Serbisyo para sa mga Lesbian, Gay, Bisexual, Transgender Intersex or LGBTI Persons

PROTOCOL OF SERVICES
PROTOCOL TO ADDRESS
DOMESTIC VIOLENCE AND FAMILY VIOLENCE
EXPERIENCED BY
LESBIAN, GAY, BISEXUAL, TRANSGENDER,
AND INTERSEX (LGBTI) PERSONS
IN THE PHILIPPINES
Quezon City truly appreciates the efforts of all those who worked on this Protocol. We, at Quezon City, welcome this Protocol to address domestic and family violence against LGBTI people. We are a city that cares for our LGBTI community and we continuously strive for the equality and non-discrimination of LGBTI people.

In an effort to provide an enabling environment for our LGBTI community, the Office of the Mayor (OCM) together with other stakeholders pushed for the enactment of the Quezon City Gender-Fair Ordinance where we penalize discrimination against LGBTI and we have provided affirmative acts to protect the rights of our LGBTI community. Recognizing the need to address the pervasive discrimination against LGBTI people, the OCM worked for the creation and establishment of the Quezon City Protection Center for Victim-Survivors of Gender-Based Violence and Abuse, a One-Stop-Shop Crisis center that provides services to women, children, and LGBTI people.

This Protocol will certainly enhance the capacities of our service providers in eliminating discrimination and violence against LGBTI people.

Together, let us strive to make Quezon City LGBTI-friendly.

MARIA JOSEFINA “JOY” BELMONTE
Mayor
Quezon City
ACKNOWLEDGEMENT

This protocol produced by OutRight Action International and EnGendeRights, Inc. is written by Ging Cristobal and Clara Rita Padilla. It aims to address domestic violence and family violence experienced by lesbian, gay, bisexual, transgender, and intersex (LGBTI) persons capacitating service providers with appropriate, sensitive and appropriate skills and information.

OutRight and EnGendeRights extends its appreciation to the support provided by the Open Society Foundation (OSF) in ensuring the implementation of this project. We want to acknowledge the continuous assistance and support of Quezon City Office of the Mayor Joy Belmonte extended by her staff for ensuring the rights of LGBTI persons in Quezon City are promoted and protected in the implementation of local government work in Quezon City.

Special recognition is conferred to Ms. Ruby Palma, head and consultant of the Gender and Development Resource Coordinating Officer (GADRCO) and GADRCO staff and to the Philippines Psychological Association Special LGBTIQ Interest Group headed by Ms. Bea Torre, Ms. Riyan Portuguez, Dr. Ronald Del Castillo, Dr. Vangie Castronuevo, Prof. Yeng Gatchalian for their involvement in writing and providing the chapter on mental health and conducting the lecture during the training.

We are indebted to the Quezon City Protection Center for Victim-Survivors of Gender-Based Violence and Abuse (QC Protection Center) and the Gender and Development (GAD) Coordinators, GAD Focal Persons and Barangay Councilors (Kagawad) from the Barangays in Quezon City listed below who have provided guidance, focus and direction to the content of the protocol.

- Alicia
- Balingasa
- Camp Karingal
- Central
- Commonwealth
- Cubao
- Culiat
- Greater Fairview
- Greater Lagro
- Holy Spirit
- Kaligayahan
- Masambong
- Nagkaisang Nayon
- Nayong Kanluran
- Novaliches proper
- Obrero
- Pansol
- PESO
- San Francisco Del Monte
- Talipapa
- Valencia
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<td>AFP</td>
<td>Armed Forces of the Philippines</td>
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<td>BCPC</td>
<td>Barangay Council for the Protection of Children</td>
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<td>BPO</td>
<td>Barangay Protection Order</td>
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<td>BPSO</td>
<td>Barangay Public Safety Officer</td>
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<td>CHR</td>
<td>Commission on Human Rights</td>
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<td>C/MSWDO</td>
<td>City/Municipal Social Welfare and Development Office</td>
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<td>Convention on the Elimination of All Forms of Discrimination Against CHR</td>
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<td>CSC</td>
<td>Civil Service Commission</td>
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<td>DILG</td>
<td>Department of the Interior and Local Government</td>
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<td>DOJ</td>
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<td>DSWD</td>
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<td>GBV</td>
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<td>LBT</td>
<td>Lesbian, bisexual women and transgender</td>
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<td>LGBT</td>
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INTRODUCTION TO THE LGBTI PROTOCOL

Lesbian, gay, bisexual, transgender, and intersex (LGBTI) persons suffer violence, abuse, and discrimination in their own families, schools, workplaces, streets, and elsewhere. Domestic and family violence can be particularly damaging to the victim-survivor because it is caused by a family member, someone living in the same residence, or by an intimate partner. It can occur as a singular incident or a series of incidents that can negatively impact the victim-survivor’s whole life.

Access to services and justice becomes difficult as LGBTI persons are still stigmatized and are discriminated in society. And since handling cases involving LGBTI persons is not included in the protocol of the Gender and Development handbook being implemented nationwide in the Philippines, LGBTI persons are most likely to experience poor quality, insensitive and inappropriate service when they seek intervention when experiencing domestic violence and family violence. The negative experience LGBTI persons experience from service providers will most likely discourage them from seeking assistance in the future.

This protocol seeks to address the violence that LGBTI persons suffer at the hands of their family members, someone living in the same residence, or by an intimate partner that can happen in their domicile or outside their domicile. This protocol aims to strengthen the services and access to justice of LGBTI persons when they experience domestic violence and family violence by affording them skilled, competent and appropriate care and service.

This protocol addresses the service gaps that is absent in the protocol for the Barangay for LGBTI persons experiencing domestic violence and family violence targeting service providers in the Barangay most especially the VAWC Desk Officers, the GAD Focal persons, members of the Lupong Tagapamayapa, Barangay Council for the Protection of Children (BCPC), and the Barangay Public Safety College (BPSO).

This LGBT protocol provides service providers the following:

- Knowledge on sexuality, human rights issues, sexual orientation, gender identity, and gender expression (SOGIE), particularly concerning LGBTI persons,
- Skills in identifying domestic violence and family violence experienced by LGBTI persons,
- Understand the barriers to access service that are unique to the LGBT community in relation to domestic violence and family violence,
- Provide guidance on handling of cases using relevant laws, medical, and psycho-social needs of victims-survivors as mandated in Quezon City\(^1\) by creating a safe and healthy environment for LGBTI sexual assault and battered victims and learn how to best assist with their needs,
- Identify ways to increase awareness and outreach to LGBT victims of sexual and domestic violence in your community, and to
- Provide skills for effective prevention, documentation, investigation, and monitoring of LGBTI domestic violence and family violence in an effort to eliminate discrimination and abuse against LGBTI persons.

This protocol was disseminated in Quezon City. Recognizing state party obligations and in line with the Quezon City enacted its discrimination ordinance known as the “Quezon City Gender-Fair Ordinance”
(Ordinance no. SP-2357)² to actively work for the elimination of all forms of discrimination and uphold the rights to equality, dignity, and full respect of human rights of LGBTI persons. under the said ordinance, the Barangay Violence Against Women and Children (VAWC) desks shall handle SOGIE concerns.

Quezon City also enacted its amended “Gender and Development Code”³ which states that the BPSOs should undergo training on gender-based violence. While there have been workshops and trainings provided to Gender and Development (GAD) Focal Persons focusing on gender-based violence that is inclusive about LGBTI persons, there has been no specific policy nor protocol to equip all Barangay officials and GAD personnel how to handle cases involving LGBTI persons in the community.
BACKGROUND/RATIONALE

Negative stereotypes and prejudice in society towards LGBTI persons trigger intense hatred, which can be felt by their own families or even their intimate partners. Homophobia, biphobia and transphobia motivate violent crimes against LGBTI persons. When seeking intervention services and justice, LGBTI persons also face stigma and discrimination.

