



GENDER AND
SOCIAL INCLUSION

Survivor perspectives on the nature, risks and response to
gender-based violence in Nepal and the implications for
One Stop Crisis Management Centres



Introduction

Gender based violence (GBV) includes violence against women and girls as well as men and boys. In Nepal, as in the world, women and girls are the primary targets of GBV. Gender inequality and social norms that condone violence against women and girls and persons that break gender norms underpin GBV.

This case study presents the experiences of GBV survivors and victims¹. It offers insight into the nature of violence, and the risks and responses to GBV in Nepal. The stories were shared by survivors, their guardian or primary provider and were collected from OCMC focals of hospital based One Stop Crisis Management Centres (OCMC)². This case study complements studies that have looked at the response to GBV from the supply side³. The survivor stories place the violence they experienced in the context of their lives, their use of OCMCs and other GBV services, and their life thereafter. It provides a user perspective to the government's multisectoral response of which OCMCs are a part, and evidence to support the continuing quality improvement of OCMCs and the responsiveness of the state to GBV.

Gender based violence was defined by the United Nations Declaration on the Elimination of Violence Against Women (1993) as "any act 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 private life".

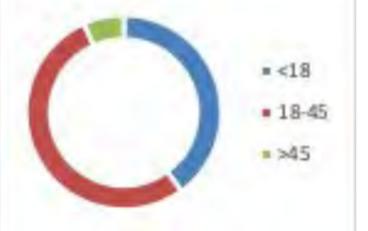
Who, what, where

This case study draws from a sample of 45 cases of GBV collected from 26 OCMCs between 2017 and 2019⁴. There are currently 44 OCMCs in the country and the 26 selected are in the Hill and Terai areas. The sample is not representative of GBV cases in the country as most incidence of GBV goes unreported and most victims do not seek help.

The case stories do however provide insight into the characteristics of victims that use OCMCs, their perpetrators, and the nature and type of violence experienced.

Who: All but one case involved violence against women and girls. The victims ranged in age from a baby to 70 years. Six survivors were aged ten and under. Most of the victims had experienced violence repeatedly and had not shared their experiences with anyone. Women typically only visited hospital after a violent episode or were taken to hospital in critical condition. Even after coming to hospital, most of them hid domestic violence as the cause of their injuries for fear of being stigmatized by society or their family.

Figure 1: Age of GBV victims



What: Thirty cases involved rape and three attempted rape. This included the rape of children as young as five, rape of a woman aged 70, reoccurring rape of girls by fathers and grandfathers, marital rape and group rape. Many in the sample experienced rape as well as other forms of sexual and physical violence. The sample included the abandonment of a newborn baby, a woman accused and assaulted for alleged witchcraft, and the chaining and deprivation of a woman with intellectual disabilities.

Where: GBV took place in private and public spaces. The home was by far the most common place, but survivors were also violated in school, walking home from school, while grazing cattle and abducted and taken to jungle areas.

Perpetrators: As other studies in Nepal have shown, women are at greatest risk of violence from people who are closest to them, particularly husbands and intimate partners. The children in this collection of GBV stories were violated by family members (7) and non-family persons (11). Across the 45 cases, the most common perpetrator of violence was the woman's husband, followed by neighbours/men in the village and then parents-in-law (mother and/or father-in-law). Violence in the home was often inflicted on an individual by multiple persons for example the husband and parents-in-law. Perpetrators include other male family members such as uncles and cousins. In seven cases the perpetrator was a stranger or unknown and in two, it was the girl's teacher.



Risk Factors

International studies of violence against women and children find shared risk factors including gender inequality and discrimination, marital conflict, family disintegration and the presence of non-biological father figures in the home⁵.

The risk factors that stand out from survivor reports in Nepal mirror such findings and include the absence or death of biological parents and adoption by extended family, absent husbands working away from home, early marriage and women's lack of citizenship status.

The most common risk factor was being a person with intellectual disabilities or mental health condition. Globally, girls and young women with disabilities face up to ten times more GBV than those without disability⁶. While the evidence base on the intersection between GBV and disability in Nepal is limited, this study captures examples of the extra vulnerability of women and girls with disabilities to GBV.

Case #12: a girl of 16 whose mother died when she was young was living with her uncle and his family. Her father had given her away when he remarried. Her uncle repeatedly raped her and threatened to kill her if she told anyone. She became pregnant but no one suspected anything until she went into labour. She delivered at home. During delivery her aunt scolded her for being characterless and having an illegitimate child. After delivery, she shared that the uncle was the perpetrator. After interrogation the uncle admitted his crime and has been sentenced to 20 years in prison.

How social norms and gender inequality condone GBV

Analysis of the case stories shows how social norms perpetuate gender inequality and women's powerlessness, and act to condone male violence against women and girls.

Gender unequal attitudes, values and beliefs put women and girls at risk of violence and impact decisions on whether to speak out about experiences of GBV, seek help, and pursue justice.

The shame and stigma of GBV for the individual and family is a major reason why GBV remains invisible, victims can end up being blamed for the violence, and constrained or denied help or justice. In cases of GBV where women and girls are living with impairment the shame is further amplified.

Case #10: a 13 year old girl was raped and became pregnant. The girl kept silent on what had happened and it was only when her teacher noticed her growing belly that the mother took her to the hospital. After the girl was found to be pregnant at the OCMC, her mother refused to take her home in fear of the response from her elder brother and the loss of social prestige. The girl was provided shelter in a safe house run by a NGO and is where she and the baby remain. Her family have not visited the survivor due to their sense of shame and have prevented a police case being filed.

Case #4: a 21 year old woman with intellectual disabilities, who is a deaf person and unable to speak was raped by an unknown person. When the pregnancy was detected at the OCMC, the parents did not want to take her back to the village due to the "hateful discrimination" against the woman and the stigma they would face. The woman stayed at the safe home until delivery. The baby died and after multiple family counselling sessions the parents agreed to take the woman home. No case was filed to investigate who the perpetrator was.

Case #19: a 17 year old girl studying, living and working away from her family was rescued from an attempted rape by a man she encountered at her workplace. Both the girl and the perpetrator were questioned by the police. The girl and her family decided not to press charges. She said, "since I had already earned so much shame on my name I did not want to prolong it by filing a case against him. The hotel uncle also suggested that it would be bad for my reputation if I filed a case against him - I would have to go through so many hurdles in court. I therefore decided to reconcile (milapatra)".



In many of the cases of domestic violence, men use sexual and physical violence to assert their control over women, and sometimes the denial of rights too.

Case #11: a 25 year old woman separated from her abusive husband but he continued to harass her. One day he tricked her into meeting him and he took her to the jungle on his motorbike where two of his friends raped her. The woman continues to live in a safe home and she has filed a case against the husband and his two friends.

Case #30: a 27 year old married woman with three children who lived with her husband in a joint family set up experienced repeated sexual, physical and emotional abuse from her husband. She says, "he refuses to register our marriage and also refuses to make my citizenship. He has also denied registering the birth of our children in the respective ward."

Case #18: a 25 year old woman, married to a man in the army was emotionally and physically abused by her husband and his parents. The husband who was away from the joint family home insisted she give up her teaching job as he thought it gave her freedom to roam around with other men.

Traditional social norms that confer authority of parents-in-law over daughters-in-law is a source of considerable family tension and condones the use of violence to control and exploit women who are often seen as the property of the family. The dominant beliefs of the subservience of wife's to their husbands and parents-in-law can trap women into a culture of violence in the home.



Case #15: a 36 year old married woman experienced sexual and physical abuse from her husband and physical and emotional abuse by her in-laws. Her in-laws beat her and asked their son to leave her and marry another woman to give him a son. She complained to the police twice about the abuse before the incident of physical assault and broken ribs that brought her to the OCMC. On those two prior occasions the police spoke to the husband and asked her to reconcile.

Case #28: a 24 year old woman married a man 16 years older than her when she was very young. He started physically abusing her after their first child was born. She was also threatened by her father in law "my father-in-law would come at night to my bed whenever my husband was not around... it happened two-three times... I did not let him touch me and had fights with him." She complained to her mother-in-law and husband but they did not believe her and blamed her for insulting her father-in-law. The woman and husband moved into a separate home and his abuse continued. One evening he beat her with an iron pot and she was taken to emergency at hospital and thereafter transferred to OCMC.

Case #37: a 25 year old woman whose husband was working overseas was mentally and physically tortured by her in-laws. One day they accused her of not making afternoon snacks on time and beat her so badly in the field where she was working that she became unconscious and was bleeding from a head injury. People from nearby fields brought her to the emergency department at the hospital and from there she was transferred to OCMC.

Help seeking: the added value of OCMCs

Many of the GBV survivors/ victims were taken to hospital after a violent episode and were transferred within the hospital from emergency department, others arrived at the OCMC via police or the Women's Development Office.

All 45 received medical services from the OCMC/hospital. Survivor counselling was provided by the OCMC in 39 cases and counselling of family members

in 15. OCMCs are the only point of counselling in the district health service. In some cases, survivor stories suggest that the counselling service helped women move forward.

Case #3: a 24 year old woman suffering from post-traumatic stress disorder after her husband died and her mother-in-law took their child attempted suicide and was treated at the OCMC. She received medical care, psycho-social counselling and information on her legal rights. Her mental health has improved and she is considering filing a case to gain custody of her child.

The OCMC coordinated with other service providers (police, Women and Child Office, NGOs, courts) in 43 cases, and often times OCMC staff were pivotal in leveraging resources and assistance to safeguard survivors and manage complex situations, going far beyond their medical care and counselling responsibility. For example, helping women to arrange schooling for their children, raising funds to cover immediate costs and organising livelihood support for the medium term. The level of effort provided by OCMCs was particularly intense in cases which involved women and girls with disabilities where finding an agency to provide a safe home and rehabilitation was difficult and complex cases required Case Management Committee and District Coordination Committee meetings and decisions to protect the special needs of survivors.

Case #27: a woman in her mid-20s with mental health problems was living on the street and began a relationship with a man who also had mental health problems. She became pregnant and was brought to the OCMC when she went into labour. She delivered at the OCMC and stayed there for a week post delivery because she had no home to return to. The OCMC invested time in finding an agency to provide a safe home to the mother and baby and mental health care. Funds from the OCMC referral fund were used to transport the mother and baby to KOSHISH an NGO where they stayed for six months. In the meantime the father received mental health care. The municipality and local organisations provided funds to build the family a home; OCMC and other organisations collected funds for basic living utensils, and OCMC provided funds for poultry. The family moved into their home and are running a small poultry farm.

