment of human rights and optimal development at the individual, family, community, and society levels. This violence affects millions of women, girls, men, and boys across the world with many long-lasting and wide-ranging health, economic, and well-being consequences.¹ There are international legal frameworks protecting children and women, including the United Nations Convention on the Rights of the Child (CRC) and the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW). The Sustainable Development Goals include targets and indicators for the elimination of VAW (under Goal 5) and VAC (under Goal 16). Although these fields have historically developed separately, growing research has recognized the multiple intersections between VAC and VAW including shared risk factors, common underlying social norms, co-occurrence, intergenerational effects, similar consequences, and the adolescent developmental period as a unique time of intersection of both VAC and VAW.² These multiple and inextricable links suggest that the response to and prevention of one is necessarily connected with an effective response to and prevention of the other.

While policies, programmes, and services have developed to address both VAW and VAC, to date there are no evidence-based best practice models that integrate these. Concerns about either women's or children's needs and rights overshadowing the other, a nuanced understanding of the context and abilities to fulfil parental duties, a developmentally sensitive approach to adolescents, and how to serve and engage with boys are some of the tensions in pursuing integrative and/or collaborative VAW and VAC policies, programmes, or services.

VAC and VAW in the Philippines

The 2017 Philippine National Demographic and Health Survey shows that 27% of ever-married women experienced physical, sexual, and/or emotional violence by a spouse during their lifetime and 15% experienced such violence in the past 12 months. Among all women (15-49 years old), 17% had experienced physical violence since age 15 with 73% of cases against ever-married women perpetrated by a current or former husband/partner and 51% of cases among never-married women perpetrated by a parent or step-parent. Among all women (15-49 years old), 5% had experienced sexual violence and the most common perpetrators were current or former husbands, partners or boyfriends. Only 34% of women who experienced physical or sexual violence sought help through formal systems.³

A recent national VAC study estimated at 62.8% lifetime prevalence of psychological violence primarily in the home or community environments (65.2% among boys and 60.4% among girls). This study found that two thirds (66.3%) of Filipinos experienced some form of physical violence during childhood (66.6% of boys and 62.5% among girls) and this was primarily in the home or at school usually in the context of punishment and discipline. Further, 21.5% of children (24.7% of boys and 18.2% of girls) between the ages of 13 and 18 years experienced some form of sexual violence during their childhood primarily in dating or home contexts. Approximately 60% of respondents experienced bullying or other peer violence (70.5% of boys and 59.8% among girls) and 43.8% experienced some form of cyberviolence

1 WHO (2013). *Global and regional estimates of violence against women: prevalence and health effects of intimate partner violence and non-partner sexual violence*. Geneva. Available at https://apps.who.int/iris/bitstream/handle/10665/85239/9789241564625_eng.pdf;jsessionid=1943FBB5E348D6C99D7FA9F5F062A917?sequence=1.

2 Guedes, A., S. Bott, C. Garcia-Moreno and M. Colombini (2016). Bridging the gaps: a global review of intersections of violence against women and violence against children. *Global Health Action*, vol. 9, Issue 1, Special Issue: Gender and Health Inequality - intersections with other relevant axes of oppression.

3 Philippine Statistics Authority (2018). *Philippines National Demographic and Health Survey 2017*. Quezon City and Rockville, Maryland, United States. Available at www.psa.gov.ph/sites/default/files/PHILIPPINE%20NATIONAL%20DEMOGRAPHIC%20AND%20HEALTH%20SURVEY%202017_new.pdf.

during childhood (45.3% of boys and 42.2% of girls). Very few of these experiences of violence were disclosed or reported and few respondents knew where to seek help.⁴

A 2016 literature review of drivers of VAC in the Philippines found that violent discipline was the most frequent form of violence against both boys and girls in the home, driven by factors including social norms around the use of and the effectiveness of discipline, authoritarian parenting and a parent's level of education.⁵

To date, no studies or analyses have been conducted to explore the intersections of VAC and VAW in the Philippines.

Mandate of United Nations agencies

UNICEF, UNFPA and UN Women are sister agencies in the One UN system, and they are all committed to a human rights-based approach to development. From this perspective, human rights which include both women's and children's rights, are interdependent and indivisible, and serve to reinforce each other. UNICEF has an express mandate to promote the implementation of both the CRC and CEDAW; UN Women leads and coordinates the UN system's work on gender equality and carries out programming in relation to ending violence against women and girls (VAWG); and UNFPA works to prevent and respond to gender-based violence (GBV) (including VAWG) and helps to engage men and boys to advance gender equality.

METHODOLOGY

UNICEF East Asia and Pacific Regional Office (EAPRO), UNFPA Asia Pacific Regional Office (APRO), and UN Women Regional Office for Asia and the Pacific (ROAP) partnered to undertake this study to explore the ways in which VAC and VAW intersect and how policies, action plans, programmes, or services take an integrative and/or a collaborative approach to address these intersections for prevention and response. Field missions were conducted in Cambodia, Papua New Guinea, Philippines, and Viet Nam as part of this regional study. This report discusses the study and findings for the Philippines.

Key research questions

This project seeks to explore the following overarching questions through dialogues and interviews with relevant stakeholders in each country:

- What are the existing VAW and VAC policies, action plans, programmes (prevention) or services (response/support)?

- What are some examples of policies, action plans, programmes, or services where there is some evidence of VAW and VAC integration (i.e.: addressing both VAW and VAC at the same time)? Include any efforts to try to develop cohesive strategies or plans or collaboration.
- How do VAW-focused and VAC-focused stakeholders collaborate or interact? How do donors drive the VAW-VAC agenda?
- What are the areas of tension between VAC and VAW work? How do various stakeholders address areas of tension between VAW and VAC?
 - Under what circumstances are boy-children accommodated in places of safety?
 - How are adolescents' complex needs met and rights protected?
 - How are mothers viewed and "processed" in VAC cases?
- What are some opportunities within the existing policies, action plans, programmes or services where integration and/or collaboration could be introduced or enhanced?

⁴ Council for the Welfare of Children and UNICEF Philippines (2016). National Baseline Study on Violence against Children: Philippines, Executive summary, p. 4. Available at www.unicef.org/philippines/reports/national-baseline-study-violence-against-children-philippines.

⁵ University of the Philippines Manila, the University of Edinburgh, Child Protection Network Foundation and UNICEF Philippines (2016). *A Systematic Review of the Drivers of Violence Affecting Children in the Philippines*. Manila: UNICEF Philippines.

Research methodology

This exploratory study used a variety of qualitative methods including document review, group discussions and dialogues, and individual interviews with a variety of stakeholders in the Philippines. These meetings and discussions were conducted in-person around Manila by a two-consultant team consisting of both a VAC specialist and a VAW specialist. A full list of stakeholders and documents is available in Annex 1.