All human beings are born free and equal. The basic human rights of everyone regardless of sexual orientation, gender identity and expression (SOGIE) must be upheld. LGBTI persons enjoy the same rights to equality and non-discrimination as all Filipino citizens; thus, our laws, policies and practices should ensure their right to equality and non-discrimination are protected.

The rights of LGBTI persons to equality and non-discrimination are recognized in United Nations international human rights treaties that the Philippines has ratified such as the International Covenant on Economic, Social and Cultural Rights (ICESCR), International Convention on Civil and Political Rights (ICCPR), Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), Convention on the Elimination of All Forms of Racial Discrimination (CERD), Convention Against Torture (CAT), Convention on the Rights of the Child (CRC) and Convention on the Rights of Persons with Disabilities (CRPD). As a state party to these treaties, the Philippines have corresponding state obligations under such treaties to enact laws and implement programs.

The Magna Carta of Women (RA 9710 or MCW) incorporates Article 1 of CEDAW defining discrimination against women as “any distinction, exclusion or restriction which has the effect or purpose of impairing or nullifying the recognition, enjoyment or exercise by women, irrespective of their marital status, on a basis of equality of men and women, of human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other field” and specifically recognizes diverse sexual orientation and intimate relationships.
PROTOCOL TO ADDRESS DOMESTIC VIOLENCE AND FAMILY VIOLENCE EXPERIENCED BY LESBIAN, GAY, BISEXUAL, TRANSGENDER, AND INTERSEX (LGBTI) PERSONS IN THE PHILIPPINES
HUMAN RIGHTS, INTERNATIONAL LAW AND THE PHILIPPINE CONSTITUTION

ALL HUMAN BEINGS ARE BORN FREE AND EQUAL because they have human rights. HUMAN RIGHTS encompasses all people regardless of sex, race, gender, sexual orientation, gender identity, religion and beliefs.

The Philippines signed the United Nation’s Universal Declaration of Human Rights (UDHR), which states that “all human beings are born free and equal in dignity and rights” and “every person is entitled to all the rights and freedoms… without distinction of any kind, such as race, color, sex, language, religion, political or other opinion, national or social origin, property, birth or other status.”

According to the UDHR and The Vienna Declaration and Program of Action in 1993, Human Rights are characterized by the following:

- **INDIVISIBLE/INTERDEPENDENT** - human rights cannot be divided from other rights; it is interlinked
- **UNIVERSAL** - human rights are for every human being.
- **INHERENT** - ALL human beings are born with human rights.
- **INALIENABLE** - human rights are inseparable from a person.
Upon signing, the Philippines become a state party to these UN treaties. This means that the Philippines has the following obligations to:

- **To respect** human rights. This requires the government to abstain or refrain from denying or obstructing the rights of LGBTIs or not to violate LGBTI rights.

- **To protect** human rights. This requires the government to take steps to prevent violations and impose sanctions for violations, and

- **To fulfill** human rights. This requires the government to take appropriate legislative, judicial, administrative, budgetary, economic, and other measures to the maximum extent of their available resources to ensure that LGBTIs realize their rights.

**Article 2 of the International Covenant on Civil and Political Rights (ICCPR)** states that “Each State Party to the present Covenant undertakes to respect and to ensure to all individuals within its territory and subject to its jurisdiction the rights recognized in the present Covenant, without distinction of any kind, such as race, color, sex, language, religion, political or other opinion, national or social origin, property, birth or other status.”

**Article 2 of the International Covenant on Economic, Social and Cultural Rights (ICESCR)** says that “The States Parties to the present Covenant undertake to guarantee that the rights enunciated in the present Covenant will be exercised without discrimination of any kind as to race, color, sex, language, religion, political or other opinion, national or social origin, property, birth or other status.”

In 2007, a group of human rights experts drafted the **Yogyakarta Principles on the Application of Human Rights Law in Relation to Sexual Orientation and Gender Identity**. The Yogyakarta Principles identifies obligation of States to respect, protect, and fulfill the human rights of all persons regardless of their sexual orientation or gender identity.
STIGMA, STEREOTYPES, PREJUDICE & DISCRIMINATION

To be an effective service provider to LGBTI persons, it is important to identify the barriers that exist that prevent effective engagement with LGBTI persons and the issues they face in society.

In every community there are roles set as a guide on how each person is expected to act, behave, think and interact in the community. The problem with roles is that it limits what we can and cannot do; it becomes the only set of roles and functions, and if you fail to act on the role assigned to you, then you will be excluded, treated unfairly or be denied respect. These social roles includes what is expected from each person based on their sex, thought of as gender roles. They can be influenced by religion, laws and traditions.

How we treat people are based on the roles constructed by society and how people conform or do not conform to those roles. The diagram below shows how we react when people do not conform to the roles expected of them.

Because of their sexual orientation, gender identity, and gender expression, LGBTI persons experience discrimination because of stigmatization and negative stereotypes because they do not conform to roles

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**STEREOTYPE** + **STIGMA** = **PREJUDICE** = **DISCRIMINATION**

**EXAMPLE:**
You heard your family say that gay men are pedophiles

**STEREOTYPES** are descriptions and traits we automatically THINK of and associate with a person or group of people.

Stereotypes are from experience and information from one's religion, culture, and traditions that is shared by families, communities, parents, teachers, peers, and mass media.

**STIGMA** is a negative label we associate with a person or a group of people and relies on what is acceptable or not in society.

**PREJUDICE** is a negative ATTITUDE and FEELING when we judge using stereotypes and stigmatize individuals or groups even if there are information that proves the stereotype and stigma are incorrect.

**DISCRIMINATION** simply put, is when you belittle, negatively judge, and negatively treat a person or a group of person.

Discrimination also happens when you doubt the skills, intelligence, principles, values, and morals particularly when you rely on negative stereotypes of a person, a group of people, or even a sector.
expected from them by society on how they should look, behave, act, and who they should love and have relationships with. LGBTI persons live become more difficult when they face abuse, discrimination and violence from their families and loved ones. The diagram below shows how religion, laws and traditions negatively influence state and non-state actors in regulating sexualities of all people that results to discrimination, violence and abuse of LGBTI persons.

**Homophobia, Transphobia, Biphobia**
- Discrimination, abuse, violence of LGBTI persons by exclusion and denial of service and access to justice.

**Regulated sexualities**
- LGBTI persons forced to be heterosexuals
- LGBTI persons excluded in laws & programs
- LGBTI persons as 2nd class citizens
- LGBTI persons are considered abnormal and are forced to change their sexual orientation, gender identity, and gender expression (SOGIE)

**STATE ACTORS**
- Government, Police, Government agencies

**NON-STATE**
- Family, Media, Schools, Religion, Workplace, Society

**Religion**
- Prejudice treatment to LGBTI persons
- LGBTI persons as immoral people

**Laws**
- No laws protecting LGBTI persons
- Laws used to abuse LGBTI persons

**Tradition & Culture**
- LGBTI persons tolerated but with conditions
- LGBTI people seen as sick people
SEX
Refers to a person’s biological status and is typically categorized as male, female, or intersex.

INTERSEX PEOPLE (formerly called hermaphrodite)
Intersex people are born with sex characteristics (including genitals, gonads and chromosome patterns) that do not fit typical binary notions of male or female bodies.

