

**Malawi Violence Against Women and Girls
Prevention and Response Programme**

Standard Operating Procedures for Survivors
Support Fund

April 2020

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1. Introduction

The standard operating procedures (SOPs) have been developed for the Survivor Support Fund (SSF) that will be provided to survivors of VAWG in the Tithetse Nkhanza programme impact areas. The SOPs outline the roles and responsibilities of the partners involved in implementing the SSF besides establishing a coordinated mechanism for survivor identification, implementation, monitoring and reporting on the SSF. The main objective of the SOPs is to guide the implementing partners on who is eligible for the SSF as well as ensure a survivor centered approach is implemented when providing the SSF. This survivor centered approach will among others revolve around respecting the guiding principles of case management.

The survivor support funds (SSF) increases access to response services for VAWG survivors in Tithetse Nkhanza's twelve target areas, by addressing physical and cost barriers to justice, health and psychosocial support. The SSF will provide small enabling funds to survivors to access the support. This will be primarily from the justice and health services, but also from additional relevant response services as needed, such as shelter accommodation and psychosocial support. It is hoped that removing the financial barrier will increase engagement with, and trust in, service providers. The SSF will complement Tithetse Nkhanza's other interventions, ensuring survivors, in spite of income levels, are able to access services that are made more responsive and survivor-centered through the programme's work.

The purpose of the SSF is to provide a vehicle that enables actors to adequately respond to increases in VAWG reporting in our target areas. The SSF will ensure women and girls are able to access justice and health systems and other available services. As an innovative model not widely used in Malawi or globally, the fund will be an opportunity for testing and learning how to best support women and girls.

The programme will share lessons from the SSF on what is needed for women and girl survivors of violence to access the justice and health systems and other available support services in Malawi. The SSF will work in all target areas of the programme and will provide small cash grants on a case by case basis to survivors of VAWG. However, exercising the principle of do-no-harm, cases that are not within our target areas will not be turned down. The fund will be implemented by district level organisations (SSF principal organisations) in close coordination with the Tithetse Nkhanza programme team.

2. Eligibility of survivors for SSF

- The survivor must have suffered VAWG in the last twelve months.
- The survivor is unable to access financial support elsewhere or is not in control of finances to seek support.
- These points may have exceptions based on case circumstances particularly with regards to survivors in need of counselling and long-term psychosocial support as psychological effects of VAWG may be experienced for a long-term period if not addressed in a timely manner.
- The survivor may be from the target areas of the programme or not. If the survivor does not reside in one of the programme target areas, they are still eligible in line with the do no harm principle.

Note: Marginalised/excluded groups could be given priority or could be admitted, even if they don't satisfy the above criterion, given their exacerbated vulnerability to violence. This could include children, persons with disabilities, LGBTQI+ community, etc.

Note: The first assessor will refer to Annex 1 for guidance. Annex 1 is the assessment form that will be used to determine if the survivor needs SSF funds or a referral for further support. The form will also be used to determine if the survivor needs an accompanier in cases where they are alone.

2.1. Eligibility of costs

The costs must be specified and be in relation to one of the following:

- **Transport costs** to attend court or other justice services as well as other related services, e.g. counselling,
- Costs to enable a survivor to receive **medical treatment** or tests related to VAWG or psychosocial support, including transport costs to access such services.
- Costs related to **temporary accommodation**, including safe shelter and accommodation needed to attend court.
- Costs related to **childcare and support to children** (Food, safe and secure temporary shelter, clothes based on the rapid needs assessment,)
- Adult accompaniment by family for vulnerable adults or girl survivors of violence, or other costs specific to girl's/children's needs.
- Incidental costs needed to support a survivor through the justice process, including comfort packs and food. There may be additional costs if the survivor has a disability depending on the type of disability.
- Tithetse Nkhanza will also support **accompaniment services** for survivors in target areas. These will be strengthened through training and capacity building. The SSF will be closely linked to these, to enable survivors to access accompaniment services if they present to the SSF, and vice-versa.
- Costs relating to **administrative processes** for cases, e.g. court filing fees for protection orders or other.

Note: If a cost is required that is not on the list, contact Tithetse Nkhanza VAWG Lead.

3. Roles of different actors

There are different roles that various actors will play in the administration of the SSF and the case management plan. It is important to keep in mind that where roles overlap, different actors will prioritise coordination ensuring that a survivor- centered approach is used.

3.1. Roles of accompaniers

Tithetse Nkhanza programme trained 48 survival accompaniers, 16 from each of the three target districts. Accompaniers were selected in consultation with District Social Welfare Offices (DSWOs), Community Victim Support Units (CVSU) Committees and, in Karonga and Lilongwe; Women's Forums.

Trained accompaniers on safeguarding recruited through a safeguarding vetting procedure will have the following roles:

- To accompany a survivor and provide survivor-centered support whichever route a survivor takes.
- To make monthly follow ups on cases depending on survivor's needs. Other cases may require shorter intervals for follow ups.
- To follow up on actions of service providers depending on survivor's needs.
- To provide referrals through SSF partners based on survivor's needs.
- To work hand in hand with CVSUs and SSF partners to recommend and refer SSF recipient to partner organisations.
- To document cases that are supported by SSF for programme learning and adaptation.

3.2. Role of the SSF implementing partners¹

- To assess survivors and determine if they qualify for the SSF.
- To provide timely feedback (within 24 hours) to survivors who do not qualify for the SSF.
- To document survivors case information in a safe and confidential manner.
- To recommend/refer clients for further support based on the assessment carried out.
- To get feedback from service providers on the survivors' progress over time in collaboration with Tithetse Nkhanza Programme team. Depending on the nature of the case, some information may be withheld by WROs to maintain confidentiality.

3.3. Role of the Tithetse Nkhanza Project Team²

- To monitor the identification process for survivors.
- To monitor implementation of the SSF and document best practices/ lessons learnt.
- To coordinate SSF partners work across the districts.
- To provide the partners with technical case management support where needed.
- To participate in monthly follow up meetings on cases in collaboration with partners. Depending on sensitivity of cases, a determination must be made case by case on what information can be shared. The specific process is outlined in monitoring MERL strategy

4. Assessment procedure

4.1. Receiving a prospective SSF recipient

- All prospective SSF recipients have may have experienced serious trauma. They should be treated with a survivor-centered approach and must not be kept waiting when they make contact. They are to be treated with the most urgency, empathy and be prioritised against other work. A survivor-centered approach ensures that the survivor:
 - Does not come to further harm as a result of reporting their case.
 - Receives the best care possible and referral to relevant services.
 - Is empowered to make decisions and get back a sense of control.
 - Have their confidentiality protected.

¹ Partners: Karonga- CCJP and Karonga Women's Forum
Lilongwe: MHRRC and Lilongwe Urban Women's Forum
Mangochi: RAC, Pantondo, Tikondande and Magomelo WROs

² Tithetse Nkhanza programme team: District Coordinator, VAWG Prevention Lead, Community Engagement Lead, Grants Manager

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- Ensure that the survivor (un/accompanied) is well received and welcomed. Make sure that a quick assessment of immediate needs and risks is done and met to the extent possible. For example; do they look scared or hungry? Do they have torn clothes or are they bleeding? Your response could be as simple as offering a glass of water.
- Explain to the survivor the interview procedure, stressing that it is a safe space, and everything discussed is confidential (confidential means what is being discussed will be only shared with 2 other persons working in the same organisation to determine the eligibility of the case. Information about the survivor will be shared with others (service providers and statutory authorities) only with their consent on a need to know basis).
- Respond calmly and listen carefully to what they say, reassure them that they are right to seek support.
- If you need to find out more information about what happened to make your report, ask basic questions such as what? Where? When? Who? Don't ask them why or how something happened.
- The name of the survivor will be written in a separate file and will not appear anywhere on the assessment form. A number will be given for the assessment form. Information about the survivor will be filled on the assessment form and against the criteria.
- After the first assessment, the assessor's recommendation will be verified by a second reviewer for approval. If the two assessors do not agree on the recommend next steps, a senior member of the SSF District partner and or Tithetse Nkhanza programme team will be brought in to review the case. Depending on the kind of support required, there may be need for approval by district SSF partner (see section 4.2). Feedback to cases that qualify should be given within 24 hours (maximum).

4.2. Levels of assessment

- A case may be brought in by an accompanier or referral from other actors. In other instances, a survivor may come directly. In all circumstances, the first assessment must be made by the SSF partner (Women's Rights Organisation) member.
- The first assessor must make a recommendation on the case and hand over the case file to a second assessor who is also an SSF partner members (WROs) for their approval or non-approval as they see fit. See the table below for eligible second assessors for first assessors. This must take place ideally within 2 hours but up to 8 hours of the first interaction with the survivor. Other circumstances may demand that action be taken immediately.

First assessors	Eligible second assessors
Any WRO member who has been trained in delivering these SOPs and carrying out SSF assessments	Any other WRO member who has been trained in delivering these SOPs and carrying out SSF assessments. This may be a WRO member within the same WRO
	Any leader within the WRO who has also been trained in delivering these SOPs and carrying out SSF assessments. This may be a leader from the same WRO
	Any staff member from the supporting CSO who has been trained in delivering these SOPs and carrying out SSF assessments
Any leader within the WRO who has also been trained in delivering these SOPs and carrying out SSF assessments.	Any staff member from the supporting CSO who has been trained in delivering these SOPs and carrying out SSF assessments

- When a case qualifies for SSF, a quick assessment must be made on how much funds are needed to support the survivor. Depending on the threshold of amount of funds to be approved, the second assessor will either instruct/release fund or make a phone call to the district partner to get approval first (Refer to Financial guidelines for administering SSF document).

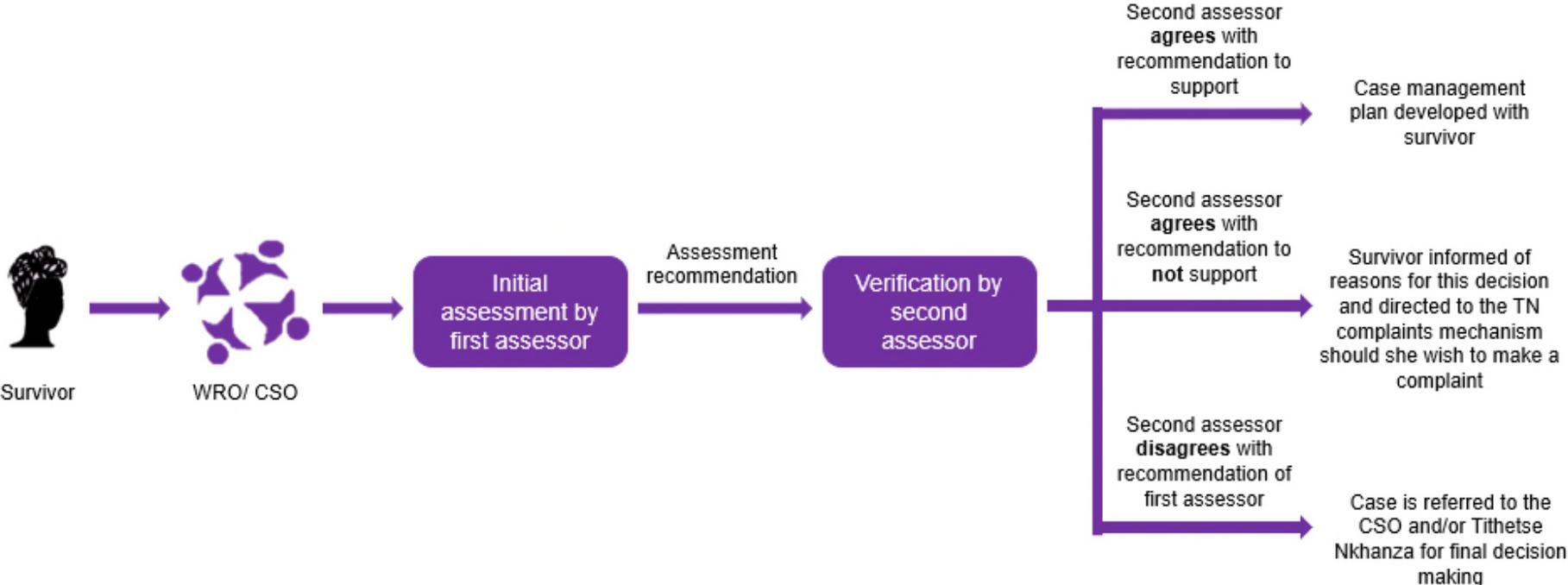
SOP FOR SSF

- If risk assessment determines survivors is in immediate risk, these risks may be attended to before the second assessor approves of the recommendation. The assessment process still needs to be followed but the first assessor is given authority to act on immediate risks whilst the assessment process is ongoing.

4.3. Informing prospective SSF recipient of their ineligibility

- Survivors must be informed straight away (maximum amount of time is 24hours from first interaction) if, based on what is discussed, they do not qualify and must not be kept waiting as this may lead to additional stress.
- If it is determined that a survivor is not eligible for SSF support, a clear and detailed explanation of this decision must be provided verbally and in writing, and the survivor should be offered the opportunity to appeal this decision to the district level partner and Tithetse Nkhanza.
- A referral must be made based on the needs of the survivor from the assessment **(the assessors must always have a list of the services available in the area)**. Depending on the case, the client may be given an accompanier trained by Tithetse Nkhanza to provide support on the route that they take in seeking services.

4.4. Assessment Process Flow Chart



5. Case management

Case management is the process of assisting a survivor through direct support and referral to other needed services and includes all the activities that various actors (collaborative and multidisciplinary approach) carry out in working with survivors and their families where need be in addressing their needs. Support will be provided to survivors as is appropriate at any stage of case management related to violence against women and girls.

Components of case management include identification, assessment, planning, implementation, follow up and review and closure of the case as illustrated below

5.1. Case Management plan

A case management plan will be developed with the survivor based on their needs. This process should be survivor-centered ensuring that the survivor participates and is aware of what is happening at each stage. This process will be a continuation from section 4 when a file has been opened and all relevant information collected and recorded according to the guideline in section 4.1.

- **Needs Assessment** | Following the initial assessment done by SSF WROs on the basic needs of the survivor such as medical needs, food and any other basic needs, a second comprehensive assessment may be needed and done by professionals. This may be health officials or other support services. The SSF WROs member who has been trained in accompaniment will provide support during these assessments. There are 16 trained accompaniers (See annex xxx) in each district who must be used to support this process depending on the survivor's acceptance. This one is expected to be done when the case is referred to formal service providers.
- **Planning** | The SSF WROs will allocate one officer who will support the survivor by developing a plan with their consent and participation which will entail what immediate actions are needed to support the survivor, identifying who will be responsible for any proposed actions and when the actions will be carried out. This plan usually indicates three areas viz: what action/s will be taken; by whom and when with a view of making sure that appropriate support is provided. Depending on case circumstances, families may not be involved in this process.
- **Implementation of the case plan** | direct support can be provided to the survivor or being referred to appropriate service providers.
- **Follow up and review** | The case plan should be monitored to make sure that it is being done on time and meeting its intended outcomes and if necessary, to make some changes to the plan. This will be the responsibility of the SSF WRO officer in charge of the plan with oversight from district partner. If there are in delays and stagnation of the plan, it must be reported to district partner by SSF WRO for escalation of action if need be.
- **Closure:** A case will be closed when all the intended outcomes of the case plan have been achieved. However, a case can be re-opened in future if the survivor requires further support.

Important notes for reference on case management

Guiding principles of case management:

Case management in relation to VAWG is guided around several principles listed below;

1. **Survivor centered:** All actors that are engaged in responding to violence against women and girls prioritise the survivor's agency and ensure that their needs and views are respected.
2. **Non-discrimination:** Every survivor should be treated fairly and equally regardless of any status such as religion, health status, ethnic background or any other abilities and identities.

3. **Confidentiality:** Actors must respect confidentiality of the cases they receive and do not share information about the survivor. Procedure and safeguarding checks must be followed when there is a need to share information.
4. **Partnership and Collaboration:** All actors involved in the case management should work in synergy to complete cases. Using the survivor- centered approach, actors must ensure that they do not re-traumatise survivors and do any further harm.
5. **In the best interests of the Child:** All actors will evaluate and balance all the elements necessary to make a decision in a specific situation for a specific individual child or group of children.
6. **Quality assurance:** All actors shall ensure that survivors receive the highest quality of support that is within their abilities using a survivor-centered approach.

5.2. Access to the SSF by men and boys as survivors of violence.

The primary purpose of the SSF is to provide a vehicle that enables actors to adequately respond to increases in VAWG reporting in our target areas. The primary purpose of the SSF is to support survivors who are women and girls access justice and health systems and other available services. The TN programme recognizes that boys and men may also experience violence and require support from the SSF. Boys under 18 will be treated as children as stipulated in this document. If a boy's mother or female carer receives support from the SSF then she will also be able to access necessary support for him and any other children as relevant and outline in these SOPs.

It is important to note that violence against men and boys has different root causes from violence against women and girls. Although violence against men can have gendered dimensions, it does not stem from structural gender-based inequality, which is the root cause of gender-based violence (GBV). The TN programme recognises that all violence is a violation of fundamental human rights. However, addressing VAWG and violence against men and boys require different approaches and TN's focus is on intimate partner violence (IPV), domestic violence and harmful traditional practices.

It is unlikely that many men will seek support from the SSF, as IPV and domestic violence is much less frequently perpetrated against men and where it does take place, is unlikely to be reported as men may be ashamed to admit experiencing violence at the hands of their female partners. However, in line with the principle of 'do no-harm', if a man does seek support from the SSF, he will not be turned away. TN programme partners will conduct an assessment as outlined in this document when a case where the survivor is a man.

Guidance on conducting assessment (Before assessment begins);

- Since all partners handling the SSF assessments are women rights organisations, the assessor must ensure that they feel safe assessing the male survivor alone. In cases where they do not feel comfortable, they must ask assistance from other staff members.
- The assessor must ask the male survivor if they feel comfortable with sharing their case with a woman or if they would be more open talking to a fellow man. In this case, a male accompanier/ CBO member or police officer can conduct the assessment.

Assessment

- If there are known services available that support male survivors of violence within close proximity, the assessor should decide whether the male applicant can be referred there before going through the assessment process.
- The assessor will use the immediate needs and risk assessment form.
- Depending on information captured and fulfillment of immediate needs, further information will be captured in the SSF assessment form.
- First assessor will make a recommendation to second assessor. If there is need for verification of case, it will be done at this stage.

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- The survivor will be informed on whether they will be directed supported by the SSF or a referral will be made. Services of an accompanier will be available should the survivor need them.

Monitoring

- Partner organisations are requested to record the number of men and boys requesting support from the fund so that the TN programme team can monitor whether additional guidance or communication is needed, acknowledging that the primary focus of the fund is to support female survivors.

5.3. Signature Page for Participating Agencies and Actors

We, the undersigned, as representatives of our respective organisations, agree to:

1. Abide by the procedures and guidelines contained in this document;
2. Fulfil our roles and responsibilities to implement the SSF
3. Provide copies of this document to all the new staff who have responsibilities regarding the SSF and to ensure that the procedures are followed through by the staff when implementing the SSF

Organization

Date

Signature

Annex 1: Immediate needs and risks assessment form

The following should be covered through dialogue with the survivor (and their children) to facilitate identification of risk factors and immediate needs. Some issues will be of greater immediate priority than others (for example, safety of survivors and her children, contact with perpetrator). Other issues may also be covered at the outset and some may be left for further support in the case management process.

Important! This assessment form will be the first form used by the first assessor who should be an SSF WROs member who has been trained to use it.

1. Personal details

Personal details	
Name	
Contact details (if applicable)	
Children's details (if applicable)	
Date of assessment	
What kind of support is needed	

2. Physical health

	Response	Risk category
Is survivor in need of immediate medical support?		If yes, this is classified as IMMEDIATE RISK
Are there any injuries resulting from abuse?		If yes, this is classified as IMMEDIATE RISK
Are there any needs arising from impairment or disability?		If yes, this is classified as IMMEDIATE RISK
When was their last meal? When was the children's last meal? (if applicable)		If yes, this is classified as IMMEDIATE RISK
Do you have any on-going health conditions that need attention?		If yes, this is classified as IMMEDIATE RISK

3. Safety

	Response	Risk category
Name of perpetrator		
Age		
Sex		
Occupation		
Where do you live and what is the living arrangement?		
Is there any actual or potential interaction with abuser?		If yes, this is classified as IMMEDIATE RISK
Do you feel safe outside your home?		If No, this is classified as IMMEDIATE RISK
Are your children safe to go to school and other social activities?		If No, this is classified as IMMEDIATE RISK

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Are you safe at work or business? (if applicable)		If No, this is classified as IMMEDIATE RISK
Do you have friends/ family that you can confide in?		
Do you feel alone or do you have regular contact with others?		

4. More questions to establish children's needs if they are the survivor

Who is the guardian?	
Who do they live with?	
What is their relationship with the abuser?	
What are their physical health and mental wellbeing?	
Does the mother need support?	
What are other needs relating to children that apply? e.g education, behavior issues	

Annex 2: Screening tool for enrolling survivors into the SSF per the support in question

General checklist for prospective SSF clients

Note: This checklist is intended to familiarise the assessor with the survivor. As well as the checklist the assessor should use their own observations and any further information provided by service providers or anyone accompanying the survivor. It must not be solely used to exclude others from accessing the SSF.

IMPORTANT NOTE: This document is confidential and must be filed separately and kept in a locked drawer. This document must not be included in the case management file. Only the case number must be used.

Case filing system codes:

- Z-LLW-2020-001
- A-MCH-2020-001
- B-KA-2020-001

1. Personal details of the survivor

Case number (use this number and not the name of survivor for case file)	
Name	
Age	
Sex	
ID number is known	
Occupation	
Who referred survivor	
Abuse category	

2. Vulnerability of the client

The Household conditions of the survivor	YES (EYA)	NO (AYI)
Do you have control over money that you can use to access the services you need? (Kodi mulindikuthekera kopeza/kukhala ndi ndalama yozithandizira ?)	YES (EYA)	NO (AYI)
Keeps a Are you responsible for any Chronically ill patient (Banja likusamalira wodwaladwala)	YES (EYA)	NO (AYI)
Is the Household child headed with >2 orphans? (Banja la ana amasiye okhaokha oposera awiri)	YES (EYA)	NO (AYI)
Is the household headed by an elderly person with >2 orphans? (Mkulu wa pabanja ndi wokalamba ndiponso akusunga ana amasiye oposera awiri)	YES (EYA)	NO (AYI)

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Is the household female headed with >2 orphans (Mkulu wa pabanja ndi mayi ndipo akusunga ana amasiye oposera awiri)	YES (EYA)	NO (AYI)
Keeps > 2 orphans (Banja likusamalira ana amasiye oposera awiri)	YES (EYA)	NO (AYI)
Is the survivor below the age of 18	YES (EYA)	NO (AYI)
Is the survivor living with disability	YES (EYA)	NO (AYI)
A household with any 1 of these criteria must be Supported		
(Banja lomwe lili ndi chimodzi mwa ichi Liyenera Kuthandizidwa)		

Psychosocial support

Has the Survivor experienced VAWG within 12 months	YES (EYA)	NO (AYI)
Has the survivor experienced VAWG in over 12 months ago but is still having psychological problems developed from the incident	YES (EYA)	NO (AYI)
Has the survivor participated in VAWG project research whose memories of the incident has been revived?	YES (EYA)	NO (AYI)

Annex 3: Accompaniers reporting form

Fomu Ya Ochitiridwa nkhanza (To be completed on each accompaniment/support service)

1.0 Thandizo

1.1 Tsiku la thandizo: _____ Dzina la operekeza: _____

1.2 Boma: _____ Dzina la CVSU : _____

1.3 Nthawi yoyambira: _____ Nthawi yomaliza: _____

Mfumu ya mpando: _____

1.4 Ubale kwa ochitiridwa nkhanza

M'bale wa ochitiridwa nkhanza: _____ Eya: _____

2.0. Zokhudza odandaula

2.1 Chizindikiro cha odandaula _____ Wamwamuna/ Wamkazi _____ Tsiku lobadwa: _____

2.2 Okwatira/ Osakwatira : _____ Nambala ya ana _____ Chipembedzo: _____

2.4 Ntchito yomwe Ochitiridwa nkhanza amagwira: _____ Maphunziro _____

Mtundu: _____

2.5 Ubale wawo ndi wowachitira nkhanza _____

3.0. Zokhudza ochita nkhanza

3.1 Wamwanuma/ Wamkazi: _____ Zaka _____ Mtundu: _____ Chipembedzo: _____

3.2 Ntchito ya ochita nkhanza: _____

4.0. Malo ndi mtundu wa nkhanza

4.1 Mtundu wa nkhanza: (a) Kumenyedwa (b) Nkhanza zogonana (c) Nkhanza za chuma (d) Nkhanza za maganizidwe (e) Zina (Nenani) _____

4.2. Kodi nkhanzayi inachitikira kuti? (a) Kunyumba (b) kusukulu (c) Ku malo okumanirana Anthu ambiri (d) Malo a ntchito (e) Zina (Nenani)

5.0 Thandizo loperekedwa kwa Ochitiridwa nkhanza

Thandizo	Laperekedwa (Chongani ngati laperekedwa)	Ndemanga/Mavuto okumana nawo
1. Ulangizi		
2. Kuthandiza zokambirana		
3. Kuperekeza		
4. Malo ogona		

6.0 . Thandizo lomwe Ochitiridwa nkhanza akuyenera kukalandira

Thandizo	Laperekedwa (Chongani ngati laperekedwa)	Ndemanga/Mavuto okumana nawo
1. Ulangizi		
2. HIV PEP		
3. STI PEP		
4. Malo ogona		
5. Thandizo la za chuma		
6. Nthandizo la za malamulo		
7. Thandizo la za umoyo		

7.0 Mlandu

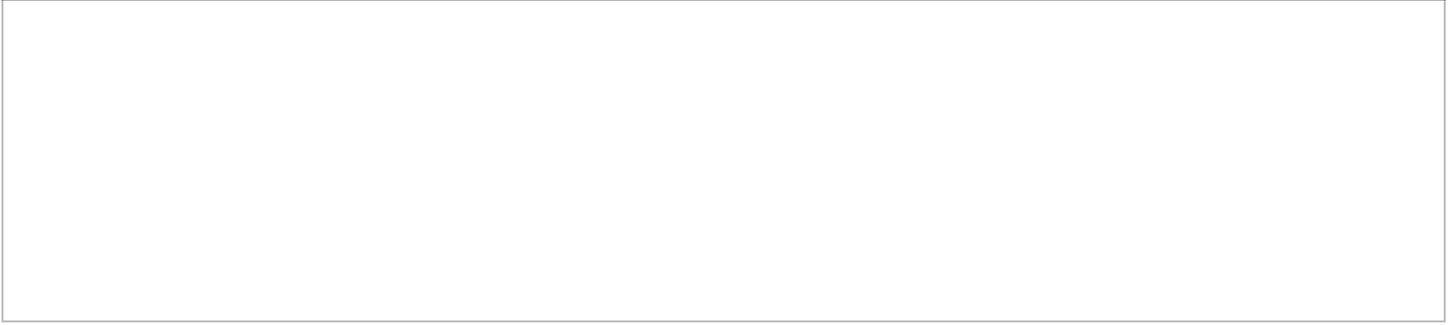
Kodi mlandu uli pati?

- (a) Mlandu ukupitilira (b) Mlandu unatha(c) Mlandu unayima (d) Zina

Ngati unayima, pali zifukwa zilizonse? _____

Mavuto/zomwe mwaphunzirapo mu nthawi imeneyi?

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Annex 4: Types of violence

1. PHYSICAL <i>Nkhanza za pa thupi</i>	2. SEXUAL <i>Nkhanza zokhuzana ndi kugonana</i>	3. EMOTIONAL <i>Nkhanza za m'maganizo</i>	4. NEGLECT <i>Nkhanza zosasamalidwa</i>	5. EXPLOITATION <i>Kupangiridwa nkhanza usakukudziwa kuti ndi nkhanza</i>	6. Other <i>Zina</i>
Wife battery <i>Kumenya mkazi</i>	Rape/Attempted rape <i>Amugwiririra/amafuna kumugwiririra</i>	Extra marital affairs <i>Kupanga ubwenzi wogonana ndi akazi/amuna ena</i>	Child dumping <i>Kutaya mwana</i>	Child labour <i>Kugwiritsa ana ntchito zoposa msinkhu wao</i>	Land disputes <i>Kukanganirana malo</i>
Bullying <i>Kuvutitsa munthu</i>	Defilement <i>Kugona ndi mwana</i>	Making one feel bad <i>Kunyazitsa</i>	Failure to support family <i>Kulephera kusamalira ana/banja</i>	Property grabbing <i>Kulanda chuma</i>	Child custody dispute <i>Kukanganirana ana</i>
Beating <i>Kumenya</i>	Incest <i>Kugonana pa chibale</i>	Calling bad names <i>kunyogodola</i>	Illegal divorce <i>Kuthetsa ukwati mosayenera</i>	Child marriage <i>Ukwati wa ana</i>	Theft <i>Kuba</i>
Scalding/Burning <i>Kuotchana</i>	Touching private parts <i>Kugwira kumaliseche</i>	Intimidation <i>Kuopyseza</i>	Child not in school <i>Mwana sali pa sukulu</i>	Trafficking	Accused of witchcraft <i>Ufiti</i>
				Commercial sexual exploitation	Family misunderstandings <i>Kusamvana m'banja</i>
Other (specify) <i>Zina</i>	Other (specify) <i>Zina</i>	Other (specify) <i>Zina</i>	Other (specify) <i>Zina</i>	Other (specify) <i>Zina</i>	Other (specify) <i>Zina</i>