A flexible inquiry guide formed the basis for all discussions:

- A review of the current status quo on VAC and VAW policies, plans, programming, and/or services from the perspectives of the stakeholders in each meeting.
- Insights into typical VAC and VAW cases with exploration into the manifestations of various intersections between these types of violence.

- Discussion and debate of examples of integration between VAC and VAW within policies, plans, programming, and/or services including key strengths and gaps.
- Discussion of tensions between VAC and VAW work including specific case illustrations.
- Recommendations and ideas from stakeholders about integration.

Both consultants took notes throughout each meeting or discussion and these notes were combined and analysed thematically to prepare for presentation in a report. Feedback on the findings, recommendations, and report overall was sought from the respective UNICEF, UN Women and UNFPA country offices.

All interviews and discussions were voluntary and participants were free to decline to answer any or all questions. All participants were fully informed about the study prior to their participation and gave their consent to participate.

FINDINGS

VAC and VAW agenda and priorities in the Philippines

Data to understand the epidemic

The Philippines has national prevalence data on both VAC (baseline study conducted by Council for the Welfare of Children and UNICEF Philippines in 2016) and VAW (National Demographic and Health Survey conducted in 2017). While there are plans and resources to regularly obtain VAW data from the national surveys, there does not appear to be a similar system or commitment for VAC data making it difficult to monitor patterns and changes over time. It is also unclear how widely the VAW or VAC data are used for advocacy and policymaking in the Philippines. There is a need to ensure that ethical and reliable national prevalence data on both VAW and VAC are collected and that these data are used to inform data-driven planning, policy development, programming and monitoring.

It appears that inter-generational pathways and intersectionality between VAC and VAW are largely understood from what practitioners come across

in practice or discussions of international research rather than driven by analysis of reliable and systematic national data. Nonetheless, the insights from service providers from various sectors are extremely valuable in providing a nuanced view of VAC and VAW in the Philippines. This wealth of experience and practice-based knowledge in the Philippines should be built upon when considering any efforts to address VAC and VAW in an integrative way. It would be valuable to collect systematic data on these multiple intersections of vulnerabilities with VAC and VAW.

Several study participants raised the issue that VAW and VAC are not a simple intersection because both of these issues intersect with multiple other important issues such as: disability, religion, culture, language, geography, socioeconomic status/poverty, SOGIE (sexual orientation, gender identity and expression) and that these additional intersections present many more complexities in the needs and rights of women and children. Service providers, primarily non-governmental organizations (NGOs) or civil society organizations (CSOs), and activists calling for the

elimination of VAC and VAW were very vocal about the importance of addressing VAC and VAW in a way that meets the needs of multiple vulnerable groups.

During stakeholder meetings, there were repeated calls to ensure that both VAC and VAW administrative data needs are met so that disaggregated data can be obtained easily to fulfil the specific reporting requirements of different agencies according to their mandates.

The Anti-Violence Against Women and their Children Act (2004) includes a commitment to ensuring there is a national research program on VAW and specifies the need for departments to generate and review sex-disaggregated data; however, it is unclear how this is faring in practice. The Philippine Commission on Women has taken steps to develop an online national VAWG data management system; however, it is unclear how violence against boy children might be integrated into this system. The Philippine National Police are currently piloting unified reporting guidelines on VAW developed by the IACVAWC; however, it is unclear whether both VAW and VAC data needs are met through this system. Any integrative systems will need to take the data needs of all stakeholders into consideration. Further, revising the collection, collation and use of data should also include attention to ensuring that data are recorded on other key intersections (such as lesbian, gay, bisexual, transgender, queer and intersex people; disability; geographical location; socioeconomic status; education status, and so on). A cohesive and integrated administrative data system could improve collaboration and coordination among agencies and organizations addressing VAC and VAW as well as providing valuable insights for planning and monitoring.

Insights into VAC/VAW intersections in the Philippines In the Philippines there were some particular contexts in which VAC and VAW were seen to intersect, which were not identified in the other three study countries:

Trafficking of women and children: Trafficking is an area of intersection that is a particular concern in the Philippines. The Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, supplementing the United Nations

Convention against Transnational Organized Crime (Palermo Protocol) differentiates between trafficking in women and trafficking in children. It specifies that there must be coercion when the trafficked person is an adult, but not when the trafficked person is a child. However, the Anti-Trafficking Act (RA 9208) does not follow this distinction, and outlaws trafficking of both children and adults regardless of any apparent consent of the victim. Women and children in the Philippines are often trafficked together; and trafficked children may become adults before they manage to escape.

Sexual extortion: It was noted that in the political context in the Philippines currently, both women and girls are subjected to sexual extortion in exchange for the lives of male relatives caught up in the war on drugs. However, it was reported that the social norms condoning sexual violence against women seem to be stronger than those related to violence against girls. For example, it was also noted that although there was public outcry in response to a news article in which a police officer was quoted as saying that his rape of a 15 year old girl during a drug raid was simply the current police *modus operandi*, there would not have been such an outcry if the victim had been an adult woman. This pattern was described to be typical in the Philippines with greater public alarm and urgency for justice when the victim of a crime is a minor compared to if she is an adult woman.

Sex work: It was noted that women engaged in prostitution⁶ often have histories of VAC and VAW illustrating the cycle of violence. “They tell us their father or their employer used to do this to them so now it’s the same but at least they get some money.” Participants from women’s groups interviewed for this study felt that the exploitation involved in VAC was continued albeit in a different form later in life through exploitation in prostitution.

Cycles of violence: In the shelter, social workers reported seeing children acting out abusive behaviour that they were likely to have seen in the home, and said that often they are acting this out on other children at the shelter, presenting another layer of concern and vulnerability.

⁶ Terminology may be disputed. Some parties emphasize the exploitation involved in prostitution and prefer this term to ‘sex work’, however, transgender women may prefer the term ‘sex work’.

It is noted that the field work for this study only included five days in Manila, so the above examples of contexts of intersection between VAC and VAW are not representative of the whole of Manila, and even less of the country as a whole. The above intersections each require further study, and there are likely to be numerous other contexts in which VAC and VAW intersect in the Philippines. Each of these intersections warrant its own study to unpack the nuances involved and what these mean for programming on VAC and VAW.

Funding

All participants in this study agreed that prevention and response services related to both VAW and VAC are under-resourced and need more funding to adequately address these issues in the Philippines. VAC and VAW services are funded both through government budget as well as through donor agencies. The Magna Carta of Women (RA 9710) makes provisions for a gender and development (GAD) budget (5% of an agency's budget) and a child protection budget (1% of an agency's budget).⁷ The GAD budget is broadly applied to women and children as well as to other development areas as long as they address gender issues though the specific processes and policies were not clear among participants. In contrast, the children's budget is entirely dedicated to VAC issues. The distribution of these funds and use of the GAD budget for VAC issues but no intersectional funding possible from the children's budget appeared to be causing some tension. Some activists maintained that some activities that should be covered by local government or the child protection budget were charged to the GAD budget thus depleting the resources for VAW issues.