Intersex people may have one or more of the following characteristics:
1. The male and female organs do not closely resemble the typical male or female organ,
2. Both male and female organs are present,
3. Can look female but has a male sex organ or can look male but has a female sex organ, or
4. Females have XX chromosomes, males have XY chromosomes while intersex persons may have a combination of both; XXY, YYX, XYX, etc...

Due to social constructs that mandate only two sexes, male and female, and due to pressure on parents to have their intersex children conform to either male or female, many intersex babies are forced to go through irreversible, and often unnecessary, operations, without their own consent, to be classified as either male or female. Intersex activists assert that they should be the one to decide when they are old enough to make an informed decision if they will undergo surgery or not.

GENDER
These are set of attitudes, feelings, and behaviors that is associated with a person’s biological sex. Behavior that is compatible with cultural expectations is referred to as gender-normative; and behaviors viewed as incompatible with social expectations constitute gender non-conformity.

GENDER ROLE
Gender roles are traditional behavioral expectations to men and women defined and dictated by the culture and traditions of a society at a given time and space.

Traditionally, if you are born male, society expects you to act, look, and behave masculine and if you are born female, society requires you to act, look, and behave feminine.

GENDER EXPRESSION
All persons express their gender role and gender identity as characterized by manners of clothing, behavior, communication patterns, and inclinations. Any person who does not conform to the gender role and gender expression dictated by society are abused and discriminated against.
GENDER IDENTITY
Refers to the internal sense of whether one is male, female. A person’s gender identity is personal decision of a person innermost sense of one’s body and other expressions of gender, including dress, speech and mannerisms.9

A person can identify as male, female, transgender, or gender-binary, that may or may not be consistent with socially prescribed gender roles.

TRANSGENDER PERSON
Is someone whose gender identity, behavior or expression differs from society’s expectations of masculinity and femininity. A transgender person could be, for example, someone who is biologically male but identifies and expresses themself as a female.

Transgender persons express their gender in various ways:
• Some medically or surgically change their body to affirm their gender identity.
• Some may or may not make changes to their appearance.
• Some may want to change their name at birth.
• The way a transgender person chooses to express themself is personal to each person; there is no one way to be transgender.
• A transgender person might consider themselves straight, gay, lesbian, bisexual, neither, other, etc.
**Transsexual** persons typically experience discomfort with the body they have and would often seek to modify their body through hormones and/or surgical procedures in order to bring their body closer to their gender identity.

**Gender Transition** (formerly called sex reassignment, sex change is undergoing hormone therapy and/or surgery in order to live full-time in the gender that corresponds with one’s gender identity.

**Gender Dysphoria** is the feeling of anguish and anxiety that arises from the mismatch between a transgender person’s physical sex and their gender identity, and from parental and societal pressure to conform to gender norms.

**SEXUAL ORIENTATION**

Refers to the direction of one’s romantic, emotional, physical, sexual, or spiritual attraction to another person. A person’s sexual orientation can either be heterosexual, homosexual, or bisexual.

**Heterosexual sexual orientation**

Means that your primary romantic, emotional, physical and sexual attraction and connection are with someone of the **opposite sex**.

**Bisexual sexual orientation**

Means that your primary romantic, emotional, physical and sexual attraction and connections are towards people of both sexes.

**Homosexual sexual orientation**

Means that your primary romantic, emotional, physical and sexual attraction and connection are with someone of the same sex.

**SEXUAL BEHAVIOR** – Refers to how a person sexually express one’s self with another person.  
**Heterosexual behavior** – A person who sexually express one’s self with the opposite sex  
**Bisexual behavior** – A person who sexually express one’s self with males or females.  
**Homosexual behavior** – A person who sexually express one’s self with the same sex.
**Sexual Orientation is different from Sexual Behavior**

1. Generally, a person’s sexual orientation also is the same with the person’s sexual behavior.  
   **Example:** A lesbian’s sexual behavior will be directed towards another woman.

2. A person does not automatically express their sexual orientation in their sexual behaviors.  
   **Example:** A gay man decided to marry a woman and have children would exclusively engage only in heterosexual sexual behavior.

3. In some cases, a person’s sexual orientation is different with the person’s sexual behavior.  
   **Example:** heterosexual man can have a bisexual sexual behavior and are often referred to as men having sex with men (MSM). MSM is a sexual behavior and not a gender identity nor a sexual orientation and is used by health professionals in relation to HIV/AIDS prevention.

4. Gender identity is totally independent of one’s sexual orientation and sexual behavior.  
   **Example:** A transgender woman can be lesbian with a bisexual sexual behavior

**DISCRIMINATION BASED ON SOGIE**

Discrimination is cause by many factors such as patriarchy and heterosexism that influence traditions, religion, policies, ideas, practices, and laws. Patriarchy causes women to be seen as less equal than men, and heterosexism denotes that people who are not heterosexual are less equal than those who are. Discrimination is manifested through homophobia, biphobia, and transphobia.

**Homophobia** – Feeling of fear, hatred, intolerance, and non-acceptance towards lesbians and gays.

**Biphobia** – Feeling of fear, hatred, intolerance, and non-acceptance of bisexual men and women.

**Transphobia** – Feeling of fear, hatred, intolerance, and non-acceptance of transgender men and women.

**Heterosexism** – this is the belief that only heterosexuals are the only normal sexual orientation and assumes that LGBTI persons would want and need change to be heterosexuals. Heterosexual words can discriminate against LGBTI persons even if there is no intention to hurt an LGBTI person.

**Example of heterosexism:**
- When we think LGBTI persons are not normal and can be ‘cured’ to be heterosexuals.
- We assume in a lesbian or gay relationship that one partner is the male and the other is the female.
- When asking for the girlfriend’s name of a male person or the boyfriend’s name of a female person.
DOMESTIC VIOLENCE AND FAMILY VIOLENCE EXPERIENCED BY LGBTI PERSONS

GENDER-BASED VIOLENCE (GBV) is defined under the CEDAW as “violence, which is directed against a woman because she is a woman or which affects women disproportionately.” In this Protocol, GBV is defined to cover LGBTI persons.

DOMESTIC VIOLENCE, partner abuse, intimate partner abuse, or battering happens when an intimate partner, person you are dating, or a former intimate partner becomes abusive, controlling & violent in a homosexual, heterosexual or bisexual relationship.

FAMILY VIOLENCE is also a kind of domestic violence that occurs between family members such as parents, siblings, relatives, or across generations, and friends living together under the same roof. Perpetrators can use homophobia, biphobia, transphobia, heterosexism HIV-related stigma and other tactics against the victim-survivor as a form of abuse.

LAYERS OF IDENTITY – A person’s race, ethnicity, socio-economic status, citizenship, disability, age, health and HIV status, sexual orientation, gender identity, and gender expression, can be factors that aggravates and increase the forms and/or occurrence of violence experienced and at the same time can also create obstacles in accessing safety, support, and services.

The situation of an old lesbian in a wheelchair for example should be dealt in such a way that her being a lesbian, an older person, and her disability must be addressed not as distinct exclusive issue but as intersecting factors that may aggravate her chance to get comprehensive service and assistance from the Barangay.

FORMS OF ABUSE EXPERIENCED BY LGBTI PERSONS
Forms of violence include 1) physical, 2) sexual, 3) emotional and 4) financial abuse. A person can be a victim of one or more forms of violence. Usually more than 1 form of violence occurs in one incident and it us up to the service provider to identify the forms of violence experienced by the victim-survivor. Additional information on specific kinds of abuse LGBTI persons experience is added in the list in each forms of violence.
1. **PHYSICAL ABUSE** – The intentional *use of force* against a person without that person’s consent causing physical pain, injury, disability, or death because of the victim-survivor’s SOGIE.