Case #30: OCMC staff provided multiple counselling sessions to the wife and counselled her husband to register the marriage and citizenship of his wife; which he did. OCMC also accompanied the wife to register her children at school and met with the headmaster. Both schools provided scholarships to the children.

What happened next for survivors

The pathway for survivors after the incident that brought them in contact with the OCMC is varied.

In seven cases perpetrators are in prison and another 11 cases have been filed with the police. In the majority of cases, no police case is lodged. Even in cases of child rape, some families have decided not to lodge a case in part because of perceived family shame and perception of many hurdles in court (as per case #19 above).

Case #44: a 17 year old girl with intellectual disabilities was raped by a boy in the village. Her mother knew what happened but did not intervene. The mother decided not to file a case because as she said it will harm their social status and they will not be able live in the village due to the social stigma attached to it.

The safety of the survivor is the number one concern of providers and in many instances, survivors are referred to safe houses run by Women Development Office where they can stay for up to 45 days or to facilities run by NGOs where they may stay longer⁷. Staying at a safe house is a temporary though important immediate response and the survivor generally returns to the family home thereafter. This is the case even when the conditions that fuelled domestic violence have not changed. In some cases, violence reoccurs but the options available to women to leave the violent home are very limited.



Case #29: a 30 year old married woman who was married at 13 and has four children experienced regular physical abuse from her husband after he came home drunk. After the incident that brought her to the OCMC with serious injuries she went to stay with her sister. A few days later, her husband came begging her to return home. He promised never to hurt her again. She returned. But, after some days he started the same routine again. She said she stays with him as she has nowhere else to go. She believes that if she leaves him it will be difficult for her children. She refused to file a case against her husband even after repeated counselling sessions and offer of help.

In a small number of cases survivors of intimate partner violence have been able to break the cycle of violence with support from NGOs that have provided skill development training and helped women start small businesses to become financially independent or in the case of one woman, the Medical Superintendent of the hospital gave her a job.

Conclusion

Survivor stories present a chilling picture of the abuse women and girls in Nepal face trapped by social norms and gender inequality that condone male violence and the authority of in-laws to control women. OCMCs are a critical structure in the response to GBV



providing essential medical care and counselling and performing an important coordination response.

However, community awareness of OCMCs is low, survivors rarely come direct to them and OCMC staff are hospital based. While recognising the contribution OCMCs are making to the lives of GBV survivors, the case stories shared here reflect the magnitude of the challenge.

Tackling GBV in Nepal will require multisectoral and sustained commitment by government at all levels. The main responsibility for the health sector is to provide supportive care to GBV survivors and this will require continued strengthening of health staff capacities and expansion of service availability. Priorities for the health sector are:

- Scaling up hospital based OCMCs across the country to provide the hub of the multisectoral GBV response.
- Extending the response to GBV down the health chain so that health staff at primary level have the capacity to provide first line supportive care and referral up to OCMCs for comprehensive services.
- Working with local governments to:

Prevent GBV through public health campaigns that mobilise the health and social development workforce in each municipality, community leaders, women's and men's community groups and activists.

Establish district GBV rehabilitation funds to support survivors recover from GBV and establish economically independent lives that are free of violence for themselves and their children.

Annex 1: Case stories of gender based violence survivor and victim experiences

Case 1

On 2075/01/07, a girl, aged 16 years visited OCMC in province 3xx. She came there by herself and shared her story. She was the eldest daughter in the family with one younger sister and a brother. Her parents, both, worked in the fields and raised cattle. She had fallen in love with a boy via social media (Face Book). He also hailed from the same village. After exchange of frequent conversations, they met one evening and had unsafe sexual intercourse and continued to meet afterwards. He promised to marry her. However, after she became pregnant, he absconded to Kathmandu and the girl was left helpless with no support. She lacked the courage to tell the truth to her parents fearing disownment from them. Thus, she took the decision to leave the village with guilt and regret. On her way to Kathmandu, she befriended with one ANM sister and told her the entire story. The ANM sister suggested she visit the hospital OCMC.

After hearing about OCMC and its functions, she decided to come to the OCMC. At OCMC she narrated her entire story to the OCMC focal person. After hearing her story, the nurses took very good care of her. Her living arrangements were made at safe house. The gynecologist conducted her systemic physical examination. Similarly, all tests, such as blood, urine, ultrasound, x-ray and other necessary tests were conducted. She was 20 weeks pregnant and looked very anemic. After examination, the OCMC provided her medications, food, some clothes and shoes. The counselor at OCMC provided multiple sessions of counseling as well. After few counseling sessions, she said that she will give birth to the baby and will take legal action against the perpetrator.

She regularly visited OCMC for checkups. Sisters at OCMC provided information about health education, hygiene, pregnancy care, proper dieting and pregnancy checkup. She was referred to a referral hospital for delivery as she was high risk (underage, anaemic). The OCMC coordinated with the OCMC at the referral hospital, where she was taken and delivered a 2.5 KG baby boy via c-section. After delivery she came back to safe house. In the meantime, the focal person from the OCMC coordinated with police and traced the boy. He accepted his transgression and accepted here as his wife. They both returned back to their village and are living happily.

Case 2

On 2075/06/16, a five-year-old girl visited hospital with her elder mother. She complained about pain in her lower part of the body. The doctors at emergency department examined the child and suspected sexual abuse and referred her to OCMC. Sisters then brought her to OCMC.

At OCMC, complete examinations were carried out by doctors with the help of staff nurse. During the checkup, the doctors found out that her vagina was torn apart, red swollen and blood discharged. All necessary tests were carried out and she was given medication. Confidentiality was maintained during the examination. The tests were conducted free of cost and the child was provided medication. After the tests were completed, the staff nurse at OCMC took her aunt's consent before asking about the cases. The police was called and a case was filed in the police station. The nurse then took detailed history from the child's aunt.

The aunt said, "the child's mother is dumb and is suffering from 2nd stage of uterus prolapse. The father is drunkard and had raped her elder sister, too. After knowing the truth, he was then thrown out of his village. He had then relocated in Y district. But, old habits hardly change. He started abusing this girl since last three four months and threatened the girl to keep quiet." The mother also knew about the abuse being faced by her daughter. However, she was unable to express it. Somehow, the child managed to tell it to her elder mother. So, she brought her to the hospital.

The staff nurses at OCMC with the help of her aunt, coordinated with police to file a case against the perpetrator. With the help of Police and the legal prosecutor, a case was filed. The perpetrator was caught and put in jail. After some days, the perpetrator also accepted his crime and the court sentenced him for twenty years. He is now serving his jail term.

Case 3

On 2074/03/05, OCMC C, received a unique case. A survivor, aged 24, resident of a Rural Municipality, came to OCMC. Her husband had died in an accident after three years of marriage. The couple had a son, who was 2 years old at the time of his father's death. After the death of her husband, the survivor lived alone as a widow taking care of her 2 year old son.

As told by her, after a few months, her mother-in-law took away her son and did not return him back. Depressed of

her situation, she tried to commit suicide by hanging. Luckily, she survived. Her elder sister brought her to OCMC for counseling. At first when she came to OCMC, she looked very depressed and frustrated. To find out about her real situation staff nurses at OCMC with the help of doctors carried out all kinds of examinations and tests.

She was suffering from multiple issues – low mood, loss of interest, sleep problems, anxiety and anger, since over a year. Her symptoms indicated severe depression with PTSD. She was initially treated non-medically with deep breathing exercises, stress management technique, and psychological education for suicide prevention. However, even after a few follow-up visits, her Patient Health Questionnaire (PHQ) score didn't improved. Then the doctors decided to treat her through medical drug. She started showing improvement after she was given medical drug, fluoxetine.

She is still taking medications, and has improved remarkably. She has started keeping herself busy on her daily chores and has no suicidal thoughts. There are times when she misses her husband badly but can cope with the situation now. Improvement in her mental state has also led her to start a life afresh.

With the help of OCMC, she knows about her rights and is considering filing a case against her in-laws to bring back her only son.

Case 4

The survivor is a 21-year-old girl- who has intellectual disabilities and is a deaf person and unable to speak. She was brought to OCMC by her parents when they noticed her swollen stomach. She was examined by doctors at OCMC, and they conducted some tests. The tests showed that she was eight months pregnant. The family had no knowledge who the father was and how this had happened. The victim obviously could not reveal anything because of her inability to speak.

As told by her father, "before coming to OCMC, her neighbors had subjected her to plenty of hateful discrimination. The situation was such that they had to flee village along with the victim and lived in xx supporting their daughter." The parents wanted her to have an abortion. Therefore, after consultation with case management committee, the case was referred to higher center for consultation regarding third trimester abortion. But, abortion was not possible.

The case posed challenge for OCMC as well.

As told by one of the nurses, "managing her case was very challenging for us. Managing a deaf and dumb victim with mental health issue was a big thing. The victim was restrictive initially. She would not welcome any examinations. She repeatedly rejected IT injections, and medications. But, after several follow ups, she probably understood that we were trying to help her."

After her checkups, the OCMC focal person coordinated with safe home and she was kept in a safe home until nine months. Since her case was very complicated, she was referred to a referral hospital for delivery. She delivered baby at the referral hospital and her baby died after a few hours of birth as told by her parents. The cause of death was not known.

Fearing the discrimination and hatred by the villagers, her parents did not want to take her back to the village. However, after multiple family counseling sessions, they finally agreed to return back with her.

Case 5

The survivor is a six-year-old girl child. She is an orphan, raised by her grandmother. Her father had died when she was very young and mother had eloped with someone else. Her cousin sister and Police brought her to OCMC.

According to her cousin sister, the perpetrator was a man from the same village. He is 22 years old. The survivor had told her sister "the perpetrator gave me a fruity drink and lured me to his room. He bit me in my cheeks, necks and forcefully abused me." She also showed her inner clothes smeared in blood. After seeing all this, her cousin sister reported to the police and brought the survivor to OCMC.

At OCMC, the doctors made her comfortable and examined her very carefully and thoroughly. All tests were carried out. Her vagina was torn apart and it was bleeding. She had blue marks on her body as well as deep wound in her thigh. The doctors treated her for that and provided all necessary medications free of cost. She was kept in hospital for one day and was discharged the next day.

The perpetrator was captured by the police and he is in jail. The investigation is going on and the punishment for such a heinous crime is likely to be 20 years in prison. The survivor is now going to school regularly.