The National Situational Analysis of Children in the Philippines found that one of the biggest challenges for child protection is inadequate financing for essential sectors including health, social welfare, and early childhood development, all of which are

well below regional averages.⁸ In 2018 the Council for the Welfare of Children joined the Congress and local governments to commit to investing in a multi-sectoral strategy action plan to end VAC in the Philippines, including an increase in funds the national budgets of 2018 and 2019 for the Women and Children's Protection Centre of the Philippine National Police.⁹

With current government priorities focusing on the drug campaign and less on women's, children's, or other human rights there is little likelihood of additional funding or innovative developments to address VAW and VAC in the near future.

Indeed, this issue raised important concerns about the complexities of funding integrative approaches to address VAC and VAW. On the one hand, pooling VAW and VAC resources (or cost sharing) to pursue integrated programmes and services may increase the scope and scale of what can be achieved; however, if funding is integrated into a single budget it will likely decrease in the long term when inevitable budget cuts occur. Therefore, most participants were reluctant to recommend integrative approaches that would lead to integrated budgets.

As a middle income country, donor funding is limited as well as concentrated among a small group of donors thus it becomes competitive regardless of whether funds are focused on women's or children's issues. However, it was noted that while there are donors dedicated to only children's issues, there is not a similar singular focus on VAW for any donor. Not all donors are willing to fund integrative projects; for example, some donors only want to focus on girl children but not on boys. Further, while there is a push toward gender mainstreaming including in child-focused work, this does not seem to have driven multi-sectoral collaboration but rather in-house attention to this matter which may not bring in the level of expertise and commitment to truly integrate gender work.

7 Philippine Commission on Women (2012). Joint Circular 2012-01: Guidelines for the Preparation of Annual GAD Plans and Budgets and Accomplishment Reports to implement the Magna Carta of Women.

8 National Economic and Development Authority (NEDA) and UNICEF Philippines (2018). Situational Analysis of Children in the Philippines, p. 28. Available at www.unicef.org/philippines/media/556/file.

9 See www.unicef.org/philippines/press-releases/better-investment-stronger-coordination-committed-national-local-child-protection.

Government structure, policy and legislation

The Philippine Commission on Women is the primary policymaking and coordinating body on women's empowerment and gender equality.

The Department of Social Welfare and Development (DSWD) is mandated to provide social services to women in need, including through the Crisis Intervention Unit. The DSWD chairs the Inter-Agency Council on Violence against Women and their Children (IACVAWC), a body created by Republic Act No. 9262 (Anti-Violence Against Women and Their Children Act of 2004).¹⁰ This committee oversees and leads efforts focused on VAW and VAC across the Philippines. Membership of IACVAWC includes key departments (Secretaries of the Departments Social Welfare and Development and the Interior and Local Government as chair and co-chair respectively, and the heads of Department of Justice, Department of Health, Department of Education, Department of Labor and Employment, Philippine National Police, Civil Service Commission, Commission on Human Rights, Council for the Welfare of Children, National Bureau of Investigation, and National Commission on the Role of Filipino Women) and NGO representation. Each agency is tasked with formulating programs and projects to eliminate violence against women based on their mandates, as well as develop capability building programs for their employees to become more sensitive to the needs of their clients, while the IACVAWC serves as the monitoring body overseeing initiatives to end violence against women and children.

The Philippine National Police has overall responsibility for the law enforcement response to both VAW and VAC, and the Department of Health has responsibility for ensuring that victims of VAW and VAC receive health-care services and appropriate referrals.

In terms of child protection, the Philippine Plan of Action to End Violence Against Children details the roles and responsibilities for implementation by key government agencies, each of these agencies having committed to the strategy designated to their respective department as follows:

- DSWD will lead programmes for all evidence-based parenting and positive discipline programmes;
- Department of Education will integrate personal safety lessons and life-skills in curriculum in schools;
- DSWD and the Department of Justice to improve children's access to protective and helpline services;
- The Council for the Welfare of Children and the Department of the Interior and Local Government to mobilize child protection systems at all levels effectively; with local governments and civil society, advocates and the private sector.
- The Council for the Welfare of Children monitors the implementation of all VAC-related laws, along with continuous policy advocacy.

Legislation

Under the Philippine Constitution, Article II, Sec.12, "The State recognizes the sanctity of family life and shall protect and strengthen the family as a basic and autonomous social institution. It shall equally protect the life of the mother and the life of the unborn from conception"

Child protection legislation centres on the Anti Child Abuse Law (Republic Act 7610) criminalizes child prostitution and other sexual abuse, child trafficking, child pornography, and other acts of neglect, abuse, cruelty, or exploitation. The Law also imposes mandatory reporting duties on the head of any private or public hospital, as well as the attending physician or nurse to report suspected child abuse within 48 hours. There is also a mandatory duty imposed on government workers including teachers, probation officers, law enforcement, and others whose work involves dealing with children.

The Philippine Plan of Action to End Violence Against Children 2017-2022 promotes positive discipline, a non-violent approach to help guide children to develop positive behaviour while respecting their rights to healthy development, protection from violence, and to participate in learning.

In 2018 a 'positive discipline' bill was placed before parliament that discouraged the use of corporal punishment in the home. The bill did not criminalize

¹⁰ More information about IACVAWC is available at <https://pcw.gov.ph/inter-agency-council-on-violence-against-women-and-their-children/>.

parents who use corporal punishment in the home, but it mandated a social work intervention to work with the parents on alternative methods of discipline. In November 2018, opponents of the bill challenged it on the grounds that it intrudes into the function of the family.¹¹ In December, the bill passed its third reading in both houses. However, the bill was vetoed by President Duterte on 23 February 2019.¹²

The 1997 Anti-Rape Law (RA 8353) redefined rape from a crime against chastity to a crime against the person, making it a public crime. This was a big victory for women's rights. There were concerns expressed during this study that currently there is a push from some male legislators to remove the marital rape sections of the rape law, and decriminalise marital rape, which would be a major step backwards for women's rights in the Philippines.

The Anti-Violence Against Women and their Children Act of 2004 (RA 9262) recognizes the need to protect the family and its members, particularly women and children, from violence and threats to their personal safety and security. VAW is defined in RA 9262 as "any act or a series of acts committed by any person against a woman who is his wife, former wife, or against a woman with whom the person has or had a sexual or dating relationship, or with whom he has a common child, or against her child whether legitimate or illegitimate, within or without the family abode, which result in or is likely to result in physical, sexual, psychological harm or suffering, or economic abuse including threats of such acts, battery, assault, coercion, harassment, or arbitrary deprivation of liberty". Children are included in this Act, insofar as they are part of the mother-child relationship. The remedy offered for VAW is the right to file for a protection order. The definition of a perpetrator under this Act is limited to only those who have a current or former intimate relationship with the victim (e.g., current or former spouse, co-habiting partner, boyfriend, girlfriend or dating partner) and while female partners could be held liable under this law it does not account for other perpetrators of VAW (e.g., friend, acquaintance, stranger, etc.).