**ADDITIONAL ABUSE OF LGBTI PERSONS:**
- Withholding hormones for gender transition for transgender persons.
- Refusing a transgender partner to rest or heal from a surgery.
- Being affectionate in public in places where it is not LGBTI-friendly to scare partner.

**ADDITIONAL ABUSE OF Persons w/ disability (PWD):**
- Withholding food, water, heat, medication or support services
- Use of chemical or physical restraints
- Destroying, altering or withholding disability-related equipment
- Rough handling when undertaking care work

**FORMS OF PHYSICAL ABUSE**
- Pushing
- Shoving
- Stabbing, cutting
- Hitting, biting, slapping, kicking,
- Hair-pulling
- Shooting
- Killing someone
- Physical assault
- Burning
- Strangling or choking
- Throwing object at someone
- Harassment or intimidation
- Holding someone down for someone else to assault
- Threat to destroy/
- destruction of the person’s belonging

2. **SEXUAL** – includes any *unwanted sexual behavior*. Examples include:

**ADDITIONAL ABUSE OF LGBTI PERSONS:**
- Forced unsafe sex or other sexual acts without the partner’s consent.
- Forcing, dictating and controlling sexual act of partner using gender roles.
- Not respecting words used by their partner to describe parts of their body.
- Believing women cannot rape another woman.
- Believing men cannot be raped or experience sexual assault like women.
- Enforcing stereotypes to control how to engage in sexual acts, e.g. “lesbians have sex this way”

**ADDITIONAL ABUSE OF Persons with disability (PWD)**
- Inappropriate touching during care giving
- Being left naked or exposed or having a perpetrator expose their genitals

**FORMS OF SEXUAL ABUSE**
- Rape, Incest
- Forced to perform sexual acts, contact, activity & touching
- Sexual acts that causes pain and humiliation
- Exposure to HIV and other sexually transmitted infections Forced or coerced sterilization
- Being watched while undressing
- Deny the person control over reproductive processes
- Sexual assault under the pretense of ‘sex education’
- Causing injury to the person’s sexual organs
- Demanding sex
3. **FINANCIAL** – Also called economic abuse, this happens when someone uses money or properties to exploit, control, and make someone dependent because of a person’s SOGIE.

**ADDITIONAL ABUSE OF LGBTI PERSONS:**
- Using economic status to dictate the roles in the relationship, e.g. “I earn more so I make the decision in the relationship”
- Threaten to withdraw access to parents or guardians, negatively affecting source of income, education, shelter, or inheritance.
- Threaten to withdraw support from an employer, which may mean loss of employment.

**FORMS OF FINANCIAL ABUSE:**
- Taking money or property without consent
- Controlling money or investments
- Controlling all finances, spending, and decisions;
- Preventing someone to earn
- Pressuring someone to sign or change legal documents
- Withholding or limiting money/financial support
- Forcing someone to sell or buy something
- Forcing someone to beg for money
- Forcing someone to engage in sex work or prostitution

**ADDITIONAL ABUSE OF PERSONS W/ DISABILITY (PWD):**
- Refusing to pay for essential medication or disability-related equipment
- Misappropriation of social security payments and other benefits and concessions

4. **EMOTIONAL** – often called psychological abuse, this includes the willful use of emotional anguish using words or actions to control, humiliate, degrade, frighten, isolate, demean, and intimidate a person that takes away their self-respect because of the person’s SOGIE. Examples include:

**ADDITIONAL ABUSE OF LGBTI PERSONS:**
- Threat to expose the HIV-positive status of partner.
- Threat to out or revealing someone as LGBTI.
  - Being “outed” can may mean losing a sense of security, safety, home, employment, children, family, friends, and education.
- Threat to expose the relationship.
- Blaming a person to be “too out,” “too gay,” or too loud.
- Control a person not to look like an LGBTI person.
- Demand the partner to support him/her financially.
- Not calling the partner their preferred chosen name.
- Telling a transgender partner that she is not a “real” woman or man,
- Telling an LGBTI partner that no one else would love and want them.

**ADDITIONAL ABUSE OF Persons with disability (PWD):**
- Institutionalization or the withdrawal of care/supports.
- Denying or trivializing a person’s disability.
FORMS OF EMOTIONAL ABUSE
• Blackmail, forced alcoholism
• Use cold treatment, silence or withdrawal
• Making the victim feel stupid, worthless, or insane
• Putting down or making fun of the victim
• Preventing someone from practicing their culture, traditions, faith or religion.
• Destroying the belongings or hurting pets or threatening to do so.
• Bullying, intimidation or humiliation, whether actual or using the internet.
• Intentionally neglecting the needs or failing to prevent physical harm
• Verbal abuse includes putdown, name-calling, insults, humiliation, cursing, constant yelling or criticisms.
• Threats include threatening to harm the victim and victim’s children and family members, friends, pets and threatening to commit suicide or kill partner.

CONTROLLING BEHAVIOR MANIFESTED BY:
• Controlling when the victim can leave the house.
• Controlling the victim’s clothing, place where can go, and the time to be home.
• Controlling whether the victim can work or do an activity.
• Controlling the victim’s access to the phone and/or monitors calls.
• Controlling the victim’s use of vehicle, home, and other property.
• Controlling the victim’s use of safe sex and birth control means.
• Controlling whom the victim can spend time with including spending time with family and friends & what the victim can talk about.
• Insisting on knowing where partner is at all times

CYCLE OF VIOLENCE IN INTIMATE PARTNER VIOLENCE
The cycle of violence shows the shortening of the cycle of violence in intimate partner relationships. It shows that from the initial 6 phases of a cycle (1), the cycle shorten in to 5 phases (2) until there will be only 3 phases (3).
POWER AND CONTROL WHEEL\textsuperscript{13}

This chart uses the wheel to show the relationship of physical abuse to other forms of abuse. The circle shows that the abuse does not happen all the time but often occurs in cyclical fashion.

CHARACTERISTICS OF PERPETRATORS OF INTIMATE PARTNER VIOLENCE/ABUSE:

Based from experience of service providers\textsuperscript{14} in the Philippines, the following are characteristics typically observed from perpetrators of violence and abuse:

- Internalization of traditional male role
- Low self-esteem
- Insecure
- Immature
- Self-righteous
- Extreme jealousy or shows anger when partner talks to others
- Frequently accuses partner of being unfaithful
- Possessiveness
- Prone to violence (may also have been abused in the past); violence as a learned behavior because of being raised in a violent and dysfunctional family
- Prone to drug and alcohol abuse
- Prone to gambling
- Difficulty in holding on to a job
RECOGNIZING ABUSIVE BEHAVIOR & PSYCHOLOGICAL DISORDERS OF ABUSERS

While not all abuser have psychological or mental health illnesses, service providers must seek assistance and refer to psychiatrist and psychologist perpetrators that show traits of specific personality disorders listed below.

ABUSIVE BEHAVIOR DUE TO MENTAL/PSYCHIATRIC DISORDERS
Service providers must recognize controlling, abusive, violent behaviors and personality disorders in intimate partner violence. The list of characteristics of perpetrators are manifestations of personality disorders such as Narcissistic, Dissocial/Anti-Social, and Borderline Personality Disorders, among others.

These mental disorders negatively impact both personal and interpersonal relationships over a prolonged period of time. Personality disorders demonstrate a pattern of pathological traits across various situations and are not solely due to the direct physiological effects of a substance (e.g., a drug of abuse, medication) or a general medical condition (e.g., severe head trauma). Combination of personality disorders may lead to persistent abuses, making the abuser dangerous and prone to criminal behavior.

A) NARCISSISTIC PERSONALITY DISORDER
The Narcissistic Personality Disorder is a when a person has an exaggerated sense of self-importance, an intense need for admiration, a sense of entitlement, and a lack of empathy for others.  

Traits of a Narcissistic Person
- Seeks attention and admiration or excessively attempts to attract and be the focus of the attention.
- Impaired ability to recognize the feelings and needs of others and their relationships exist to serve personal gain,
- Conceited, boastful or pretentious,
- When denied certain entitlements, they may become impatient or angry, and
- Feeling of grandiosity or the feelings of entitlement, self-centeredness; firmly holding on to the belief that everyone is inferior towards one’s self. To feel better, they may react with rage or contempt and try to belittle others to make themselves appear superior.

B) ANTISOCIAL PERSONALITY DISORDER
Persons who are Sociopathic or Psychopathic consistently shows no regard for right and wrong and ignores the rights and feelings of others, and tends to antagonize, manipulate or treat others harshly or with callous indifference.

Traits of a Sociopath or Psychopath
- Cannot fulfill responsibilities related to family, work or school and fail to honor financial and other obligations or commitments; lack of respect for and lack of follow through on agreements and promises,
- Gross and persistent attitude of irresponsibility and disregard for social norms, rules and obligations, and often violate the law, and the rights of others without remorse or guilt,
- Incapacity to maintain enduring relationships,
- Very low tolerance to frustration and a low threshold for discharge of aggression, including violence,
- Incapacity to experience guilt or to profit from experience, particularly punishment,
- Marked proneness to blame others, or to offer plausible rationalizations, for the behavior that has brought the patient into conflict with society, and
- Shows antagonism by being manipulative, dishonest, lack of concern for feelings or problems of others; lack of guilt or remorse about the negative or harmful effects of one's actions on others; aggression; sadism hostility, significant irritability, agitation, aggression or violence.

C) BORDERLINE PERSONALITY DISORDER (BPD) 21
Also known as emotionally unstable personality disorder, this is a long-term pattern of abnormal behavior characterized by unstable relationships with other people, unstable sense of self, and unstable emotions, which often result in impulsive actions and unstable relationships.22

Traits of a person with BPD:
- Pattern of intense and unstable relationships with family, friends, and loved ones, often swinging from extreme closeness and love (idealization) to extreme dislike or anger (devaluation),
- Distorted and unstable self-image or sense of self,
- Impulsive and often dangerous behaviors, such as spending sprees, unsafe sex, substance abuse, reckless driving, and binge eating,
- Recurring suicidal behaviors or threats or self-harming behavior, such as cutting,
- Inappropriate, intense anger or problems controlling anger, and
- Feels angry and distressed over minor separations—such as vacations, business trips, or sudden changes of plans—from people to whom they feel close.

VIOLENCE AND ABUSE AS A LEARNED BEHAVIOR
Abusive people learn their abusive behavior from their abusive, violent and dysfunctional families where parental conflict is the norm and where parenting is often harsh and inconsistent.23 The learned behavior or propensity to abuse is evident from previous acts showing their pattern of abusive and violent behavior. They are violent not only to their partners but to other people as well. Without proper intervention, this becomes a cycle of generational violence and abuse. Thus, children who are victims of domestic and family violence may end up being perpetrators of abuse in the future because of the learned behavior of being violent and abusive.

Suppression in expressing or disclosing one's SOGIE can also lead someone to be an abuser because of deep resentment and internalized homophobia, biphobia, and transphobia.

BATTERER MENTALITY24
A family member or a partner can have a batterer mentality when:
- The abusive intimate partner or family member blames their victim for their abusive behavior,
- The perpetrator of violence justifies their abusive behavior instead of taking accountability for their actions.
- The perpetrators always find fault on their partners and have a sense of entitlement.
- They believe that they have the right to empower themselves by disempowering others.
- They expect the family member or their partner to respect their entitlement by cooperating, by complying, by respecting and by being subservient to all their commands.

The abuser feels rage if you do not comply validating their violence as a result of the victim's non-cooperation.
IMPACT OF DOMESTIC VIOLENCE AND FAMILY VIOLENCE TO LGBTI PERSONS

WHY ABUSE AND VIOLENCE CONTINUE TO HAPPEN

An Invisible topic in the LGBTI community
Abuse and violence happens because LGBTI victims have a difficult time recognizing abuse because of the lack of acknowledgment, information, education, and community discussion around same-sex domestic violence and sexual assault. Many victims do not have the tools to recognize their relationships as abusive. Abusers use their partner’s sexual orientation, gender identity, and gender expression as reasons for the abuse.

Right of Family to Punish
Growing up in an abusive family, LGBTI family members are made to believe that they are “abnormal,” and that they do not deserve the same treatment their heterosexual family members deserve, and that their family has the right to “punish” them for being an LGBTI person. Oftentimes, they believe that it is their family’s right to physically punish them and to treat them as inferior.

From Self
Being closeted is a major factor that prevents LGBTI persons from seeking help due to self-blame of due to internalized discrimination, low self-esteem and fear of disclosure. Being closeted prevents LGBTI persons from turning to friends, family, faith community or employers for support and intervention.

Access to support Services
Because of homophobia, biphobia, transphobia and heterosexism that exist in society, LGBTI persons have a harder time to access support and intervention.

- Negative past experience in seeking help prevents LGBTI persons from seeking help such as:
  - Discrimination and insensitive communication and behavior by service providers.
  - Domestic violence service programs are not supportive and accepting of LGBTI relationships.
- Invisibility of LGBTI partner and family abuse in most domestic and family violence materials.
- Lack of skills of service providers in screening who is the abuser and who is the survivor.
- Disclosure or outing of LGBTI survivors by service providers to other survivors or other service providers without the consent of the individuals.
WHAT PREVENTS THE LGBT VICTIM-SURVIVOR FROM LEAVING?xxvi

IMPACT OF ABUSE AND VIOLENCE ON THE VICTIM-SURVIVOR

- Many of the victim-survivors may be disempowered, fearful, and may be suffering from trauma or depression.
- For victim-survivors of intimate partner violence, they may additionally have no job and/or have no control of their conjugal funds or business.
- Blaming the victim-survivor: The victim-survivor often faces both blatant and subtle blame and disbelief for the abuse that she/he is experiencing.
- Being a victim of abuse and violence can lead someone to be an abuser.

ASSESSMENT OF SITUATION, DANGER, AND TRAUMA

- Some victim-survivors may be hospitalized, killed or may attempt to commit suicide.
- Service providers must recognize the attendant danger and threat to life and limb of the victim-survivor and must take immediate and effective intervention

SUICIDE AMONG LGBTI ADOLESCENTS

SOGIE-related family violence, discrimination, stigma, internalized homophobia, biphobia, and transphobia, and lack of support system may lead the victim to commit suicide. Suicide rates remain high for the LGBTI adolescent population.xxxvii

LIMITED OPPORTUNITIES

As LGBTI persons experience domestic and family violence, sometimes with limited access to justice, they further experience discrimination in schools, communities, workplace thereby limiting their educational, employment and economic opportunities and even their rights to political participation, among others.
ROLE OF SERVICE PROVIDERS
The role of service provider is to guide, assist and support the victim to make informed choices and decisions so that the victim-survivor may decide on whether to leave, seek counseling, file a complaint, and/or to endure the abuses.
Barangay service providers are not allowed to settle VAWC cases but are allowed to intervene. Intervention provides an opportunity to
- Explain the rights of the victim-survivor,
- Provide available remedies, and
- Make referrals and assist the victim-survivor to fight for her/his rights

INTERVENTION GUIDELINES FOR SERVICE PROVIDERS
Many LGBTI victims will be ashamed, cautious, hesitant and fearful to open up especially about the sexual, financial and emotional abuse they have experienced or are still experiencing. Even when physical abuse is evident, there is denial. Some LGBTI victims do not even know they are victims.

