



Background to Aberdeen Women's Centre

The Aberdeen Women's Centre (AWC) is a hospital providing a broad variety of free services to the women and children of Sierra Leone. This includes fistula care, maternity care, child healthcare and family planning services, as well as support for child rape victims. AWC's mission is "to provide high quality, holistic care and treatment free of charge to our patients and clients".

The AWC, set up in 2008, is primarily funded by the Scottish charity Freedom for Fistula (FFF)¹, which is supported by The Gloag Foundation. Dame Ann Gloag, Grand Commander of the Order of the Rokel, is the founder of FFF and is the driving force behind the work of AWC. AWC offers all its services for free and is committed to helping the poorest of the poor who struggle to receive treatment at other health facilities.

Since 2008, AWC has been expanded greatly and now offers six key services: fistula repair, maternity (including antenatal care, delivery services and postnatal care), family planning, outpatient children's clinic, teenage mother empowerment and sexual and gender-based violence (SGBV) multi-sectoral care.

For more information, please contact Miss Alexandra Rigby, Programmes Manager on alexandra.rigby@aberdeenwomenscentre.org.

Response to OHCHR Call for Submissions: COVID-19 and the increase of domestic violence against women

1. To what extent has there been an increase of violence against women, especially domestic violence in the context of the COVID-19 pandemic lockdowns? Please provide all available data on the increase of violence against women, including domestic violence and femicides, registered during the COVID-19 crisis.

Whilst no data is available on the increase of violence against women during the COVID-19 lockdown in Sierra Leone as of yet, past data shows there will likely be a rise of 19%. According to a [UK Aid report](#) rates of sexual and gender based violence (SGBV) increased by 19% during Ebola in Sierra Leone, implying similar increases during COVID-19. A [WHO article](#) also points out a similar increase is expected. In Sierra Leone during Ebola, there was also a 65% increase in teenage pregnancy according to [UNDP](#) as schools were closed.

2. Are helplines run by Government and/or civil society available? Has there been an increase in the number of calls in the context of the COVID-19 pandemic?

The Ministry of Gender & Children's Affairs launched a free hotline on 14th April 2020 for survivors of rape to access. According to the Ministry, they received 3,000 calls during its first week of operation but a large proportion of these were fake calls. As it is a new hotline, it is hard to see if there has been an increase in calls, but this is something that can be analysed in the coming months.

¹ <https://www.freedomfromfistula.org.uk/>

3. Can women victims of domestic violence be exempted from restrictive measures to stay at home in isolation if they face domestic violence?

The Government of Sierra Leone has made no mention of victims of SGBV and/or domestic violence being exempted from restrictive measures.

4. Are shelters open and available? Are there any alternatives to shelters available if they are closed or without sufficient capacity?

There are no Government shelters however, the shelters that Aberdeen Women's Centre are partnered with are open and have sufficient capacity to take new cases if necessary.

5. Are protection orders available and accessible in the context of the COVID-19 pandemic?

Not to our knowledge.

6. What are the impacts on women's access to justice? Are courts open and providing protection and decisions in cases of domestic violence?

As of 27th April 2020, the Magistrates Court and High Court in Sierra Leone are closed until at least 1st June 2020.

7. What are the impacts of the current restrictive measures and lockdowns on women's access to health services? Please specify whether services are closed or suspended, particularly those focusing on reproductive health.

Women's access to essential health services, including reproductive health, is allowed during lockdowns, including the services of the Aberdeen Women's Centre (AWC). AWC Maternity department, Family Planning department and Outpatient Children's Clinic are currently operational during lockdowns. However, country-wide we are seeing a decrease in women accessing services.

8. Please provide examples of obstacles encountered to prevent and combat domestic violence during the COVID-19 lockdowns.

At the moment, the Aberdeen Women's Centre (AWC) is unable to expand its SGBV response services due to no additional funding being given and space within the hospital being used for the COVID-19 response. There are travel restrictions between districts of Sierra Leone and so many victims of SGBV would be unable to travel to get the healthcare needed. There seems to be a lack of funding around SGBV response services and instead a greater focus on advocacy and prevention.

9. Please provide examples of good practices to prevent and combat violence against women and domestic violence and to combat other gendered impacts of the COVID-19 pandemic by Governments.

The Ministry of Gender & Children's Affairs free hotline is a good example of combating the gendered impacts of COVID-19. The Minister of Basic and Senior Education has publicly called for communities and families to keep a closer eye on vulnerable girls during the period of school closure, to try and ensure rates of teenage pregnancy do not suddenly increase. These are both laudable efforts by the Government of Sierra Leone to keep women and girls in mind when responding to COVID-19.

10. Please provide examples of good practices to prevent and combat violence against women and domestic violence and to combat other gendered impacts of the COVID-19 pandemic by NGOs and NHRIs or equality bodies.

The Aberdeen Women's Centre (AWC) uses a survivor-centred and trauma-informed approach when dealing with SGBV patients, ensuring high quality and sensitive trauma informed service understands the effects of trauma and the need to support victims beyond the immediate aftermath of sexual violence. Trauma informed services are of particular importance when working with adolescents and children².

It is highly likely that the victims AWC work with may have experienced trauma multiple times in their lives. These past traumatic experiences can shape their current perceptions and behaviours. AWC staff strive to understand how seemingly harmless events can 'trigger' an overwhelming or frightening emotion in a victim.

AWC's trauma informed approach ensures:

- A safe, warm, and welcoming physical environment is created where victims feel safe;
- Victims are kept well informed on all aspects of their care;
- Victims are supported to make their own decisions and choices;
- Staff establish respectful, safe and positive relationships with victims;
- Staff will be patient and supportive with all victims and recognise difficult behaviour as a coping strategy, linking to AWC's current principles around treating all patients equally;
- Staff will be provided with self-care opportunities and support to deal with the emotional stress they may experience at work.

AWC also makes sure that the services they offer are non-discriminatory, with a particular focus on making sure it is accessible for those with both mental and physical disabilities.

11. Please send any additional information on the impacts of the COVID-19 crisis on domestic violence against women not covered by the questions above.

² Page 3, Creating Trauma-Informed Services A Guide for Sexual Assault Programs and Their System Partners, WCSAP, <https://www.nsvrc.org/sites/default/files/publications/2018-04/Trauma-Informed-Advocacy.pdf>