Case 6

The survivor is a 14-year-old boy. He works as a helper in a motor garage. He is originally from xx, but is residing in another district to earn money. Back home, his family consists of mother, father and his two younger siblings, a sister and brother, aged nine and seven.

As told by him, on dated 2075/09/12, he and his friend, were called by an uncle, who also works in a garage to sleep as he was alone that night. Uncle requested him to sleep with him on the same bed and asked his friend to sleep in another bed. Around 1:00 AM he felt something inside him and woke up from his sleep. He found out that the uncle was penetrating in his anal. To his surprise, he saw his friend making a video from his bed. He felt betrayed but did not say anything at that time. Next day he felt he was raped. He told about this incident to his garage owners and complained to police. He also showed that video to police. However, the perpetrator denied any wrongdoing. He said that he was under the influence of alcohol and did not know what he did to the boy at night. He denied the accusations.

The Police brought the boy and the perpetrator to OCMC for physical investigation and checkups. All necessary checkups and tests were carried out free of cost and medications were provided. After the treatment, the Police took both the boy and the perpetrator back and the case was filed against the perpetrator.

Case 7

This 50-year-old woman, married for 30 years, was living with her son and husband. She died due to multiple organ failure.

She was originally from xx and they had shifted for a job. They used to run a small tea shop. Her husband was an alcoholic. He would often drink and hit her. She had also faced sexual abuse from her husband. He would come home drunk and demand sex. Due to the constant sexual abuse she had problems in her lower abdomen and uterus. Even after undergoing treatment she faced problems.

Though, this incident had taken place three years ago, as told by one of the staff nurses, "it is still very fresh in my mind and I get chilling sensation in my stomach whenever she comes to my mind."

The survivor had come to the emergency department of the hospital complaining of abdominal pain and reddish urine. The doctors at emergency department suspected this to be a GBV case, so was referred to OCMC. At OCMC, the nurses took her history properly. During history, it was revealed that her husband had hit her ten days back on her abdomen with his leg after drinking alcohol. Even after experiencing such abuse everyday she never thought of reporting him to the police or seeking help from others. She feared society and community.

At OCMC she was provided all possible treatments free of cost. She was kept in ICU for 54 days. However, she developed sepsis and even after keeping her for 54 days in ICU she expired due to multiple organ failure. The case was filed against her husband and is underway.

Case 8

The survivor was a 19-year-old female . Her mother brought her to the Emergency department of the hospital after poison ingestion. She lived in a joint family with her mother, father, grandfather and a brother. She was admitted to ICU and medical ward for management of organophosphate and then later transferred to OCMC.

All necessary treatments were provided by the hospital and the counseling was done at OCMC. During the counseling session, she revealed the reasons of consuming poison.

She was subjected to sexual violence in her own house. Both, her father and grandfather have been sexually abusing her since childhood. She was threatened by them not to reveal it to anyone. Her mother also knew about the abuses, but she also asked her to shut her mouth. Tired, she wanted to take her life.

After treatment and psychological counseling, the staff nurse at OCMC contacted a NGO and sent her there. She has now completed +2 and wants to pursue MBBS. With the help of same NGO, a case has been filed against her father and grandfather.

Case 9

The survivor was an eight-year-old girl who came with her guardians to the emergency department with police. The girl was staying with her uncle's family since last one year, as her father is abroad and her mother

remarried.

The police brought the survivor to hospital for the medico-legal examination purpose. She was a bit nervous and frightened in the beginning. But after a short session of counseling, she was comfortable with the medical team and let them do the necessary examination. During the process of medical examination, the medical team found out multiple injuries on her body parts (some fresh and some old healed). Her hymen was not intact, bruise was present on labia. She was also referred to surgical, orthopedics, pediatrics and gynecological department for further analysis, treatment and expert opinion. Experts from all these departments were called to the OCMC and they did the checkups thoroughly. All necessary investigations and tests were carried out. Analgesic was also provided as she complained of severe pain in her whole body. She was admitted to OCMC for one day for observation and was kept in gynecology department. She complained of difficulty while urinating. All medications and tests were carried out and provided free of cost to her.

As told by her, son of her thulo baba (father's elder brother), a young man of 18, used to beat her by belt, boots, etc, since few months. Similarly, he used to sexually abuse her at night and any time of day when his mother and father were not around. The day when the incident happened, her aunt and uncle had gone for shopping and he wanted to abuse her sexually. She denied. Hearing her refusal, he hit her with boots and belts and had raped her. When the guardians came back, she had complained to them and they had brought her to the police and the police had brought her to the Emergency department for medico-legal examination.

She stayed in hospital for two days and after checkup was over she did not want to go back home. So, the focal person from OCMC coordinated with the safe house and she was sent to a NGO in another district, for rehabilitation purpose. She is still there and has started going to school. The case has been filed against the perpetrator and is still in the court.

Case 10

The survivor is a 13 years old girl. She came to OCMC on 2074/12/05. She lives with her mother, father, elder brother and a younger sister. She studies in class seven. She came with her mother to the hospital.

As told by her mother, the girl's school teacher invited her to the school one day and told her that her daughter's belly is growing bigger/swelling. So, worried about what happened to her, they went to a private hospital for checkup. There they found out that she was pregnant of 24 weeks and referred her to hospital. At hospital, they came to "Complete abortion care department", and then the case was traced by OCMC. At OCMC, the doctors carried out all necessary checkups and tests. It was done free of costs. After the investigation, it was found that the survivor was pregnant with a single fetus of 24 weeks of gestation. The expert opinion given by the team was that the case could not be aborted as the girl was only 13 years old and was running in second trimester . The OCMC team explained about the situation to the mother. However, the mother denied to take her daughter back with her. She told that her elder brother would not allow her to stay at home and also because of social prestige. The psychosocial counselor at OCMC provided multiple counseling sessions to her. Even after that, she denied to take her daughter back. Then the OCMC sisters asked them what they want to do.

Due to fear of her social prestige, the mother did not want to file a case against the perpetrator or take police help in finding the culprit. When asked multiple times, the girl also did not reveal the name of the perpetrator.

She said she does not know who did this to her. The girl was then referred to safe home, run by a NGO in another district. She stayed in safe home and came for regular follow up checkup. On 2075/08/26, she delivered a male child weighing 3.5 kg. She is still living in safe home with her child. No one from her family comes to visit her.

Case 11

The survivor is a 24-year-old married woman with two daughters, one five year and the other five months old. She got married at the age of 17. She lives alone with her daughters and survives by doing household chores in other people's houses and by raising goats. She was happily married until her husband went to Saudi Arabia for work.

According to her, during his stay abroad, his family fueled him against her and accused her of having an illicit relationship with other men. After two years of staying abroad, he came back home and started abusing her physically, sexually and mentally - unable to cope with the situation, she decided to stay alone. However, he did not let her live her alone - he would come and abuse her any time of the day and beat her-up and forcefully have sex with her.

One day, around 12 o'clock in the afternoon, her husband called her on her phone saying that he wants to give her some money and asked her to come to a nearby field. At first she denied. But, he convinced her

and she went. He had come there with three of his friends on two motorbikes. He asked her to sit on his motorbike and took her to a nearby jungle with his friends. There, he left her with his two friends and went away with one of his friend. His friends tore apart her clothes and raped her. Hearing her cry, a woman came to her rescue, and the guys ran away.

The woman called the police and the police brought her to the safe home run by WCOs office. With the help of safe home, the police brought her to OCMC for necessary checkups. The doctors were called at OCMC and all necessary checkups were conducted and tests were done. She was given new clothes by OCMC and was brought back to the safe home.

The survivor has filed a rape case against her husband and his friends. The police have been searching for her husband and his friends. She was waiting for her medical reports to come so that she can go back to her daughters.

Case 12

The survivor is 16-year-old girl. She is an orphan. Her mother died when she was very young and father remarried and left her with uncle and his family. She has studied up to class four and was not able to continue her school due to work pressure at her uncle's home.

One day, in the afternoon, when she was done with the household chores and resting, her uncle came to her suddenly and started abusing her. No one was at home. He raped her and threatened to kill her if she informed anyone. She screamed and cried but no one came for her rescue. She said, "It hurt me so badly. I was not able to walk properly for days." The incident continued. The uncle would look for chances and would come to her whenever no one was around, be it in the morning, day or night. She was repeatedly threatened by him to keep it a secret.

Time passed and her menstrual periods stopped. She did not give much importance to it, as she had no proper knowledge about the consequences. She only came to know about the baby once it started moving in her stomach. She feared and informed her uncle who again asked her to keep quiet, threatening to kill her if she told anyone. As shared by the survivor, her stomach did not grow big so no one noticed her pregnancy. Everyone at home came to know about it only when the labor pain started. She was scolded by her aunt and others in the family for being characterless and for carrying an illegitimate child. She repeatedly asked her, "Whose baby are you carrying?" She gave birth to a baby girl at home. The baby weighed only 1 kg. She did not know why she was not taken to the hospital for the delivery.

After giving birth, she informed everyone that it was her uncle who had impregnated her. The neighbors called the police. The survivor was also taken to the hospital for necessary checkups. She was brought to OCMC. At OCMC, doctors were called; her and her baby's checkups were done thoroughly. Blood urine and other tests were also conducted. The OCMC staff and the police also decided to send for DNA test as the perpetrator did not admit his crime.

However, following an interrogation the perpetrator admitted to the crime. The uncle was arrested and a case of under-age rape and incest were filed against him. The uncle is jailed for twenty years for incest and under age rape case. The girl is living with her daughter and comes to OCMC for regular checkups with her baby.

Case 13

The survivor is an 18-year-old girl, from Yadav community. She has studied until class ten. She fell in love with a guy from nearby community. Everything was fine between them until she found out that she was pregnant. When she disclosed this to her boyfriend, he denied to take the responsibility. She then informed her parents about the incident. Her parents decided to report the incident to police and a case was registered. After the case was registered the guy escaped. He came back after 10-15 days and said that he will get married to her. Her boyfriend's mother demanded five lakhs rupees in dowry from her parents. Though, her parents were very poor, they agreed for the sake of their daughter's future.

After the case was registered, the Police brought the girl to OCMC for all necessary checkups and tests. She was given all necessary vitamins, calcium and folic acids by OCMC sister.

After the pressure from Police and the girl's family, the boy finally accepted the girl and agreed to marry her. After a month they got married. She is eight months pregnant now and doing regular checkups.

Case 14

The survivor is a 20-year-old girl from Tamang community living with her parents and two brothers. She

hails from a remote part of the district, which takes two hours to reach by bus and an hour of walking. Her house was destroyed by the earthquake so all family had been living in a cottage made by galvanized sheets. Family's main sustenance is agriculture. Her main role in the family was rearing animals, cutting grasses and feeding them. She had never attended school.

As told by her, in her neighborhood, there is a middle-aged man who runs a small grocery shop. He used to tease her every now and then, telling her to come and stay with him. One night when everyone was fast asleep around 10 pm he came in her room fully drunk and started abusing her and raped her and left. She shouted, however no one heard her. This affair continued for some time, he used to look for opportunity, and would come to her house when no one was there. She kept everything hidden from her parents. When asked, why did she not tell anything to her parents? She kept mum.

When her mother and father learned about the incident, they threw her out. A sister from her village brought her to the safe house. When she arrived at the safe house, she was five months pregnant. She lived in safe house and went regularly to the OCMC for checkups. She had some complications on her pregnancy, so had to stay in hospital for a longer duration. The staff at hospital treated her very nicely. All medications and treatment were provided free, food was also provided free of cost. When the time was due, normal delivery was not possible so she had c-section. After delivery too, she had to stay in hospital for long time. In hospital, she stayed in women's ward. She came back to safe house after staying in hospital for long time. She is still at the safe house with the baby. With the help of OCMC, a case has been filed; however, the perpetrator is still absconding.

Case 15

This survivor was a 36 years old woman, living with her husband for last seventeen years. It takes about three and half hours by bus to reach the hospital from her house. She had eloped with this man when she was only 19 years old. She has four daughters. After few months of marriage, they started living separately from their in-laws. Though they were living on their own, her mother-in-law used to backbite about her to her husband when she was not around. She also tried telling her husband about her mother-in-law's unreasonable behaviour, but he never listened to her.

Since last few years, her husband used to beat her up and strangle her neck. He had the habit of drinking alcohol and playing cards. He would drink from the morning and go out with his friends and do nothing. He would come at night and start fighting with her and beat her up. It had become a routine. She had to do all the household chores as well as work in the field, too. He would beat her every day and her neighbours would come to rescue her. Her in-laws also used to beat her and blame her for not giving birth to a son. They used to ask their son to leave her and get married to another girl for a son. He used to force her for sex anytime of the day whenever he wanted, did not care for anyone not even kids. He used to have sex even when she was menstruating. She had filed a police complaint twice in the past, but the police threaten the husband and ask her to reconcile with him.

The major incident happened in Baishak 9, 2074. On that particular day, she had gone to the field in the morning and came back home around five 'o'clock in the evening. Her husband was sitting there angrily. She had no idea what he was angry about. All of a sudden he pulled her hair and strangled her neck. He started beating her up with the sticks he had with him. He continuously beat her up until she fell unconscious. She had bruises and blue marks all over her head and body which were bleeding. He had broken her ribs, too. Her entire body had swollen including legs. Hearing her scream, some neighbours called her younger sister and was rushed to the hospital in an ambulance. She reached hospital around midnight. When she regained her consciousness she found herself in hospital. At hospital, she was brought to the Emergency department. She had sustained injuries all over the body so they admitted her. She was kept in Emergency for that day and the following morning, the OCMC staff was informed about the case and she was shifted to the female ward. OCMC staff facilitated her treatment. During the day, she was kept in OCMC department and at night was shifted to female ward. She stayed in hospital for total three days. According to her, everyone at hospital including doctors and nurses behaved very nicely with her. She was provided all medications, food and a pair of clothes (everything free of cost). She seemed to be satisfied with the services she had received. She also received repeated counseling sessions from the psycho-social counselor at OCMC, which she stated, was highly beneficial. She received information about safe house, police and legal rights from OCMC. The OCMC facilitated her to file a divorce case. The case is also going on in the court.

Now, she is living on her own in another area, and has not gone back to her home. The OCMC person is facilitating her to open a small business with the help from Women and Children Office fund. She is planning to open a small fast food stall after receiving the fund.

Case 16

The survivor is a 24-year-old girl with intellectual disabilities, residing with her younger sister in xx. Her father and mother had died two years and five years before respectively. Her sister had left her and gone somewhere else. She was rescued by some locals from a cage like structure- naked, immersed with mud, feces and urine. Her condition was such that she was unable to walk, or eat.

She was then brought to district hospital for treatment. She was admitted to the Emergency department and from there she was referred to OCMC. Doctors carried out all her medical examinations at OCMC and medical tests were also conducted. She was kept in OCMC for some days and a caretaker was appointed to take care of her. All the treatments and medications, clothes and other necessary items were provided free of cost. She was suffering from Tinea Cruris (fungal infection) and some other skin disease, so was referred to hospital for treatment. After the treatment, she was taken to safe house and stayed there for a month.

The OCMC sister organized series of meetings to permanently rehabilitate the survivor. The District Coordination Committee and Case Management Committee meetings were organized and meetings with other relevant stakeholders were also conducted. After rigorous attempts, the OCMC could send her to an organization in Kathmandu. The OCMC nurse is in continuous contact with the organization to follow-up her condition. She was very happy to hear that the survivors' health had improved and she was able to eat and go to the toilet by herself without any help.

Case 17

This survivor is a 14 year-old girl.

Her parents separated when she was very young and she was raised by her single mother. Her mother had gone for foreign employment, so she was staying with her aunt's family. She is studying in class eight.

She was learning dance in nearby dance school. On that day too, she had gone for her dance classes. At the dance class, she waited for her co-learners, who didn't show up until late. She was alone at the institute. Seeing the opportunity, the dance teacher abused her physically and raped her. After raping her, he threatened to kill her if she narrated the incident to anyone. However, she went home and told her aunt about the incident. Her aunt brought her to police station and complained about the teacher. The police then brought the survivor to the hospital for necessary medical checkups.

At OCMC, her bodily examinations were carried out by doctors with the help of OCMC. All required tests were conducted. She was also given emergency contraception. The report revealed swelling and redness over vagina, and fever. She was mentally disturbed, so was admitted to OCMC and kept for two days. Multiple sessions of psycho-social counseling was provided to her.

After treatment, she was sent to safe home for temporary stay until she felt better. Later, she was sent home with her family. The police case was filed against the perpetrator and he was held in custody. The case is ongoing in the court. She keeps visiting OCMC for follow up. She looked normal and has started going to school.

Case 18

The survivor was a 25-year-old woman, who had attempted suicide by taking pesticides.

According to her, it was an arranged marriage fixed by her parents. She has two kids, daughter and a son, aged seven and four. She lived in a joint family with her husband. Her husband is in Nepal army and she works as a teacher. After marriage, her happiness lasted only for few months. Whenever he came home for vacations, he would drink and come home late and beat her up. He would ask her to leave her teaching job as he thought it gave her freedom to roam around with other men. Her in-laws also did not support her. She had to do all the household chores. She was not allowed to go inside their room and they used to accuse her of stealing money, food and other items.

On the day, when the incident happened, she was accused by her mother-in-law for stealing money. She denied any wrongdoing; however, her husband started beating her up. So, she went inside her room and ate some pesticides kept for agriculture purpose. Later she started vomiting and fell unconscious.

She was brought to emergency department of Zonal hospital for treatment purpose. The doctor at the emergency department suspected GBV case and the OCMC sister was called. The victim was brought to OCMC and doctors were called. The necessary checkups and tests were conducted with the help of two doctors and a nurse. The medications and all other necessary services were provided free of cost. She was admitted to OCMC and stayed there for two days. Psychosocial counselor at OCMC also provided multiple sessions of counseling to her. She did not want to go back to her home so she was referred to the safe home and stayed there for five days. With the help of safe home staff she filed complaint against her husband and in-laws at police station. Her husband and in-laws were brought by the police and asked her what she wanted to do. Did she want to stay together with him/

them or separate? The husband was very apologetic and vowed not to hurt her again in his life. They reconciled and returned home. She separated from her in-laws and is now reporting to be living a happy life.

Case 19

This survivor was 17 year old woman with six members in her family including mother, father, a younger brother and a younger sister. She was studying in class 12. She went to a morning college and helped her mother during the day with the household chores, bringing fodder and helping in the fields.

One year back, she moved to a local bazaar to continue her studies (11th grade). Since her parents could not afford to give her much money, she started working as a house-keeper in one of the hotels owned by a neighbor. Her job started at 6am ended at 10pm. She was staying in a rented room near the hotel. In the same hotel, the owner's relative was also staying. She said that "he was waiting for his visa to go to a foreign country." He used to call her sister and would come and talk to her at times. He seemed to be always around. One day he came to her and requested her to accompany him to a market.

According to her, "he came to me and asked to go to the market with him to buy a pair of bras for his wife. I denied him many times but he insisted saying that since it is a 'girly' thing he felt embarrassed to go and buy them himself."

So, after repeated requests she went along with him. However, instead of taking her to the market he took her to a hotel. He stopped in the hotel and asked her to have a cold drink. He said, "let's sit in this room for some time and have cold drinks and we will go afterwards." Hearing that from him, she felt scared and wanted to leave the room. However, he did not let her go out of the room and caught her forcefully and pushed her down on the bed. As he was forcing her to open her pants the civil police knocked on their door and caught both of them. They were both put in a police van and taken to the police station. The man was put into the lockup.

The police interrogated both of them and filed a case of attempted rape against the man. They then called the safe house run by the WCO office and sent her for the necessary check-ups. The staff of the safe house brought her to the OCMC where all medical check-ups and tests were conducted and a report was provided. All the check-ups were carried out by a lady doctor. She felt that the doctor and nurses who helped her all behaved nicely and her privacy was maintained since they did not let other people enter the room. After the check-up was over, one session of psycho-social counseling was carried out. Since she was doing fine, no medications were provided. She was brought back to the safe house for a day. The very next day, her parents were called by the police following which she decided not to file a rape case against the perpetrator.

According to her, "since I had already earned so much shame on my name I did not want to prolong it by filing a case against him. The hotel uncle also suggested that it would be bad for my reputation if I filed a case against him - I would have to go through so many hurdles in court. I therefore decided to reconcile (milapatra)." So, in the presence of the WCO, her parents, the hotel uncle and police, did an agreement, whereby he would pay NPR 50,000 in return for withdrawing the case. The case was withdrawn and he paid us the sum."

After that, she worked at the hotel for another six months and then went back to her home. She is currently studying in class 12. Her life is going on as usual at home. However, OCMC counselor provided thorough counseling and provided all the options available to her.

Case 20

The survivor is 11 year old girl, studying in class five. She lives with her parents, elder sister and brother. Her family members brought her to OCMC.

On a particular day after coming home from school she had taken her cattle to a nearby jungle for grazing. There she met with two strangers. Those strangers strangled her, raped her and left her unconscious inside the pit. She did not return home. Around 5:30 PM in the evening, everyone from her house searched her and found her unconscious inside the pit. They took her to the nearby health post. However, her situation remained the same and she did not get better, she developed fever. She was referred to Provincial Hospital.

She was brought to Emergency department and from there was referred to OCMC. At OCMC, systematic check-up was conducted. Two doctors with the help of staff nurse did thorough checkups. Her vagina was torn apart and bleeding. Medications were provided to stop bleeding and fever. She was kept in OCMC for two days. Since her house was far, she was referred to safe home for a week. She stayed in a NGO run safe home and was brought from there for regular checkups and counseling. Everything was done free of cost. Multiple sessions of

psychosocial counseling were also provided to her and her family.

Though, the case was filed at the police station, the police have not been able to identify the perpetrator and are still searching. OCMC has been constantly following-up with the police regarding the progress. After the treatment, the survivor returned home with her parents and has started going to school.

Case 21

The survivor is a 10-year-old girl studying in class four. She has eight members in her family including grandparents, parents and three siblings. The main sustenance of their family is agriculture. Her family members brought her to OCMC.

On a particular day she was walking home from school with her friend. On the way to her home, there is a jungle that they have to cross to reach home. While they were walking, a masked stranger, age around 20-22, came from behind and held the survivor's mouth tight with clothes and took her inside the jungle. Seeing this, her friend got frightened and ran away. He forcefully raped her, urinated all over her face, spit at her and left her in a pit inside the jungle. Her friend went running to her house and told her parents about the incident and they came running. She could not walk properly and was bleeding very badly. Her mother took her to the local Hospital for treatment, after initial treatment at this hospital, she was referred to Zonal Hospital for further treatment.

At the zonal hospital she came to OCMC. At OCMC, doctors with the help of staff nurse conducted thorough checkups; blood test, urine test, and vaginal swab were also collected. Her hymen was torn apart and she had bruises all over her body. She was admitted to OCMC and stayed there for three days. She was provided everything free of cost. Her parents were also provided free food. Multiple sessions of psychosocial counseling were also provided to her and her family. Since her family is very poor, the OCMC provided travel expenses as well.

Though, the case was filed at the police station, the police have not been able to find the perpetrator and are still searching. After the treatment, the survivor returned home with her parents and rejoined her school. She came for follow-up at OCMC and in the meantime, she developed infection in her throat. She was treated properly. The OCMC sister during her visits also checked on her psychological condition and provided a session of counseling as well. She looked fine and said that she plans study to become a "thulomanche" (good human) when she grows up.

Case 22

Abandoned girl child – One day old

A one-day-old girl child was found covered with placenta under a bridge. Around midnight, a police officer heard the child crying and took her to District hospital. He brought the child to the Emergency department around 1:00 am at night. Next morning the child was transferred to OCMC for further investigations.

The baby was found in healthy condition weighing around 2.6 kg, had been bitten by insects and ants. The baby was kept in OCMC and check-ups were done. She developed a high fever after being brought to OCMC. She was treated for the same. She was given milk, clothes and diapers from OCMC. She was taken care by OCMC sisters with the help from Indoor Department. She stayed in OCMC for 24 days.

The police filed a case and vigorously searched for mother, to no avail. A District Coordination Committee meeting was organized to resolve the baby's case as the hospital was not able to take care of the baby for a long time. The meeting was organized under the auspices of Chief District Officer. Present were representatives of Women and Children Office officer, Police Head, Local Development Officer, District Education Officer, Bar and other organizations including Hospital Medical Superintendent, OCMC focal doctor, and OCMC staff. The meeting decided to handover the baby to a childless family of the same district. The paper works were done and the baby was handed over to the childless couple.

Now the baby is 20 months old and is getting necessary services including vaccines from OCMC. The family is very happy to have the baby.

Case 23

The survivor is a 70-year-old woman. Her husband had died years ago, both sons had migrated to other districts. She lived alone - her sons and their family visiting her intermittently.

The major incident took place on the night of 2074/08/08. The old woman was sleeping alone in her house.

Around midnight, her neighbor heard a noise coming from her house. At first they did not give heed to it. However, later they saw a young man coming out from her house. He was from the same village and was known as a drug addict. So, fearing something might have gone wrong, the neighbors gathered and went inside the old woman's house. There she lay unconscious. The man had beaten her, abused her physically and had raped her.

The neighbours brought her to the District Hospital's emergency department. After initial treatment at Emergency department, OCMC's sisters were called and the case was handed over to OCMC. At OCMC, doctors with the help of staff nurse conducted a thorough checkup. She had blue marks and bruises all over her body, her lips were bitten, swollen and bleeding, she had wounds on her legs, her anus and her vagina was torn apart with deep wounds. She was given different medications and different tests including low, mid and high vaginal swabs were taken. Regular dressing of her wounds and suturing was also carried out. She was admitted to OCMC and stayed there for six days. During her stay, food and clothes and other necessary items were also provided free of cost. Multiple counseling sessions were also conducted to her. She was then referred to safe home. She stayed in safe home for about two months.

OCMC helped her lodge a complaint against the perpetrator at the Police station. The police searched the perpetrator and locked him up in jail. OCMC sisters also helped her file a case against him in a court. The perpetrator admitted his crime and has been jailed for 14 year for raping a senior citizen.

Now, she has returned back to her home and one of her granddaughter's lives with her these days.

Case 24

The survivor is a 35-year-old woman who suffers from mental illness and is homeless.

The police constable found a pregnant woman living on the streets and brought her to OCMC for treatment purpose. As told by the police, "I saw a woman living in the streets, she was pregnant, went to talk to her. She was unable to tell her name and her whereabouts. She was mentally unstable. Therefore, fearing her safety, I brought her to OCMC." She was seven months pregnant when she was brought to OCMC.

At OCMC, thorough checkup was conducted and she was provided with medications, folic acid tablets, calcium and other vitamins. She was then sent to safe house. She stayed at safe house and visited OCMC for regular checkups, and gave birth to a baby boy after two months. She was treated for her mental health condition too. The police tried to search for her family members on the address given by her. However, without any success.

The OCMC sisters and the safe house coordinator worked very hard to rehabilitate her and the baby in a proper way. Case Management Committee meetings and District Coordination Committee meetings were both conducted. But, due to her mental health, no one was able to suggest a proper suggestion for her rehabilitation. Later, the OCMC sister contacted the NHSSP GESI Advisers, and with their help, she was brought to an organization dedicated to poor and desolate people, in Kathmandu. After few months, they (baby and mother) were shifted to an ashram in another district. These days, both the baby and mother are doing very well.

Case 25

This survivor is a 28-year-old woman who lived in a big family. She was married at a very young age, but could not stay with her in-laws due to mental and physical torture given by them for not bringing enough dowry. She was also mentally and physically tortured for not being able to bear a child. Unable to endure the pain everyday she had gone back to stay with her parents from last few years.

Due to the physical and mental torture, she had become mentally unstable. She had stopped talking to everyone in the family and had become recluse. Her situation worsened after she heard about her husband's second marriage. Due to poverty her parents were unable to bring her to the hospital for medical treatment. Therefore, she was kept inside room chained since last eight years. After knowing about her situation, a local officer released her from chain and brought her to OCMC for necessary checkups.

At OCMC she was provided all necessary treatments and later was shifted to safe home. She stayed in safe home for almost two months. OCMC sister, with the help of safe home and a local NGO was contacted and she was sent to the NGO for necessary treatment and rehabilitation. After staying for four months at the NGO she became much better and mentally stable. After that, she was handed back to her parents. She is now living happily with her parents back home.

Case 26

The survivor is a 14-year-old, girl with intellectual disabilities. She is residing with her parents and two older siblings. Her mother brought her to OCMC.

As told by her mother, since last few years, her cousin brother has been sexually assaulting the victim continuously. However, due to her mental state, the victim has no idea what was happening with her. Before her mensuration started, the family had not given much importance to the act but after her mensuration, the mother became more concerned. The mother had brought her daughter for Depo-Provera injection (contraception). The victim's mother did not want to go for further process, even after knowing that her daughter had been sexually assaulted.

Even though, the mother did not want to go for further process, the victim was brought to OCMC and her thorough checkups were conducted. Two doctors along with OCMC staff nurses examined the victim. The examination showed skin abrasion was present on the neck and back of the shoulder, bluish patches on her thigh and her internal hymen was absent. Tests were also conducted. Counseling was provided to the mother about OCMC and its services. She was also provided psychological support.

The OCMC sisters decided not to send the girl back home and did not provide the Depo-Provera injection. The Case Management Committee meeting was organized to find a solution. The meeting decided to give the custody of the girl child to the Women's Development Office. The WCO office sent the girl to the rehabilitation center of a NGO for her proper protection and behavioral therapy. After few months at the NGO, the girl was sent to another NGO for better protection, treatment and rehabilitation. She is still staying with the second NGO.

Case 27

The survivor is approximately 25/26 years old, has mental health problems, is a destitute woman who has been living in xx Municipality for the past few years. She was living on the street, eating foods from garbage bins. No one knew her whereabouts. Some people said she is from xx district and came here after being physically abused and thrown out of her house by her husband and had lost her mental balance. Similarly, there was a man with mental health issues living like her on the streets of the Municipality. He had lost his mental balance after losing everything in the earthquake including his house. They met on the streets. The man had received NRs. 50,000 as first installment to rebuild his house; using that money they bought new clothes and started living as husband and wife.

Time passed and the woman became pregnant with her first child. When she went into labour, people gathered and brought her to the Primary Health Care Centre OCMC for delivery. She could not have a normal delivery; therefore, caesarean section was conducted to deliver her baby. She gave birth to a daughter. All treatments and medications were provided free of cost by OCMC and the staff nurse at OCMC also took great care of her and the baby. Free clothes and food were also provided to her and the baby by OCMC. She stayed at OCMC for a week. However, since they did not have a house, the OCMC could not send her and the baby to the street. So, to resolve the matter, a Case Management Committee meeting was called. The meeting decided to send her to safe house run by UNICEF in coordination with the Municipality.

The mental health problems of the husband and wife meant they were not able to look after the baby. A District Coordination Committee meeting was called and the meeting decided to send mother and baby to a NGO providing mental health care. Using the budget from referral fund of OCMC, the woman and the baby was sent to the NGO for six months. She became better after her treatment and came back to the Municipality. At the same time, her husband's treatment was provided with the help of another NGO and he also became better after few months.

The Municipality and other local organizations helped them build a house. OCMC, NGOs and government agencies helped provide funds for buying clothes, utensils and other necessary items for their house. The Municipality provided free medications regularly. To help them with income generation a DCC meeting was called. The meeting decided to provide them some funds from OCMC's rehabilitation fund – the money was provided to buy some poultry. They have since been running a small poultry farm and living happily with their daughter. They bring their daughter regularly for vaccination and come to PHC if anything happens. With the help of OCMC, the PHC has been able to provide such services to needy people.

Case 28

This survivor is a 24-year-old woman. The eldest of two sisters, she was married to a man 16 years older than her, at a very young age; chosen by her parents. There were five people in her new home - father-in-law, mother-in-law, husband and his two sisters. She had been married for ten years and had three sons.

Her relationship with her husband was fine until the birth of their first child. They used to only have verbal fights. After the birth of their first child their relationship deteriorated and he started abusing her physically. He would come home drunk and start verbal fights and start hitting her with whatever was available. He would accuse her of having affairs with anyone and everyone she spoke to. She had also experienced attempted sexual assaults from her father-in-law. She said:

“my father-in-law would come at night to my bed whenever my husband was not around... it happened two-three times... I did not let him touch me and had fights with him.”

She repeatedly complained to her mother-in-law and husband, but they refused to believe her and blamed her for insulting the father-in-law. Following this, she separated from her in-laws, took her share of property and built a separate house. However, her husband's behavior did not change. He would come home drunk, beat her and force her to have sex whenever he wanted. She experienced marital rape all the time. He would demand sex with her during her menstrual periods and soon (within a week) after the delivery. Sympathizing with her situation, her neighbours suggested her to file a case against him or return to her maternal house. But, she never considered doing this. She had once gone to her maternal home after a major fight, but, after a month, her parents insisted her to go back to her husband and sent her back.

She returned to her husband's house. On the same day, her husband went outside for the entire day and returned in the evening heavily drunk. She was preparing to cook supper and was holding an iron pot. He grabbed the pot and started beating her with it. She started bleeding from her head and all over. Some neighbours and her relatives separated them. Her maternal uncle and aunt told her to run away. The incident took place at eight o'clock at night. Bleeding all over and half-conscious she left for the hospital but soon after fainted. Her neighbours called her brother and explained what had happened. Her brother came immediately, called for an ambulance and brought her to the hospital.

At hospital, her primary treatments were done at emergency department and she then was transferred to OCMC. She was bleeding and had bruises all over her head and body. She stayed at OCMC for a week. The food and medications were provided free of cost by OCMC. She was provided multiple sessions of counseling by OCMC sister.

Her husband ran away fearing arrest. Police from the local police station searched for him and he was brought to the station on the eleventh day. He had been hiding at his sister's home. He was locked up for two days but was then released. He vowed not to harm her in front of police and OCMC sister. Police has been regularly patrolling their area to monitor the situation. Likewise, OCMC has been in connection with her.

Case 29

This survivor is a 30 year old woman. Her parents died when she was young. So she had been staying with her uncle and aunt. She eloped with a man of the same village at the age of 13 and had been married for 17 years. She had two sons and two daughters.

After a few months of marriage, they lived separately from their in-laws. Her husband started a grocery shop. He used to drink alcohol but they never had major fights. Physical abuse began after she had her third child. He would come home drunk and beat her up. This was his daily routine. Her in-laws and neighbours came and supported her many times, but he would beat them also. They all feared him.

A major incident occurred several months back. She told, “He tied my hands and legs and beat me with a belt. I was severely injured. There were cuts all over my head and body. I sustained injury in my eyes, too. So, I ran away to my cousin sister's house. There I decided to file a case against him. I took my niece with me to the police station. They registered my case and brought me to OCMC at Zonal Hospital for treatment.”

She was brought to the emergency department for check-ups. From emergency she was then referred to OCMC. At OCMC, her thorough body examination was conducted. She was severely injured. So, her wounds were cleaned and medications were provided. Some necessary tests were also carried out. She was provided all necessary services free of cost. The OCMC nurse informed her about the safe home run by the Women Development Office, where she could stay for up to 45 days. The nurse also informed her about the services provided by OCMC and told her that she can always come and ask for any kind of help she required.

After being discharged from the OCMC she went to her sister's house. A few days later, her husband came begging her to return home. He promised never to hurt her again and to treat her well. So she returned. But, after some days he started the same routine again. She said she stays with him as she has nowhere else to go. She believes that if she leaves him it will be difficult for her children. She refused to file a case against her husband even after repeated counseling sessions and offer of help.

Case 30

The survivor is a 27 year old, married woman. She lives in a joint family with her mother in law, father in law, husband, two sons and a daughter.

The survivor had visited OPD for headache, dizziness, loss of appetite and sleep. Suspecting a GBV case, the doctor from OPD referred her to OCMC. At OCMC, in the beginning, she did not reveal anything. However, the staff nurse and the psychosocial counselor made her comfortable and assured her of safety and secrecy, provided her multiple sessions of counseling, then only she revealed her story.

As told by her, since nine months she had been tortured by her husband continuously alleging that she is illiterate, ugly and not fit for him. Every night he tortures her, rapes her, and beats her. He would always say, "I will leave you and marry a young girl". She started crying and said that "I have not been able to send my kids to school since then. He has stopped giving anything at house. He refuses to register our marriage and also refuses to make my citizenship. He has also denied registering the birth of kids in the respective ward". She was worried that if he re-marries what will happen to her and her children and also feared that she will not get justice. She has been making her ends meet by selling milk and firewood.

At OCMC, a doctor carried out all her medical examinations and testes. She was then provided some general medications for dizziness and loss of appetite. Multiple counseling sessions were also provided to her. The OCMC sister called her husband and provided counseling to him as well. After multiple sessions of counseling, he agreed to make her citizenship and register their marriage and children in the respective ward office. After few days, he came back with his wife and showed her the citizenship certificate and marriage registration document. The OCMC sister then counseled him about the consequences of marrying multiple spouses. He accepted his mistake and vowed not to remarry.

The OCMC sisters helped her children to get admitted in schools. Together with her, the OCMC sister went to talk to the Head master of the schools and admitted her son in boarding school and daughter in Public school. Both schools provided scholarships to the children. Both the husband and wife visited OCMC and thanked everyone for helping them a lot. These days, they have become the spokesperson of OCMC and have been spreading knowledge about OCMC wherever they go.

Case 31

The survivor is a 17 year old, unmarried girl, belonging to a middle class family. She lives in a big joint family with her parents, brothers and sister in laws and their children. Her father and brother are government employees and mother and sister in laws look after household chores. She is the only girl child in the family so was pampered and loved by all.

The survivor was brought by Police for physical checkup at OCMC. She looked very scared, worried and cried all the time. She was not in a condition to express her situation. OCMC's psychosocial counselor made her comfortable and put her at ease. She sat with her for a session of counseling, and only then the victim opened and told her entire story. She said that "a few months back her sister in law's own brother had raped her. She was alone in her house. He came and asked her to come inside, locked the room and had sex with her." He would look for opportunities, would come and have sex her with her whenever she was alone. It's been going on since a few months and her period had also stopped. One day when they were having sex, her mother saw it and reported him to police.

At OCMC, doctor carried out all her medical examinations. A few tests were also conducted. The tests found out that she was 14 weeks pregnant. The family did not want to keep the child and wanted to abort it. However, the district hospital does not have trained medical officer to conduct late abortion, so the Case Management Committee meeting decided to send her to another hospital for abortion purposes. The OCMC sister coordinated with the doctor in the other hospital and sent the victim with her family. After the abortion was completed the victim and her parents again came to OCMC and thanked for helping them out. The case has been field against the perpetrator and they are waiting for the verdict. The girl is also doing fine and has now started going to college again.

Case 32

The survivor is 28 year old, married woman, living with her husband and two children - a son and a daughter. Her main source of income is animal rearing and agriculture.

As told by the victim, "I was living my life happily with my family but villagers always used to blame me for something I have never done. They always talk behind my back saying I did black magic to make their animal and children ill." On that particular day when the incident took place, "I had cooked and fed my children the morning meal and was ready to go for cattle rearing. All of a sudden, a bunch of people

entered my house and started thrashing everything in and around the house, thrashed me and beat me everywhere. Then they smeared black charcoal on my face and the whole body. They put garland made of shoes around my neck, shaved my head, and made her roam around the village for two hours calling me witch. Later they brought me back to my home and threatened to kill".

After the incident happened, the District police in coordination with Women Development Office and Chief District Office went to her home and vowed her to help and bring culprits under the law. She was sent to OCMC for necessary treatment and tests. At OCMC, doctors with the help of OCMC staff nurse carried out all necessary examination and tests were also conducted. She cried the whole time and feared villagers. She could not sit properly due to the torture inflicted on her by the villagers and murmured all the time that they will come and kill her. She was put at ease by the OCMC sister and provided multiple sessions of counseling as well. After the treatment, she was sent to safe house. There she stayed for fifteen days. The OCMC sister went every day and counseled her and provided all necessary treatment and medications.

The police started investigations and put the culprits in jail. OCMC in coordination with Women Development Office, CDO office, and District Police office, organized a social motivation program to rehabilitate the survivor in her own community.

Though they rehabilitated her back to her own community, the villagers did not behave nicely with her and stopped talking to her. They boycotted her and did not involve her in any social gatherings, which gave her mental problems. She came to OCMC regularly for counseling services. The OCMC sister provided counseling to her almost every day. NGOs and government agencies working in that area played a crucial role in removing the superstitions of villagers regarding the ill social practices such as witch-crafting and to accept her wholeheartedly. The OCMC sister also helped the victim's children for school by providing necessary books, dress and shoes. The victim wished to do some income generating activities on her own, therefore, the OCMC in coordination with all other stakeholders in the district, helped her buy a hand tractor worth one lakh eighty thousand. The support provided by OCMC and other stakeholders proved to be catalyst in enhancing her social status in her society. She is now living a dignified life and is still in touch with OCMC. She participates in social programs and has become a well-known GBV champion.

Case 33

This survivor is a 23 years old, married woman with two daughters - age four and five months. She got married at a very young age. She works as a wage labourer to sustain her family. Her husband does not work. Every day, he would go out with his friends and only come back in the evening drunk to beat her up and demand sex. He would force her to do sex in all positions including oral, anal and also have sex during menstruation, during pregnancy and soon after delivery. He threatened her to keep her mouth shut saying, "If you share this with anyone I will kill you". Out of fear she never told anyone. He used to do it in front of their daughter. Unable to bear his torture, she went back to her maternal home. But he would come there to give troubles. After few months he vowed not to harm her anymore and asked her to come home with him. Believing him, she came back to her home. He behaved properly for four/five days and started the same over again.

The major incident took place one day, according to her, "he came home late at night. Forced me for sex all night and in the morning he forced his hand inside my vagina. I don't remember anything after that." She fell unconscious. He left her in that state and ran away. When she regained her consciousness, she was bleeding and could not even go to toilet. She then called her parents and went to her maternal home. Her parents brought her to the district hospital – emergency department for treatment.

From emergency she was referred to OCMC. At OCMC all her treatment and tests were carried out. She was kept in OCMC for a week and after that was sent to safe home. At safe home she stayed for three months. With the help of OCMC and safe home coordinator her in-laws were also called and provided counseling. Repetitive counseling was also provided to her husband as well. After the counseling sessions, the in-laws started behaving well with her and her elder daughter lives with them. Her husband also helped make her citizenship certificate and registered their marriage in nearby ward office. She then went back to her home with him.

However, he could not continue his good behavior for a long time and again started torturing her. She then ran away from home and came to OCMC. She is now ready to file a case against her husband. She is staying in OCMC and the MESU of the same hospital has offered her a cleaning job so that she can stand on her own feet and help raise her daughters.

Case 34

The survivor is a 20-year-old woman living with her parents and a younger sister. She got married at a very young age and went to India with her husband.

At her in-laws house she had to do all the chores and her in-laws never behaved nicely with her. She was continuously tortured by all of them. Her father in law used to come to her bed at night whenever her husband was not around. She complained about it to her husband many times but no one heard her.

One day, when she was sitting alone in her house, her neighbor visited her and seeing her alone raped her. She complained about it to Police. However, her husband forced her to take the case back. She suspected that he took money from him. After the incident they came back to Nepal. After coming back to Nepal, he beat her and tortured her so much that she fell unconscious. Leaving her unconscious, her husband ran away. The neighbors informed her parents about the incident and they brought her to OCMC.

When she came to OCMC she was still dizzy, partly conscious, senseless and mentally unstable. She was provided treatment, medications free of cost. She stayed with OCMC for a week. Counseling was provided to her every day during her stay at OCMC. Later, she was sent to safe house. She stayed in the safe house for three months and filed a divorce case against her husband. However, he is still absconding.

She showed interest in taking training for income generation purposes. So with the help of OCMC and safe house she was sent to a NGO for six month long tailoring training. She wants to open a tailoring shop after her training.

Case 35

The survivor is a 20-year-old girl studying in 12th grade, living in rented room. She fell in love with a man living next door who had just returned back from foreign employment. They got married and the man returned back to his job. After this, her life took a new route.

Her relationship with her in-laws deteriorated and her husband also stopped calling her. The in-laws started abusing her and made her life difficult, they mentally tortured her and threatened her parents also. They took advantage of her husband's silence and wished for her death. The situation at home took a toll on her health. She thought of taking her life all the time and stopped eating properly, could not sleep at night and become mentally unstable. One day, she had gone to jungle to cut fodder for animals and upon her return, the mother-in-law started torturing her and abused her verbally and physically. She decided to take her life and went back to the jungle where she found a big tree. While trying to tie a rope to it, somebody from her village saw it and stopped her from doing so and brought her back to the house. The villagers gathered in her house and discussed about her situation.

Someone from village informed the survivor about OCMC at the district hospital and she was sent there. Multiple sessions of counseling were conducted. The survivor said that the thought of committing suicide comes to her mind frequently. So, looking at the high chances of her committing suicide, she was kept in safe house. She stayed in safe house for almost three weeks. During her stay at safe house, regular counseling was provided to her and OCMC managed to have her checkup with a renowned Psychiatrist as well. With the help of Psychiatrist and medication, the survivor has shown positive attitude towards life. In the meantime, her mother in law came to the safe house to take her back home. She vowed not to harm her again and treat her properly. So, the survivor was sent back to her house with her mother in law.

However, after a week, when the OCMC sister had visited her home to check her status, the survivor told them that her situation has not changed. The in-laws behave in a same way as before. Moreover, her father in law had started touching her improperly and had started coming to her bed at night. When she complained about it to her mother in law, she blamed her instead of saying anything to her husband. So, the survivor requested the OCMC sister to take her out from this mess.

After hearing everything from her, the OCMC, in coordination with the Ward office, organized an interaction meeting involving all the villagers and the survivor's family. The meeting decided that the survivor would stay with her maternal family until her husband's return from the foreign employment. However, the mental torture from her in-laws did not stop. Her husband also decided not to come back until the survivor goes away. There was no point of reconciliation. So, the survivor's mother called the OCMC again and requested to give justice to the survivor. The OCMC organized a Case Management Committee (CMC) meeting to resolve the case. The CMC meeting was organized in the presidency of ward chairman, representative of Police, her father and mother in law. The meeting decided that the survivor's in laws would provide a small amount of money every month to the survivor for her survival.

She has now continued her studying and has been regularly taking counseling from OCMC. She has taken interest in skills development training, and OCMC is coordinating with an NGO to help her learn new skills.

Case 36

The survivor is a 21 year old, unmarried girl. She lives with her parents and two younger siblings, a brother

and a sister. The family's main sustenance is agriculture and cattle raising. She had studied until class seven in a nearby public school and then left it to help her parents at home.

One day she had gone to graze her cattle in the jungle and a man from a nearby village had also come with his cattle. According to her, "finding her alone in the jungle he raped her." He threatened her not to tell it to anyone. So, she kept it to herself and did not let anyone know of what had happened to her. However, her belly started growing and her mother noticed it. So, she inquired about it. The survivor then told everything to her mother.

Her mother then reported the incident to the police. Police then brought the survivor to OCMC for necessary checkups and locked the perpetrator in jail and filed a rape case against him. At OCMC, the doctors with the help of OCMC nurse did her physical examination thoroughly. Required testes were also conducted. The reports showed that she was five months pregnant. The survivor did not want to keep the child so abortion was recommended. However, the district hospital lacked the expert who could perform such services. So, the CMC meeting was organized to resolve the case. The meeting decided to send the victim to Maternity Hospital in Kathmandu. The OCMC organized all necessary support, such as, travel expenses and money for food, for the victim and her mother. The victim came to OCMC and had an abortion. After the abortion, they went back to the OCMC. She wanted a safe place to stay, so the OCMC coordinated with a safe home and arranged for her stay. She lived in the safe home run by a NGO for 45 days. During her stay she showed interest in skills development training. She was provided six months sewing and cutting training by the NGO and has now opened her own business. She visits OCMC at times and always feels grateful towards OCMC for providing her much necessary help.

The case is underway in court and the perpetrator is still in jail.

Case 37

The survivor is a 25 year old, married woman. She has been residing with her in-laws. Her husband went for foreign employment two years back. She was married at a young age and has a daughter and a son, age eight and six, respectively. Their main sustenance is agriculture and goat raising.

According to her, she had been leading a normal life before her husband left for foreign employment. After her husband left, her in-laws started torturing her mentally and physically. Her mother in law would ask her to do all the household chores as well as work in the field. She would not let her sleep until ten pm at night and would wake her up before four 'o'clock in the morning and continuously ask her to work. Her mother in law would complain about her to her husband as well and he would scold her over the phone for not doing the chores properly.

One day, the survivor was working in the field; it was around, 2 pm in the afternoon. Her mother-in-law, father-in-law and brother-in-law, came to the field together and started abusing and beating her. They blamed her for not making afternoon snacks on time. She became unconscious. Seeing her unconscious they ran away. People working in the nearby field gathered and took her to the district hospital emergency department. From emergency, she was brought to OCMC.

At OCMC, the doctor with the help of OCMC sister conducted all her physical examinations. She had bruises all over her body and bleeding from her forehead. The doctors stitched her forehead and provided all necessary medications free of cost. Tests and x-ray were carried out, which showed that one of her ribs was broken due to severe beatings. She was asked to rest and take medications on time. The psychosocial counselor at OCMC also provided counseling to her. They asked her if she wanted to take any legal action against them, everything will be arranged free of cost. Her in-laws were also asked to come to OCMC and the sister at OCMC counseled them as well. After repetitive counseling sessions and meetings with Women Development Officer, safe house coordinator, and police, her in-laws vowed not to harm her physically and agreed to treat her nicely. She also decided not to file a case against her in-laws and give them one more chance.

After a week's stay in OCMC and treatment, she went back to her in-laws house. Her situation is better than before. She says, "before they used to beat me severely, now they only scold. My husband has started sending money to me, so, they might be afraid that if they beat me I will not give them money."

Case 38

The survivor is a 10-year-old girl. She belongs to a very poor family, her father and mother both work as laborers on construction sites. She is the eldest daughter with two younger siblings, a brother and a young sister. She does not go to school and stays home looking after her siblings and doing household chores.

One day, after she had finished her household chores, she was sleeping inside her house. Suddenly her father came from nowhere and started abusing her. He was drunk and forcefully raped her. She started bleeding and he ran away. She did not tell it to anyone. Her mother came home later in the afternoon and

asked her what had happened to her. She told her the entire story. Her mother then brought her to the district hospital and informed police about the situation.

At hospital, the victim was first brought to the emergency department and from there she was transferred to OCMC. At OCMC, two doctors with the help of OCMC staff nurse conducted all physical examination. Similarly, forensic test was done. The report showed that her hymen was torn apart and she had bruises all over her body. She was admitted to OCMC and stayed there for four days. She was provided everything including medications and food free of cost. Multiple sessions of psychosocial counseling were also provided to her and her mother. Since she and her family were very poor, the OCMC provided travel expenses as well.

Her mother helped her file a rape case against her father. Her father was caught by the police and brought to the police station. He agreed to his crime. He has been jailed for twenty years. After the treatment, the survivor returned home with her mother and after few months started going to school.

Case 39

The survivor is a 40-year-old woman, abandoned by her husband and currently staying with her elder sister's family.

According to her, "on the particular day, It was around eight 'o'clock at night. I had given evening meal to everyone and was staying in my room. Suddenly, someone entered and I thought he was someone from the house. However, he was not. He started touching me everywhere and tried to force himself in me. I started shouting. He threatened to kill me if I shout. However, hearing my voice everyone came to my room. The perpetrator had run away before they came". She had never seen that perpetrator before.

Her family reported the incident to police and she was brought to OCMC for physical examination. At OCMC, thorough physical examination, such as, bodily checkup, wounds, and bruises were carried out. Similarly her urine, blood and vaginal swab, including clothes were taken for test. She had become mentally disturbed, so multiple sessions of counseling was also provided. She did not want to go back home due to fear. The OCMC sister coordinated with safe home and managed to shift her to safe home for a few days and provided counseling regularly.

After staying for few days in safe home, she showed desire to return back to her sister's place. So, the staff nurse from OCMC called her sister and sent her with her sister.

The police have been trying to find the culprit. However, they have not been successful.

Case 40

This survivor is a 60-year-old woman who had been married for 45 years, and had four children and two grandchildren. All her sons and daughters are married and gone separate ways. She has been staying with her husband.

She was married at the age of 15, stayed with her in-laws for years and separated after that. Her husband behaved nicely whenever he was not drunk. In the beginning, he used to drink only sometimes. As he aged, his drinking habit also increased and he started drinking every day. He would come home late and drunk every night and fought with her. Seeing this every day, her children left them one by one. But he never changed himself. Whenever he was drunk he accused her of having affairs with others and abused her for anything and everything. He accused her of having an affair with a 12 year old child. He used to accuse her of having relationships with her own sons. According to her, "He was kind of crazy."

One day, she was staying outside soaking in the sun; he came home drunk and started beating her with bamboo stick. After sometime she lost consciousness and does not remember anything afterwards. She has no idea who brought her to the hospital. Her neighbor brought her to the emergency department and from there she was shifted to OCMC. Her primary treatment was provided at emergency department. She was bleeding everywhere. Had bruises and cuts all over her face and mouth. She had blue marks all over her body and feet. She was in a worst state. Her thorough treatment was conducted at OCMC and the medications and food were provided free of cost. X-ray and other tests were conducted. She stayed at OCMC for a week. After she got better, she did not want to go back home, so the OCMC sister managed to send her to the safe Home for few days.

Her husband and children were informed about the incident. The OCMC sister provided him multiple sessions of counseling. After that, he vowed not to drink and harm her anymore. He went to the safe home and requested her to come home. She said that if he continues such habit, she will report to police next time. He promised her that he would behave well. After that, she returned back with him.

The OCCM sister had recently visited the couple and the woman said that her husband has started behaving

better than before and he has started drinking less than before.

Case 41

The survivor is a 35-year-old woman. She fell in love with a widower and got married to him.

In the initial days of marriage, he behaved nicely with her; however as days progressed he started torturing her physically, mentally and demanding sex anytime of the day. He would not let her eat properly, throw her food and would not bring anything home. Due to continuous torture she become very timid and lost her mental balance. One day when she was cooking her meal, accidentally her husband threw her in fire stove. She started screaming loudly, hearing her scream the women from nearby houses gathered and brought her to OCMC.

At OCMC, her treatment was done properly. Her entire physical examination and tests were conducted. She was treated for burns. Her face, neck and hands were 50 percent burnt. She was also treated for mental illness. Her wounds were so deep that she needed a very delicate care. She stayed in OCMC for ten days. Everything was provided free of cost by OCMC. She needed skin grafting service, which is not available in the District Hospital. Case Management Committee and District Coordination Committee meetings were organized. Representatives from WCO office, Police, Safe House, CDO and all other relevant stakeholders participated in the meetings. The meetings decided to trace the husband and send the survivor to the Zonal Hospital for skin grafting. She was sent there and provided all needed services. She stayed in the zonal hospital OCMC for twenty days and after completing her treatment came back to her home district. After coming back, she came to visit OCMC and thanked everyone for helping her. She decided not to file a case against her husband and give him one chance.

The OCMC sisters counseled her husband also and he vowed not to harm her anymore. She is doing fine these days and her husband treats her properly.

Case 42

The women's network informed the OCMC that a mentally ill homeless woman of 30-32 years of age, had given birth to a baby at a school. After hearing the news, the OCMC sister requested the representatives of women network to buy necessary items for baby and the mother and provide her food and necessary clothing. After that, the mother and baby were brought to OCMC and provided all necessary treatments.

At OCMC, all her physical examination, maternal care, newborn care, first aid treatment and medication were provided to both mother and the baby. Since the survivor lacked total mental awareness, a person to look after her baby was hired by OCMC. After a few days of her stay at OCMC, a Case Management Committee (CMC) meeting was organized to find a way to rehabilitate her. The CMC meeting decided to call a District Coordination Committee (DCC) meeting. At the DCC meeting, it was decided to send the mother and the baby to a NGO in Kathmandu. The OCMC sister coordinated with the NGO and arranged for a vehicle to send her. She stayed with the NGO for five months and got better. After that, she was sent to a rehabilitation center and the baby was sent to a NGO. The OCMC focal person has been in constant touch with the organizations and keeping track of the survivor and baby.

After proper treatment, the survivor became mentally and physically healthier. She has been taking medications for her mental health problems. She has become much better with time and the dose has been reduced. The OCMC is trying to locate her husband and family. So that the survivor and the baby can be handed over to them.

Case 43

The survivor is a 10-year-old girl child, studying in class five. She is the only child of her parents.

As narrated by her, she was in school for tuition after the regular classes were over. She was asked by her teacher to come to his office around 7:30 pm in the evening. He threatened to hit her by pipe if she denied. She went with him to his office. He closed the door and started physically touching her. He kissed her, bit her on both cheeks, and pulled her underwear. In the meantime, her father entered the office and thrashed the teacher. He reported to the police about the incident and put the culprit in jail.

Police brought the child to OCMC for necessary check-ups. At OCMC, a female doctor with the help of OCMC sister conducted her complete physical checkup and tests. The child had suffered bite marks on both cheeks, had bruises on her body. Her report came normal. The OCMC sister also provided multiple counselling sessions to her and her father.

They have filed a case against the teacher and he is still in jail waiting for the verdict.

Case 44

The survivor is a 17-year-old girl with intellectual disabilities. She is residing with her parents and two older siblings. Her father, mother and big brother brought her to OCMC.

The survivor could not tell her history. According to her mother, “she was sexually assaulted by a boy a few months ago. She had seen him come to her room, but did not say anything to that boy due to social pressure.” He is from the same village. After the brief relationship with the village boy, she became pregnant. Her family had brought the girl to the hospital to terminate her pregnancy.

The survivor was brought to the Emergency department of the district hospital. They had no idea the OCMC existed in the same hospital. From emergency the case was referred to the OCMC department. At OCMC, her thorough checkups were done by the lady doctor with the help of OCMC sister. Some necessary tests were carried out. The test result showed that she was five months pregnant. The family wanted to abort the baby. Since she was already five months pregnant, terminating pregnancy carried risks. However, the doctor’s team was successful in doing so. The survivor stayed in OCMC for a week. She was provided all services free of cost including food and clothes.

During her stay, she was also treated for her mental condition. She did not show much progress, though. The OCMC sister provided counseling to her mother and brother requesting them to file a case against the perpetrator. However, the family insisted not to file a case. They said that it will harm their social status and they will not be able live in the village due to the social stigma attached to it. After she got better, they returned to their village.

Case 45

The survivor is a 15-year-old girl studying in class seven, living with her parents, and five brothers.

As told by her, the assailant is a familiar person, 19 years old, and is her neighbor. He used to tease her every now and then. Their family was very close and she used to treat him like her brother. The incident took place when she was visiting her cousin sister. She had gone to a nearby river to take bath. The boy came along with her. Seeing the opportunity raped her in the banks of the river, and threatened to beat her if she told about the incident to anybody. After that, he used to look for opportunity and conduct sexual intercourse with her. The family came to know about the incident only after she was four months pregnant. She told everything to her parents.

Though, the parents of the man were ready to keep the girl as their daughter in law, the man refused to accept her as his bride, so they came to Police asking for help. The police brought the girl to OCMC for medical examination. All kinds of tests were carried out. Her family wanted to abort the baby, but due to the condition of survivor, it was risky to perform. So, the doctors advised her to keep the baby. She stayed in safe house until the delivery and visited OCMC regularly for checkups. Counseling was also provided. Follow-up checkups were done until the delivery of baby and after delivery, too. Her child was delivered normally. According to her, all staff at hospital including doctors treated her very nicely. After the delivery of her child, she gave the baby to childless couple as she was unable to keep the child. She said that “by keeping baby with me I will not be able to provide him with anything. I do not want to ruin the baby’s future”.

Her mother and father did not let her register the court case. After the birth of her child, with the help of Safe house coordinator and OCMC focal person she went to a NGO to learn skills and is still there.

References

¹One woman did not survive the injuries inflicted upon her by her husband and died after 54 days in intensive care.

²OCMCs provide a comprehensive range of services for survivors of GBV, including health care, psycho-social counselling, access to safe homes, legal protection, personal security, rehabilitation and vocational skills training. Because of the multi-faceted needs of GBV survivors, OCMCs act as secretariats, coordinating with multi-sectoral partners to ensure services are provided.

³Nepal Health Sector Support Programme III. February 2019. Improving hospitals’ responses to survivors of Gender-Based Violence in Nepal.

⁴Twenty five of the cases were collected through interviews with the survivor in 2019.

⁵Guedes A. et al. Bridging the gaps: a global review of intersections of violence against women and violence against children. Global Health Action 2016, 9: 31516 - <http://dx.doi.org/10.3402/gha.v9.31516>

⁶ UNFPA. 2018. Young Persons with Disabilities: Global Study on Ending Gender-Based Violence, and Realising Sexual and Reproductive Health and Rights. https://www.unfpa.org/sites/default/files/pub-pdf/Final_Global_Study_English_3_Oct.pdf

⁷ Safe houses are run by a variety of NGOs with support from Ministry of Women, Children and Senior Citizen, Sub-National Governments and development partners.

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