The Magna Carta of Women of 2009 (RA 9710) seeks to eliminate discrimination against women by recognising, protecting, fulfilling and promoting the rights of Filipino women, especially those in the marginalized sectors. The name represents an attempt to elevate women's rights to a constitutional level in the Philippines.

In December 2010, the Joint Memorandum Circular No. 2010-2¹³ and the Magna Carta of Women mandated that VAW desks were established in every barangay. The Circular mandating the VAW desks was jointly issued by the Department of the Interior and Local Government, the Department of Social Welfare and Development (DSWD), the Department of Health, the Department of Education and the Philippine Commission on Women. Violence against women as defined in the Circular includes "sexual abuse of female children in the household" and the term VAW is used interchangeably with GBV. The VAW desks are to be funded under the GAD budget. Despite a memorandum on the functions and operations of the VAW desks¹⁴ there appears to be little regular monitoring of the VAW desks.

There is currently no divorce law in the Philippines, which leaves the woman often economically dependent on the man, and can result in women and children being "trapped" in abusive relationships. It is possible to obtain an annulment of marriage which includes a kind of settlement order, but often men do not pay this and it is not enforced. Some tension was expressed during this study with religious institutions (predominantly Catholic) who worry that strengthening domestic violence and anti-rape laws will cause more divorces and thus be harmful to families – this kind of resistance is not documented but was expressed as well known among activists working in the field.

Integrated laws and policy

The Anti-Violence Against Women and their Children Act of 2004 (RA 9262) mandates the punong barangay to respond to reports of VAC and VAW, including by issuing a Barangay Protection Order. The Act also precludes the use of any form of amicable

11 See www.philstar.com/headlines/2018/11/19/1869809/positive-discipline-bill-may-face-constitutional-challenge.

12 See the response of UNICEF Philippines at www.unicef.org/philippines/press-releases/unicef-pass-positive-and-non-violent-discipline-law.

13 See https://pcw.gov.ph/assets/files/2019/04/RA-9710_JMC_2010-2_VAW-Desk-Barangay.pdf.

14 See www.dilg.gov.ph/PDF_File/issuances/memo_circulars/dilg-memocircular-2017831_2405265786.pdf.

settlement in cases including mediation, settlement, conciliation, or arbitration.

The Domestic Violence Law (9262) protects women from various forms of domestic violence and rape, and children are protected from being used as part of VAW.

At the time of the research, the age of statutory rape was 12, which protects children under the age 12 (or those with intellectual disabilities) from having to testify in court, but does not provide the same protection to children aged 12 to 18. A national campaign to raise the age of statutory rape became a joint endeavour led by a technical working group which included the Philippine Commission on Women, as well as child protection advocates.¹⁵

The VAW Circular (outlined above), contains protocols that relate to both women and children including making the woman (and children, if applicable) comfortable in a safe and private room, and when necessary ensuring the woman's safety and the safety of her children.¹⁶

The Philippine Plan for Gender-Responsive Development (1995-2025) includes a Chapter (19) on Violence Against Women (prevention of VAW, provision of services, punishment of offenders). The policy outlines a collaborative approach between government agencies with support from NGOs. However, this policy is limited of practical implementation guidelines and because it was drafted in the 1990s, it does not recognize all forms of VAWG or new technologies.

Access to justice

From a human rights-based perspective, and as the basis of a strong rule of law, the State is the primary duty bearer with the responsibility to implement the law on behalf of rights holders in the population. State actors, including police, lawyers, judges, magistrates and court officials, are all duty bearers within the criminal and civil justice systems. Police officers are duty bearers with a mandate to

implement the criminal law, in accordance with international treaties that the Philippines has ratified. Judges and magistrates also have duties under the law once criminal or civil cases are referred to them.

Reporting

The primary entry point for VAC or VAW services is through the VAW desks of the local social welfare and development office at the village level or at Women and Children Protection Desks (WCPD) at police stations. The desks situated within police stations are under the jurisdiction of the Philippine National Police and are staffed by female police officers only who usually have their own room or office space. The VAW desks at village or barangay level are under the jurisdiction of the local government unit or DSWD and are staffed by a volunteer appointed by the village chair (a political post) so they can be replaced every time there is a new chairperson, which risks losing skills and capacities to attend to VAC and VAW cases. If a case is lodged at the village or barangay VAW desk it is referred to WCPD which focuses on processing the case through the law enforcement and then hand over for review to determine the admissibility of the case for a court hearing.

According to study participants, typical barriers to women reporting both VAW and VAC to the relevant duty bearers are economic dependence on men, lack of paid work, and not wanting to abandon their children. However, several participants noted that they have come across situations where a wife is the primary breadwinner in a family and the husband is abusive and she still stays with him so it is not as simple as a pure economic barrier. Although VAC and rape are public crimes – meaning anyone who becomes aware of it can report it – in practice people consider VAW between partners and VAC within families to be 'private matters'. There is significant stigma associated with airing family problems in public and thus to avoid bringing shame to the family many VAC and VAW cases are not reported. In VAC cases, children rely on mothers to report, in a context where reporting family violence is not encouraged and women may not feel willing or able to do so there are high risks to children not accessing all protections due to them. Due to the referral chain, cases will not always be reported all the way up to

¹⁵ In October 2020, the Senate approved measures to raise the age of sexual consent to 16 years. <https://www.rappler.com/nation/senate-panel-approves-bills-raising-age-sexual-consent-16-years-old>

¹⁶ See clauses 3.1.1 and 3.2.2.

the Philippine National Police. Cases might stop after reporting at the Barangay level or local social welfare and development office might get the case but not pursue any charges. A further challenge is the heavy reliance on victim testimony within the judicial system, which puts a heavy burden on victims to testify often against their own family members. It was quite surprising to hear that the WCPD at the main police station in Makati only receives around two cases per week. Without reliable prevalence data and administrative data it is unclear what the level of under reporting is of VAW or VAC. Despite being a public crime meaning that anyone with first-hand knowledge of it can report cases, it appears very few victims or those in their families or communities who know about the violence do report. There are no data available to understand the reasons for this underreporting but it is widely believed among stakeholders that pervasive victim blaming and not wanting to bring shame on the family are the driving factors in addition to the economic factors discussed earlier.

There appears to be a contrast between few people reporting and yet shelters and services repeatedly noting how over-burdened and over-full they are. In some contexts this may be because of the small staff contingent. However, in others they have adequate staff available but there is still reporting that they are overworked. This pattern may be a sign of the great stress, pressures, and potential vicarious trauma that VAC and VAW service providers may be experiencing. This issue should be explored to ensure that all survivors can access high quality services when needed.

Corporal punishment of children is not illegal and thus many potential VAC cases are not filed because there is no legal framework to do so and this kind of violence is likely widely accepted (though there are no attitudinal data available to clarify this). It is also possible that some VAC cases may be overlooked because the violence is considered to be part of corporal punishment or again because it happens within the 'private' sphere of the family home.

Mandatory reporting

The law does not designate mothers as mandatory reporters, and failure to report abuse by a spouse

is not a criminal offence. Concerns were raised that mothers may discourage reporting in incest cases due to the shame and stigma involved for the entire family. It would be possible to file a case of neglect under such circumstances, but police officers advised that they prefer not to do this because the mother is a very important presence in the home. Filing a case of neglect would be a measure of last resort and would also necessitate the children being taken into the care of the local social welfare and development office. One participant stated: "The main issue is to ensure that she is protected from future harm and a criminal case may not do that."

It was reported that cases involving mothers as perpetrators of VAC have become more common in relation to online child sexual exploitation.

Justice and legal services

Many stakeholders in VAC and VAW noted that the justice system is very slow, which means that many survivors get fatigue and drop out of the case. Often such cases are dropped because there is a high reliance on testimonial evidence from victims. This reliance puts a lot of pressure on victims within the justice process. According to study participants, there are no child-friendly services or opportunities for meaningful involvement of children in the justice system.

Stakeholders interviewed for this study acknowledged that the justice system may be traumatic in itself and victims must be protected from secondary victimization. There are standard protocols and protective procedures for child victims¹⁷, but are not consistently followed thus protection of survivors is not ensured. Gaps in implementing protective procedures include a lack of child-friendly environments within the justice system, which can be an added deterrent to reporting. Although rights-based child protection systems should take full account of the evolving capacity of the child, and allow for their voice to be heard throughout the process, in reality it was felt that the system still retains protectionist tendencies which may discount the views children expressed. This protectionism can extend to not wanting to talk about sex at all for fear of encouraging children to have more sex, which

17 https://www.doj.gov.ph/files/transparency_seal/2016-Jan/CPN-CSPC%20Protocol%2026Nov2014.pdf

creates barriers to both reporting sexual crimes, and also to accessing sexual and reproductive health services.

The VAW desks at barangays (sometimes referred to as VAWC desks) and the WCPD at police stations handle the first response, interview, and investigation of cases, and also provide some initial social welfare support (e.g., provide food and shelter for women and their children) as well as entry into justice and law enforcement services (e.g., Barangay Protection Order valid for up to 15 days). These desks are staffed by women including barangay officials, other volunteers, or police officers who have been trained to handle VAC and VAW cases with sensitivity. Staff from VAW desks interviewed for this study reported that they would not investigate possible VAC within VAW cases nor possible VAW related to VAC cases. There are no guidelines to direct service providers to explore potential intersections between VAW and VAC so they take the standard approach of dealing only with the case that is first reported and one complainant per case. When the VAW desk takes in a domestic violence victim, they go over the incident and take an affidavit from the woman, and ask for a medical certificate documenting any physical abuse. The MSWD provides a standard intake form to the VAW desks. Sometimes, the VAW desk staff can play a role in conciliation settlements in VAC and VAW cases; however, conciliation is against the law even though it is often what parents want. These desks are funded from the GAD budget. Police officers at WCPD interviewed for this study said that they had attended a 17-day specialized training course as part of their regular police training in which professors and doctors spoke to them about VAC and VAW. However, it was reported by civil society respondents that not all VAW desk officers are well trained and this can lead to poor services.

The justice and legal services appear to have many gaps in terms of addressing VAW and VAC cases adequately including unreliable accessibility of services, stigmatisation of services, lack of protection or sensitive procedures for victims in judicial processes, failure to investigate intersections between VAW and VAC cases, and a legal framework that does not cover all forms of VAW and VAC. Further, although there are services that deal with both VAC and VAW, they do not do so in an integrative or coordinated way thus the intersections

between these two types of violence are largely left unexplored.

Judicial remedies for VAC and VAW survivors

Protection orders (both temporary and permanent) are available in both VAC and VAW cases. According to interviewees, these protection orders require the perpetrator to leave the house, but in reality it is usually the woman (victim) who has to leave. The weakness of the protection order is that they can only be enforced if police are notified that the perpetrator has violated it and several study participants suggested that offenders were generally not being held accountable.

Study participants reported that it was relatively rare for a case to go to court because women do not drive the process forward due to the numerous barriers involved to doing so. A lot of cases are dismissed because women do not have money to get through the complex system; they have to gather a lot of evidence from different places which is expensive because of the transport needed to go to the right place with the right provider and for some they have to pay for the provider too. An interviewee said that: "Women might perceive themselves as having an obligation to maintain the family and keep it intact even if they are treated as punching bags." Further, there are few support systems available to women that ensures their safety and facilitates the reporting and leaving process.

There was some lack of clarity on whether adolescents can access justice on their own – it appears they need a parent or guardian to accompany them or find an organization (an NGO/CSO) to support their case. Adolescent girls suffering domestic violence or intimate partner violence (including those who are mothers already) are even less likely to have their case taken forward because a social worker or lawyer has to pursue it on their behalf.

Law enforcement

The Philippines National Police have one unit that deals with both VAW and VAC cases (WCPD) but the police are hoping to split this unit into one specializing in VAC cases and the other in VAW cases because different interview skills are necessary for each type of case. The VAW/VAWC desks and WCPD have been described above.

Response and support services

Victims of VAC and VAW have rights to services to enable their recovery and reintegration. There are referral guidelines for child survivors of violence and a separate set of referral guidelines for VAW.¹⁸ Participants noted that it was crucial that a child victim be given services or access to relevant programmes (as per RA 9262). There were no data available on the level of implementation of the guidelines nor on any integration between VAW and VAC services or referrals.

There was a lot of discussion among study participants about services for offenders with some participants maintaining they would like to see an increase of programmes similar to rehabilitation services for drug users for perpetrators of VAC and/or VAW. However, the counter-argument by other participants was that service needs for survivors of VAC and VAW were not yet being met and so they were concerned about resources being directed away from these services and towards perpetrators instead. Participants maintained that local governments are not provided with enough of a budget to implement services to protect and support women and children experiencing violence.

Service providers

During a focus group discussion for this study with mixed service providers, it was reported that although some service providers may work in an integrative way on some cases, this is not systematic or protocol-driven but rather dependent on the service provider and what the survivor discloses during the initial interview. For example, in the case of a woman victim of intimate partners violence they are not likely to seek out the impact on the child; and similarly if it is a child being abused they are not likely to proactively investigate whether the mother is also being abused. The social work guidelines call for a more holistic family assessment but it seems that what happens in practice is very far from this and the law is not implemented fully for either women or children, let alone both of them together.

Several service providers interviewed for this study called for separation of VAW and VAC services because they feel over-burdened and that specialisation of skills would benefit survivors and case success. They feel unable to meet critical needs and safety concerns of survivors because they are over-burdened. It appears that if integration of VAC and VAW is formalized it will increase services providers' workload.

Some participants noted that accessing comprehensive services for VAC and VAW is somewhat driven by whether there are "enough social workers to implement this in the location where they are." There are not enough social work positions available in all areas of the country in order to fully implement all policies.

Health and social welfare sector

At many hospitals there are separate units for child protection and for VAW; and the child protection unit is usually much bigger and better resourced. Some hospitals – such as Ospital Makati in Manila – have a Women and Children Protection Unit (WCPU) and this unit will see both VAW and VAC cases which are usually referred from the Outpatient or Emergency Departments. Services from the WCPU are free. The staff at this unit are primarily child protection specialists because although they incorporated services for women in 2012, VAW specialists have not yet been recruited. The intake forms used for both VAW and VAC cases were designed by the child protection network, and direct that when a VAW victim comes in, part of the initial interview is to ask about her children and their welfare. Most VAW cases are seen in the Emergency Department and then a medicolegal officer from the hospital will continue with the case only referring to WCPU if a more in-depth intake interview, counseling, or safety planning is needed. A social worker and medical doctor conduct a joint intake interview with the patient.

In VAC cases children are interviewed separately from their parents but if the parent remains present they are given strict instructions not to speak. There has to be an adult attending with a minor to sign the consent form. In cases where a parent is suspected

18 https://pcw.gov.ph/assets/files/2019/05/IACVAWC_DILG-MC-2012-61-VAW-Referral-System.pdf

to be the perpetrator then a social worker from the local social welfare and development office will be called to take over the case and decide how to proceed but it was noted that these cases are very few in number. If the child's home is not deemed to be safe (including because of ongoing VAW issues), then children will not be discharged until MSWD has given the directive to do so. In cases involving teenage pregnancy, the child cannot be discharged without the consent of their parents. It was reported that in reality when something happens in the family home it is very difficult to intervene unless it is a really serious; doctors will not probe deeper, but will simply administer medical treatment, or at most give advice regarding referral contacts. "If a social worker is there she will be the one to do the case study and eventually refer [the woman] to a community-based facility which is always full. If she is lucky there may be a crisis centre that can cater to her needs. You have to be very resourceful in getting help because it will not be offered to you first time." Clinical care of GBV survivors (both adult women and young girls) was integrated into the residency curriculum of Obstetricians-Gynaecologists in partnership with the Philippine Obstetrical and Gynaecological Society. In terms of a gendered approach to VAC cases, the GBV policy was incorporated into obstetrics in 2017, and in 2019 it was incorporated by the Philippine Paediatric Society.

Currently, the WCPU do not have the facilities or necessary kits to complete forensic rape examinations so if this service is needed then the patient is transferred such as to the Philippine National Police or the WCPU. It was reported that outside of Manila, services are fewer and more difficult to access. Services were reported to be concentrated in highly urbanized areas, with the poorest communities getting the smallest share. There are 95 WCPUs nationwide, and some of them include a 'one stop shop' suite of services that allows access to a range of services and referrals required for women and children who have experienced violence within one centre or department rather than referring survivors to various places. Typical WCPUs are staffed by a medical doctor, a social worker, and a police officer.

The WCPU staff engage in additional activities including visits to schools and barangays to raise

awareness of VAW and VAC and participate in case conferences, trainings, and intern lectures. The WCPU staff shared their view that serving both women and children within the same facility had several benefits including being able to respond to the co-occurrence of VAW and VAC especially in the home setting. In addition, they hope that by empowering women through the healing process and teaching them about how to protect children, their children will benefit too. The safety planning that they conduct with women focuses on how women "can avoid violence from their husband." However, they will also counsel women on "how to escape" which will include thorough preparation such as gathering key documents, planning where to go (e.g., family member, neighbor, friends), compiling emergency phone numbers, and getting relevant bank account information. Even though the WCPU asserts that they will probe for possible VAC in VAW cases it does not seem to be formalized and there is does not seem to be consideration for VAW in presenting VAC cases.

While WPCUs will see both VAC and VAW cases there is no formal or protocol-driven integration between these services beyond the same staff members seeing both types of cases.

Shelters and safe houses

The researchers were only able to visit and learn about a shelter managed by the regional offices of DSWD so findings below are limited. There are some shelters managed by NGOs or religious institutions (and accredited by DSWD) but researchers unable to visit these.

Women survivors of violence are usually brought to a shelter by local government units, barangay, police, or other CSOs. There are very few walk-in clients. The women's shelters offer services to domestic violence or intimate partner violence survivors and trafficking survivors together. There is some tension around this because, according to service providers who were interviewed, the two groups may influence one another negatively and each group has different treatment and recovery needs. Further, women trafficking survivors are usually detained at the shelter and thus have to be monitored and kept "under lock and key" whereas this is not necessary nor recommended for domestic violence survivors.

The shelters are over full so to accommodate all the cases that are brought to them staff have turned living rooms and staff rooms into dormitory style accommodation for survivors. While this is an innovative solution to try to meet the urgent needs of survivors, some consideration should be given to whether the safety and well-being of residents is adequately assured when the facility is over capacity. Social workers at the shelters are not all permanent staff and carry caseloads of at least 35-50 cases each (instead of the standard 25 cases) indicating that the staff are overburdened.

According to interviewees, residents typically stay 6-12 months on average. The shelters provide a variety of “rehabilitation services” for residents including psychological, livelihood strengthening, social services, medical and dental, dietary services, and orientation to the laws that protect women in the hopes that the women will be able to live independently and seek help if they experience violence again. According to interviewees, shelters will not accept repeat visits; for example, if a woman goes back to her husband repeatedly after staying at the shelter then they will stop accommodating her.

Boy children

The shelter visited as part of this study was not originally designed for children and thus neither the spaces nor the programming are child-centred. Even basic needs such as diapers and formula are a struggle to procure and thus further programming for children is not currently available within the budget. Girl children can usually stay with their mothers in the shelter; however, from age 7 years boy children cannot stay at the shelter with their mothers so they are sent to another institution or to other family members. The shelters feel that older boys living in the shelter will be too traumatising or risky for women who have already suffered violence from men. In addition, an opinion was shared by a social worker that there was a concern that the boys may be vulnerable to being abused by some of the women at the shelter (specifically those who had been trafficked as sex workers) even though there has been no reported case of this nature in the past. There is a shelter for girls but this is primarily for girls who have been trafficked, orphans, or girls in conflict with the law. At the Haven for Children – where boys of VAW survivors can be accommodated – it is a mixed population including children in conflict

with the law as well as domestic violence survivors. This mixed population could also be problematic and increase the vulnerabilities of the various boys who have very different support and therapeutic needs. There is no collaboration between these shelters. There are many more girls than boys in shelters or other institutions despite the high levels of VAC reported by boys in the national prevalence survey (see Introduction section). It appears that boys may be less likely to disclose and receive services after experiencing VAC.

Children between the ages of 12 and 17 years are very challenging to handle at local government level so they are usually sent to other institutions. Adolescent girls are not easy to accommodate in regular shelters (either the women’s shelter or the girls’ shelter) so staff at the other shelters try to send them to religious safe havens or other CSO/ NGO-run shelters. Children who are institutionalized usually end up staying into adulthood because the complexities in establishing effective community reintegration or kinship care systems are challenging and have not been set up in the Philippines.

There were no examples of integrative VAC-VAW approaches within shelter facilities. Study participants stated that it would be preferable to have separate shelters for women and their children, those that are for single or child-free women, and those that are for children only. In this way, facilities and services could be best tailored to the specific population. If shelters were to be formally integrative there could be a risk of some shelters being shut down when cost-cutting is applied which would significantly risk one or more groups not having any adequate services available. Further, shelters are already over capacity so significant changes would need to be made to accommodate VAC-VAW cases.

Emergencies

Crises or emergencies appear to be good opportunities for innovation and collaboration on VAC and VAW issues.

It was noted that the WPCD have been able to integrate GBV in emergencies, through both the National Action Plan on Women, Peace and Security (NAPWPS), and through the Children’s Emergency Relief and Protection Act (RA10821).

In the aftermath of Typhoon Haiyan, the National Rural Women Coalition group started community GBV Watch Groups led by women to protect both women and children from violence. The groups provided visible patrolling around their community to monitor and report on violence and give support to law enforcement. The groups also set up a desk in the barangay hall where women could come to report violence and receive referrals to relevant services including for children, and are now continuing with the initiative post-crisis and rolling it out in other places. UN agencies also collaborated to provide projects related to VAC and VAW in the post-Typhoon Haiyan context.

The Philippine Country Task Force on Monitoring and Reporting was established in late 2007 to oversee the Monitoring and Reporting Mechanism on Grave Violations against Children. It is an independent group led by UN agencies with members from international and local human and child rights organizations, including the Commission on Human Rights of the Philippines. The Resident Coordinator of the UN and the UNICEF Representative co-chair the Task Force. Through UNICEF, the Task Force receives, verifies and submits periodic reports to the UN Special representative for Children and Armed Conflict. It also facilitates response to verified cases. The Task Force includes members of UN agencies such as UNFPA and UN Women. This coordination trickles down to the field offices, and the Task Force

has enabled collaboration on verification for rape and GBV cases in Mindanao.

The Philippines Humanitarian joint taskforce for gender in humanitarian action also addresses VAW and VAC in emergency situations. The Child Protection Working Group (CPWG), a sub-cluster within the Protection Cluster, provides coordination support to government offices from the national to municipal levels in ensuring prevention of and response to child protection concerns in humanitarian settings. It is one of the four humanitarian clusters co-chaired by UNICEF globally. Aside from institutionalizing Child Protection Humanitarian Response, the enactment of RA 10821 solidifies the mandate of the National CPWG. The efficient management or functioning of National CPWG is the joint responsibility of the cluster co-chairs (Council for the Welfare of Children and UNICEF), and all cluster members at the national level. Information management needs will be supported by the third (NGO) co-chair Save the Children. As mandated by RA 10821, the sub-national CPWGs were established on the basis of the expanded function of the Regional Sub-Committee on the Welfare of Children to include CPWG coordination.

Usually the child protection working group is activated first and then the GBV working group will join them. However, it was noted that on the ground it is mostly the same focal points at municipal, city and regional level who handle both VAC and VAW cases.



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It would be useful to analyse both the approaches as well as the outcomes of emergency integrated VAC-VAW programming in order to inform learning on collaborative or integrative programming for VAC and VAW for implementation in non-emergency contexts.

Prevention programming

Many stakeholders interviewed for this study considered secondary prevention approaches – for example early identification of and intervention with victims to prevent an escalation or recurrence of violence – as the main effort to prevent VAW and VAC. For example, women receiving services from a WCPU or similar might be encouraged to focus on protecting their children from an abusive partner or how to avoid violent outbursts from the partner. The Haven for Women described their prevention approach as focusing on rehabilitation for the family and helping the women overcome the “family shame” associated with her leaving and thus exposing problems in the family.

Educational awareness-raising was the most commonly described approach to VAC and VAW prevention work. For example, there were several examples of and calls to increase events that would educate the public about the laws and rights that should protect children and women from violence. A few suggested that it may be helpful for men to be educated about how women suffer when they are abused and the consequences perpetrators may face (i.e. jail). While these kinds of approaches are popular and it is important to educate the public on these topics, research has shown that they are largely ineffective in preventing VAWG.¹⁹ Prevention efforts must move beyond awareness raising into social norms change including through participatory and long-term engagements such as through community dialogues, whole school interventions, parenting programmes, and integrated gender transformative and economic empowerment.

Several examples of programming focused on VAW prevention through empowering women.

For example, the Haven for Women included skill-building opportunities to help women to live independently and the National Rural Women’s Coalition are trying to integrate education and skill-building into their community watch groups as well as promote economic empowerment of women and women’s participation in local leadership. They believed the approach of empowering women would lead to the protection of children; however, no data were available to understand the prevention effects. Research reviews have found that economic empowerment interventions are only effective in preventing VAWG if they integrate gender transformative programming within them.²⁰ Further, any work with women only will necessarily limit the extent of long-term, sustained prevention of VAW and VAC so more work on engaging men (not only perpetrators but men more generally) is needed.

Several participants noted that men needed to be engaged that would educate men not to be violent towards women and children and not to think that they can dominate women. Two programming examples were shared: MSWD has a Family and Men’s Welfare section and DSWD have a national programme – MOVE – which focuses on educating men. The Coalition Against Trafficking Women – Asia Pacific engage in various education pursuits and aim to engage young men so that they do not become perpetrators but rather anti-violence advocates.

A few participants discussed the need for a primary prevention approach: “we need to prevent the production of perpetrators” said one stakeholder from Ospital Makati. There were a few examples of evidence-based prevention programming. UNICEF Philippines has supported positive parenting programmes. Coalition Against Trafficking Women-Asia Pacific have initiated a project with Muslim communities including gender sensitivity training that is culturally and religiously relevant and appropriate such as including Quranic verses that promote gender equality and those that are anti-VAW. This training focused on creating awareness of justice processes available to women (e.g., protection order). The National Rural Women’s Coalition is working on a project to prevent youth

19 Fulu, E. and A. Kerr-Wilson (2015). Paper 2: *Interventions to prevent violence against women and girls*. Pretoria, South Africa: What Works to Prevent Violence. Available at www.whatworks.co.za/documents/publications/15-global-evidence-reviews-paper-2-interventions-to-prevent-violence-against-women-and-girls/file.

20 Ibid.

online sexual exploitation. UN Women is supporting a Safe Cities project focusing on reducing sexual harassment in public spaces, social norm change through forums and consultations at universities, and creative strategies with youth but this programme will be closed very soon. While the UN agencies showed some interest in additional VAC prevention approaches such as through SRHR programming, they noted that it was difficult to gain permission for and acceptance of such programming within the conservative, Catholic country. None of these programmes integrated prevention of both VAC and VAW.

Most prevention programmes do not have strong evaluations of outcomes and impact available thus making it difficult to understand the effectiveness of different approaches. Further, VAC and VAW projects tend to focus on different sets of outcomes making it difficult to gain insight into integrative, accelerative, or cross-cutting impacts on both VAC and VAW.

Overall, primary prevention of VAC and VAW in the Philippines is an area of under-investment with no examples of integrative approaches.

Adolescents

According to reports from various study participants and especially from service providers at WPCUs, hospital, and shelter, adolescents are still largely treated as children in the Philippines and thus VAC-related services and laws and approaches apply. Any consideration of their evolving agency is on a case by case basis depending on the views of the social worker or other service provider. This is a key area of tension between the VAC and VAW fields with neither field having clear, adolescent-focused approaches leaving this group either channelled through a child-focused or adult-focused service and protocol neither of which may be nuanced enough to adequately address their needs and rights. More advocacy and research on adolescents in the context of VAC and VAW policies, programming, and services is urgently needed.

Integration

There are several interagency councils addressing various issues, including VAC and VAW. In general, for VAW and VAC issues, the same people sit on the different committees and the same person will provide services to both women and children (e.g., social workers, police, health-care providers). The extent of collaboration and cohesion between the Local Council for the Protection of Children and the Gender and Development Council and Local Committee on Anti-Trafficking and Violence Against Women and Their Children depends on the individuals in these councils in different locations who are driven to work together on intersecting women's and children's issues.

In general, it appears that VAW stakeholders and VAC stakeholders collaborate best when it is on a specific issues (e.g., statutory rape; crisis situation) rather than broadly on VAW and VAC. This includes UN agencies in country who usually do not work on joint projects or initiatives.

The National Rural Women Coalition began integrating work on children's issues in 2016 and they began by understanding the laws around child protection and thinking through the role of a women's organization in responding to the needs of children. Further, this Coalition is part of an alliance with other organizations some of whom specialize on working with children so there are collaboration opportunities.

The findings from this country mission suggest that there are few formally structured, cohesive policies, programmes or services that integrate VAC and VAW. However, there are examples of partnerships such as the WCPUs within hospitals, WPCDs within police stations, and emergency response work. These services are more parallel or co-housed VAC and VAW services rather than truly integrative in that there is no single framework or theoretical framework guiding an integrative approach that takes both VAC and VAW into account simultaneously driven by their intersections and clarifying how to handle the various areas of tension without compromising the needs and rights of either women or children.

RECOMMENDATIONS

In general, the study participants suggested that integration was not an approach they felt was ideal and there were repeated calls for separated, specialized policies, services, and programmes to address VAC and VAW. However, given the lack of resources as well as the existence of several services that address both VAC and VAW, it seems that pursuing integrative VAC-VAW approaches are warranted.

Study participants noted three specific suggestions for pursuing VAC-VAW integration. The intake forms used at WCPUs or other agencies for VAC and VAW cases should be integrated and could include prompts to explore specific intersections between these two types of violence. This work has begun. The referral guidelines would also benefit from being integrated and this process should follow inclusive and participatory consultations with all frontline service providers to ensure that the guidelines are feasible and efficient within current capacities and resources. A theoretical framework of integrative VAC-VAW approaches would be useful to clarify how to drive forward such work. Participants also noted that in the current milieu policy reform is not recommended.

Given the low likelihood of establishing separate specialized units for VAC and VAW, it would be strategic to invest in strengthening WCPUs to provide cohesive, fully integrative services for both VAW and VAC cases. This development could be phased in, so as not to disrupt current services but rather to build sustainable integrative approaches over time.

In terms of new areas for integrative work, there are some strategic possibilities. Exploration of partnerships and collaboration between VAW and VAC sector stakeholders may be the most flexible starting point towards more integrative approaches.

The UN agencies could review their work plans together to identify potential synergies in their VAC and VAW work. In particular, prevention programming (not only by UN agencies but also by government,

NGOs and CSOs) would lend itself well to adapting existing efforts to take an integrative approach. The UN agencies consulted with in the Philippines felt that this was a good time for them to reflect on the convergence of VAC and VAW, and in particular to bring the value-added comparative advantage of the UN to work across all of prevention, social norms, response and support. They noted that the UN agencies are looking to contribute to one results matrix for One UN. The UN participants noted that at the national level there is stratification in government policy making bodies and each agency has to work with their respective counterparts – for UNFPA and UN Women the counterpart is the Philippine Commission on Women, and the UNICEF counterpart is the Council for the Welfare of Children. The UN can support the national agencies on integration work through identified possible collaboration points.

Doctors at Makati Hospital recommended a one stop shop where women and children could see all the service providers they need to under one roof, including medical treatment, legal services, and ongoing treatment for PTSD. It was noted that the administrative order to create a WCPU came from the Department of Health, but that it would have been good to also involve DSWD, the local social welfare and development office and law enforcement to create a holistic response.

Understanding the intersections between VAC and VAW is a relatively new area of research and development and addressing these intersections through integrative approaches is in its infancy. Therefore, more research is needed to understand, for example, women, adolescents' and children's lived experiences of VAW and VAC in different contexts and what their views are on integrative approaches to services and justice. Research is needed in order to develop a nuanced and evidence-based theoretical model for VAC-VAW integration in programming and services. Further, integrative monitoring and evaluation strategies will be needed to understand the outcomes, impact, and gaps of various integrative approaches as they develop.

ANNEX 1 : STAKEHOLDER MEETINGS

1. Group meeting with staff representatives from UNICEF, UN Women, UNFPA
2. Group meetings with stakeholders
 - a. Philippine National Police
 - b. Department of the Interior and Local Government
 - c. Department of Health
 - d. Department of Labour and Employment
 - e. Department of Social Welfare and Development (DSWD)
 - f. Civil Service Commission
 - g. Department of Education
 - h. Department of Justice
 - i. Commission on Human Rights
 - j. Philippine Commission on Women
 - k. National Rural Women Coalition (Pambansang Koalisyon ng Kababaihan sa Kanayunan)
 - l. Coalition Against Trafficking in Women - Asia Pacific (CATW-AP)
 - m. Philippine Federation of the Deaf
 - n. Women's Legal and Human Rights Bureau
 - o. GALANG Philippines
 - p. Humanitarian Legal Assistance Foundation, Inc.
 - q. Child Rights Network Convenor
 - r. Philippines Legislators' Committee on Population and Development
 - s. Child Protection Network Foundation
 - t. Consuelo Foundation
 - u. Action Against Violence and Exploitation
 - v. Save the Children Philippines
 - w. PLAN International
 - x. Ateneo Human Rights Center
 - y. Ateneo de Manila University
 - z. John carroll Institute for Church Social Issues
3. Visit to Haven for Women and interview with two social workers
4. Visit to Ospital ng Makati
5. Visit to Philippine National Police Makati Station