As service providers, the information about, and the behavior and attitude towards LGBTI victims are the factors that will determine the success in providing comprehensive, sensitive and appropriate interventions and support.

To properly carry out the intervention guidelines to properly addressing issues of domestic and family abuse experienced by LGBTI persons, the GAD Coordinator should learn to adapt sensitive and appropriate communication skills when engaging with LGBTI persons. The following provides an example of questions and issues that should be addressed with the LGBTI victim-survivor.

1. SEEK INFORMED CONSENT
   - Before starting any process of investigation with the victim, witness and perpetrator, it is an ethical obligation to obtain an informed consent to get permission for any interview, examination, photographs, audio and video recording, referral to any support services, and any information and contact details shared to other people.
   - The informed consent ensures that the victim, witness and perpetrator has acknowledged and is willing to participate in the justice process. With the informed consent we secure the information may be used in legal proceedings since we remove any doubt that the information obtained was provided using coercion, blackmail or false assurance. This could sound like the following statement:
     - “Before we start any investigation, we request you to sign an informed consent that states that you voluntarily and willingly will provide true information to this case and have agreed to be examined, to be photographed, to be audio or video recorded and was not forced, coerced or pressured to do so.”
2. SEEK INFORMATION OF THE LGBTI VICTIM AND PERPETRATOR
   For LGBTI persons, use of their preferred name acknowledges their sexual orientation, gender identity, and gender expression (SOGIE) and secures the person of being treated with respect and sensitivity.
   o Asking about name and pronouns to be used for LGBTI victim-survivor and perpetrator
     ▪ “What is your name in your birth certificate?”
     ▪ “What name do you use at present?” or “How do you want to me call you?”
     ▪ “What pronouns do you want us to use to refer to you – he or she / him or her/ they or them?”
     ▪ “What is the name in the birth certificate of your partner?”
     ▪ “What is the name being used by your partner at present?”

3. SEEK INFORMATION ABOUT THE SEXUAL ORIENTATION, GENDER IDENTITY AND GENDER EXPRESSION OF THE VICTIM & ABUSER
   o Questions on sexual orientation
     o “Who are you attracted to – male, female, both male and female, or none?”

   o Questions on gender identity
     o “How do you see yourself? Do you see yourself as a man, woman or transgender?”
     o “How does your partner identify? – man, woman or transgender?”

   o Questions on gender expression (SOGIE)
     o “How do you express yourself, are you feminine, masculine, both, or none?”

4. ASSESSING THE RELATIONSHIPS
   o Identify the kind of relationship they have at present.
     ▪ “Are you currently dating, sexually active, in a relationship(s)?
     ▪ “How long have you been in the relationship?”
     ▪ “If living together, what is the set-up of your relationship? Are both of you working?”

5. DISCLOSURE, ACCEPTANCE AND SUPPORT SOURCE FOR LGBTI VICTIM
   o Ask about level of being out and the level of acceptance they have from their environment.
     ▪ “Who are the people you are out to regarding your sexual orientation / gender identity? Family? Friends? Work? None?”
     ▪ “What restrict you from disclosing your sexual orientation or gender identity?
     ▪ “Does your family, friends, partner accept your sexual orientation / gender identity?” if yes, how?
     ▪ “If your family, friends, partner does not accept your sexual orientation / gender identity, how do they show their opposition?”

   o Ask about level of support.
     ▪ “What kind of support do you get from your family and relatives? Friends? Partner?”

6. DOCUMENTING EXISTENCE OF AND FORMS OF VIOLENCE
   o Using considerate and sensitive ways of asking questions. Document and record all information from each kinds of abuse experienced by the victim. A revised intake form is supplied at the
annex part of the protocol that provides a list of appropriate and sensitive questions to be used when dealing with LGBTI persons. This should include:

1. Details of the place, date, and time when the abuse took place,
2. A detailed description of what took place, and
3. The effect of the violence to the victim.

a) Note down the following observations of abuse: Following are some signs of abuse:
   ▪ **Physical** – bruises, limping, marks, burns in different stages of healing, using clothing to conceal marks like turtlenecks, long sleeved shirts, jacket, sunglasses.
   ▪ **Emotional** – anxiety, alcohol and drug use, depression, panic attacks, suicidal feelings and failed attempts.
   ▪ **Behavior** – detached, ashamed, reluctant to reply, no personal views and would ask about other people’s views, evasive, blames self, or fearful.

b) Use open-ended questions: Ask LGBTI victims using direct and open-ended questions about the violence that is answerable by more than a yes or no answer. Appropriate and sensitive questions are incorporated in the revised intake form at the annex. For example, ask questions about the following issues:
   ▪ **Questions about experience of discrimination** are asked to identify the degree, severity and length of experience of discrimination experienced from perpetrator/s.
   ▪ **Questions about relationship** with family members, relatives, siblings, and partner.
   ▪ **Questions on finances** about how money is handled by the victim and by family members, relatives, siblings, and partner are provided at the annex; and
   ▪ **Questions on emotional & physical abuse & safety** are asked to the victim in relation to one’s family members, relatives, siblings, and partner are provided at the annex.

7. **ACQUIRE INFORMATION AND ASSESSES THE NEEDS OF THE VICTIM**

Identify the degree of the threat to the victim’s physical, psychological and emotional well-being, and the increased risk of danger because the victim sought help. The following tasks should be considered in assessing the needs of the victim:

a. **Identify the immediate safety needs of the victim.**
   ▪ Know if the victim is in immediate danger
   ▪ Know where the perpetrator is located at present.
   ▪ Know where the victim will be housed or relocated.

b. **Identify the pattern and history of the abuse.**
   ▪ Know the forms of abuses, duration of each and immediate effect of each abuse.
   ▪ Identify the effect of the abuse to the victim’s physical and mental health of the victim.

c. **Identify the access to support and services of the victim at present.**
   ▪ List down all support or assistance the victim has availed of in the past and present, including legal representation.

d. **Identify the future safety & security risks of the victim.**
   ▪ Assess the future risk of injury, harm and even death of the victim due to domestic violence.
   ▪ Ask the victim about the frequency and severity of the violence experienced from abuser especially if the abuse is getting worse.
Ask the victim about suicidal thoughts.

8. **CONVEY THE FOLLOWING MESSAGES TO THE VICTIM-SURVIVOR**
   It is important to convey the following to the victim-survivor that:
   - Whatever the crisis or situation, no one has the right to control, hurt, and abuse anyone,
   - They deserve to be respected and to have a life that is free from abuses,
   - Often perpetrators are unable to change their pattern of abusive behavior because they are already suffering from personality disorders for a prolonged period of time and have failed to recognize their abusive behavior or personality disorder, hence, they are unwilling to undergo professional psychological or psychiatric help,
   - Severing ties with the abuser can help end the abuse, and
   - Precautionary measures are needed to ensure the safety of the victim-survivor.
   - It is important to seek intervention from service providers and avail of the necessary administrative, civil, and criminal remedies.

9. **INTERVENE AS APPROPRIATE**
   While prioritizing the needs of the victim – your role as a service provider is to guide, support and assist the victim to make informed choices and decisions. Provide a resource of support services to the victim and recommend priority service based from the assessment of the victim and the abuse

**GUIDELINES WHEN INTERVIEWING LGBTI VICTIM-SURVIVORS**

- **Provide options** – Lesbian, bisexual, and transgender women victim-survivors will be handled by female investigators and gay men, bisexual victims with male investigators. It would be good to provide options regarding the preference of the victim on which gender service provider they would like to speak with, especially for transgender men.
- **Do not assume anything** – let the victim narrate every incident; do not assist in remembering facts about the victim’s experience and do not force the victim to remember everything.
- **Be sensitive to non-verbal cues of the victim.** If the interview causes too much distress, end the interview at a point where the victim feels relatively safe.
- **Information shared** – Some information from the victim will not be presented chronologically and this should not lessen the credibility of the victim.
- **There is no standard behavior of a victim** – some will appear angry, some clam, some frightened or distressed.
- **Conduct the interview in a respectful and attentive manner** – do not appear judgmental, disapproving or doubting of the victim with your words, and body and facial expressions.
- **Maintain a neutral but supportive disposition** by not showing or projecting shock or horror to what the victim is sharing. Reactions may affect how open or reluctant the victim will be in sharing information.
- **Sit in a way that you and the victim are eye-level** to promote a sense of being equal to the victim and not appear authoritative.
- **Never make promises** that you or your office cannot fulfill.
- **When interviewing LGBTI children or children of LGBTI parents**, prioritize the best interest of the child throughout the interview process. A child has the right to be treated with respect, dignity and compassion. Privacy and safety should be protected. Provide assistance and take preventive measures.
ASKING ABOUT THE PERSON’S NAME.

Why do you call yourself Bert. You are a girl, so I will call you Beth.

What is your name in Your birth certificate?

BE INCLUSIVE and SENSITIVE

What name do you want to be called?

Please call me Bert.

WRONG!

ASKING ABOUT A PERSON'S GENDER IDENTITY

How do you see yourself – male or female?

even if I was born a girl I always feel that I am a boy inside.

So you are a transgender man

Maybe I am a transgender man. I thought I was a lesbian.

ASKING ABOUT A PERSON’S SEXUAL ORIENTATION

Hi Chris. Since you are you the tomboy in the relationship. you are the man in the relationship, right?

BE INCLUSIVE and SENSITIVE

Hi Chris, I need to know about your sexual orientation. Who do you get attracted to – male, female or both?

WRONG!

So you are a lesbian.

I am attracted to other women
ASKING ABOUT BEING OUT AND SOURCE OF SUPPORT

SCREENING FOR VICTIMS AND ABUSERS IN DOMESTIC VIOLENCE CASES INVOLVING LGBTI PERSONS
The challenge in handling cases of domestic violence involving LGBTI persons is in identifying who is the abuser and who is the victim especially when you are faced with two women, two men, a transgender man and his partner or a transgender woman and her partner. When handling two women or two men in a relationship, how will you distinguish the abuser from the victim?

Screening is undertaken by looking at a wide range of behaviors of both partners to determine who has power and control over the other person. Screening is important because it helps the service provider identify appropriate services, referrals, and support for survivors. Be careful not to jump to conclusions based on stereotypes based on the person’s sexual orientation, gender identity, and gender expression.
AFFIRMATIVE COUNSELING AND PROVIDING PSYCHOLOGICAL FIRST TO LGBTI VICTIM-SURVIVORS OF DOMESTIC AND FAMILY VIOLENCE

I. WHY WE NEED LGBTI-INCLUSIVE PSYCHOLOGICAL FIRST AID (PFA)

DOMESTIC/FAMILY VIOLENCE AGAINST LGBTI INDIVIDUALS: COMMON MISCONCEPTIONS

- Domestic/intimate violence can take a variety of forms and can occur in all classes of society.
- Around the world, LGBTIs (adults and children) experience traumatic events like violence at the hands of partners or other family members.
- Because very little is known or discussed regarding domestic/family violence involving LGBTI persons, there are common misconceptions about it. These misconceptions, and the actual evidence-based realities of domestic/family violence against LGBTI persons, are summarized in the table below.

<table>
<thead>
<tr>
<th>MISCONCEPTION</th>
<th>FACT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Domestic violence is mainly a heterosexual issue and does not occur often in LGBTI relationships.</td>
<td>Domestic violence can affect individuals of any gender, sexual orientation, and gender identity/expression. DV actually occurs in similar rates across the general population and among people in LGBTI relationships.</td>
</tr>
<tr>
<td>Incidents of domestic violence against LGBTI persons are less severe than those against straight persons, particularly straight women.</td>
<td>The abuse experienced by LGBTI individuals can be equally damaging. LGBTI individuals may experience severe physical violence including being beaten, burned or choked.</td>
</tr>
<tr>
<td>LGBTI persons would be at less risk of experiencing violence if they behave decently.</td>
<td>The risk of experiencing violence is caused by stigma against LGBTI persons and the behaviors of perpetrators, not by the behaviors and clothing of LGBTI persons.</td>
</tr>
<tr>
<td>Psychological violence, which includes name calling, insulting, humiliating or attempting to monitor, control or threaten a person, is not as serious as physical or sexual violence.</td>
<td>Psychological violence can be an equally devastating form of abuse. In particular, threats to “out” another person's sexual orientation or gender identity as a means of control are unique to the LGBTI community.</td>
</tr>
<tr>
<td>In the context of intimate relationships, the more masculine, bigger and/or stronger partner is typically the abuser.</td>
<td>Domestic violence does not discriminate: it can impact or be perpetrated by any person regardless of their physical or personal attributes (e.g... size, gender expression or age).</td>
</tr>
<tr>
<td>It is easier for LGBTI victims to leave abusive relationships than it is for their straight and/or married counterparts.</td>
<td>Regardless of the gender identity, sexual orientation or marital status of two people in a relationship, leaving an abusive partner is often a difficult and painful process. Being in a LGBTI relationship does not diminish that pain.</td>
</tr>
</tbody>
</table>
Key take-home points:

- Misconceptions like those listed above are harmful to LGBTI persons because they cultivate a culture where survivors of violence can feel afraid to come forward for fear they will not be believed.

- No one should have to suffer in silence.

FOCUSING ON VIOLENCE AGAINST LGBTI PERSONS

- Regardless of their sexual orientation and/or gender identity and expression, violence can severely damage a person’s physical and mental health.
- In the most extreme situations, domestic/family violence can cause their death either through injuries or by suicide.
- Many victims seek help for the various health problems they suffer.
- Knowledge about the unique experiences of LGBTI individuals can help us provide help in a more effective manner that does not perpetuate stigma against them.

POSSIBLE MANIFESTATIONS OF DISTRESS AFTER EXPERIENCING VIOLENCE

- Feeling numb, in a daze and disconnected from one’s surrounding and feelings.
- Forgetting one or several important parts of the traumatic event.
- Repeated thoughts of the event and re-living what happened to them.
- Irritability, sleep difficulties, nightmares, having difficulty concentrating.
- Feeling scared and avoiding anything that reminds them of the event.
- Physical symptoms such as nausea, vomiting, racing heart, and feeling breathless.
- Children can experience bed-wetting.

IMPORTANT NOTE:

- It is not always easy to detect signs that someone has experienced domestic/family violence. If an LGBTI person reporting a case of domestic/family violence seems numb or does not show obvious distress, or cannot remember important details of the event, this does not mean that they are lying.
- Not all LGBTI survivors of domestic/family violence will show the same manifestations, so avoid making assumptions about these behaviors and changes.

SHORT-TERM AND LONG-TERM IMPLICATIONS ON MENTAL HEALTH

- These manifestations are normal responses to a traumatic event and usually last for no longer than two weeks.
- However, in some cases, these experiences continue for months (even years) after the trauma.
- If they begin to interfere with the person’s daily life, the person may have developed post-traumatic stress disorder (PTSD).
- Traumatic events can trigger other mental health problems as well, including depression, anxiety, and alcohol and drug problems.
VIOLENCE AGAINST LGBTI PERSONS AND SOCIAL JUSTICE

• As service providers, we have an ethical mandate to serve all survivors and end all forms of domestic and family violence.
• Violence against LGBTI persons is a social justice issue because it can be an attempt to “correct” those who are seen as socially inferior because of their non-conformity.
• As public servants, we must address these cases in ways that empower LGBTI persons, not in ways that will worsen the stigma against their sexual orientation and gender identity/expression.

KEY TAKE-HOME POINTS:

• LGBTI persons are at risk for experiencing domestic/family violence because of societal stigma against their sexual orientation and gender identity/expression.
• These forms of violence can have short-term manifestations in the form of changes in their behavior, feelings, and thoughts, which may not be the same for all domestic/family violence survivors.
• Domestic/family violence can also have long-term implications on the physical and mental health of LGBTI persons.
• It is important to address these forms of violence in ways that empower LGBTI persons.

SELF-AWARENESS: OUR ATTITUDES, BELIEFS, AND FEELINGS ABOUT LGBTI INDIVIDUALS

• Because we grew up in a society that stigmatizes LGBTI persons, many of us have deep-seated beliefs against LGBTI persons that we may not fully be aware of.
• These beliefs can affect the way we handle cases involving LGBTI persons.
• We can ask ourselves if we have some of these common beliefs, feelings, and actions that stem from anti-LGBTI stigma, and work on changing these.

Beliefs, feelings, and actions to watch out for:
1. Believing that being heterosexual or non-transgender is preferable
2. Experiencing discomfort when socially interacting with LGBT individuals.
3. Refusing to serve LGBTI survivors of domestic/family violence.
4. Believing that experiences of violence are caused by a person’s SOGIE rather than addressing their issues and the discrimination they may have experienced.

LGBTI-INCLUSIVE KNOWLEDGE

• It is important to understand certain experiences that are unique to LGBTI persons which may play a big role in their experience of violence.
• These include the coming out process, the experience of anti-LGBTI stigma, and diversity in the LGBTI community.
THE COMING OUT PROCESS

- **Coming out** ("pagladlad") refers to the process by which LGBTI persons disclose their sexual orientation and/or gender identity.
- The coming out process is different for each individual—some LGBTI people are out to all of their family and friends, some are out to selected people only, and some do not disclose their sexual orientation or gender identity at all.
- For many LGBTI persons, the threat of being “outed” to those they are not out to (i.e. parents, employers) can be part of their experience of violence or can make it difficult for them to leave an abusive relationship.
- **IMPORTANT:** We must respect LGBTI person’s desires for confidentiality about their SOGIE as part of their personal coming out process.

STIGMA AGAINST LGBTI PERSONS

- Many LGBTI persons experience stigma—negative attitudes and behaviors related to their SOGIE—in their families, schools, workplaces, and religious communities.
- Some LGBTI individuals may internalize this stigma and feel that there is something wrong with them—they may even believe that they deserve to be harmed or punished because of their sexual orientation or gender identity.
- Internalized stigma can make it difficult for LGBTI persons to seek help when they experience violence at the hands of a family member or partner.
- **IMPORTANT:** We must keep this context of stigma, and possible internalization of stigma, in mind when working with LGBTI survivors of violence.

DIVERSITY IN THE LGBTI POPULATION

- While most LGBTI people have shared experiences of stigma and marginalization, LGBTI persons are individuals coming from different backgrounds in terms of their class, age, disability status, religion, and so on.
- LGBTI individuals’ experiences of domestic/family violence, and the effects of these experiences on them, can be very different depending on their background and other aspects of their identity (for example, lesbian/bisexual women and girls may be vulnerable to “corrective rape”).
- **IMPORTANT:** These different aspects of an LGBTI person’s identity can affect their experience of violence and their challenges and resources in dealing with it.

The table summarizes the questions and the possible points that participants may bring up:

<table>
<thead>
<tr>
<th>COMMONLY ASKED QUESTIONS</th>
<th>POSSIBLE DISCUSSION POINTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Paano ka umiihi? (How do you pee?)</td>
<td>• Assumption that LGBTI people (especially transgender individuals) are always open to discussing private details regarding their bodies and bodily practices.</td>
</tr>
<tr>
<td></td>
<td>• May be offensive to LGBTI persons, who have the same right to privacy as everyone else does.</td>
</tr>
</tbody>
</table>
### Key take-home points:
- Our assumptions and misconceptions about LGBTI people can affect the way we interact with them, including the way we handle cases of domestic/family violence involving LGBTI individuals.
- There are ways of asking questions and interacting with LGBTI individuals that are more LGBTI-inclusive and do not rely on assumptions about their lives and experiences.

### LGBTI-INCLUSIVE PRACTICES: SIMPLE DO’S AND DON’T’S’S

<table>
<thead>
<tr>
<th>DON’T…</th>
<th>DO…</th>
</tr>
</thead>
</table>
| Ask about a person’s genitals, surgical status, how they have sex, and other personal details that are not relevant to your investigation. | Be respectful of each individual’s dignity. If you need to ask a personal question, start by informing them that this question might be sensitive and reassuring them that their answers will be kept confidential. Sample: “May kailangan akong itanong na maaaring medyo sensitibong bagay. Mahalaga lang na malaman namin ang iyong sagot dahil may kinalaman ito sa pag-handle ng kaso mo. Lahat ng isasagot mo ay mananatiling confidential at
| Impose your beliefs about someone’s SOGIE by using pronouns (i.e. he/him/his or she/her/hers), titles (i.e. Ma’am or Sir), or names (i.e. given name on birth certificate) based on what you assume their gender is. | Use LGBTI-inclusive language.  
If you are not sure about the name or pronouns preferred by the person talking to you, ask them. Once they have answered, use the pronouns and names they gave.  
Sample: “How do you want me to address you?” or “Anong gusto mong tawag sayo?” |
|---|---|
| Casually share information or “gossip” about a person’s SOGIE. | Be careful about confidentiality, disclosure, and outing. It takes trust for LGBTI persons to disclose their status to you.  
If you need to disclose details about their SOGIE to other people as part of the process of handling their case, ask for their permission beforehand.  
Sample: “Ok lang ba kung banggitin natin sa report tungkol sa kaso mo na karelasyon mo ang perpetrator nito?” |
| Give insincere compliments or “helpful” tips like “You look just like a real woman” or “Mas maganda ka pa sa tunay na babae”. These may seem like compliments, but they can make LGBTI persons feel that you are not addressing their presenting issues. | Focus on helping your client deal with their experience of violence. |
| Make assumptions about someone’s SOGIE and/or about their experience of domestic/family violence before you have given the person time to share information about their identity and their experience. | Remember that you cannot tell that someone is LGBTI, or that someone is experiencing violence in their home, just by looking at them. |
WHAT IS PSYCHOLOGICAL FIRST AID?

PSYCHOLOGICAL FIRST AID INVOLVES...
- