

One of the pillars of epidemic/emergency preparedness and response projects is the Gender pillar, and the major activity here is gender-based violence, GBV. GBV has significant and long-lasting impacts on physical and mental health including injury, unintended pregnancy and pregnancy complications, sexually transmitted infections, HIV, depression, posttraumatic stress disorder, and even death.

Providing quality health care services for GBV survivors is critical in any crisis, whether it be natural disasters, conflicts, disease outbreaks or others. The role of health care providers to address GBV is crucial to ensure life-saving care for women, girls and other at-risk groups. They are often among the first—and only—points of contact for GBV survivors.

Health care providers not only offer immediate medical attention and first-line support but can link survivors to other needed assistance including mental health and psychosocial support, social services, legal aid, shelter/housing services, or livelihood support.

The role of healthcare providers to address GBV is crucial to ensure life-saving care for women, girls and other at-risk groups. They are often among the first—and only—points of contact for GBV survivors. How do we address gender-based violence using a health systems approach? Gender-based violence response requires a multi-sectoral response and health systems have an important role to play in it. To ensure or strengthen a health systems response to GBV requires:

Understanding the impact of GBV on the health and wellbeing of women and their children. Improving health workers' and managers' understanding of what is required for a survivorcentered, effective response.

Integrating care for gender-based violence survivors within health services rather than setting up parallel services.

Supporting long-term efforts to sensitize, train and support health professionals at all levels to provide a safe and effective response for gender-based violence survivors.

Readiness to address this and support providers through for example, ensuring



infrastructure for privacy and confidentiality, having written protocol/standard operating procedures, a referral network in place.

Ensuring adequate documentation, monitoring and evaluation of services for continuous learning and improvement of services.

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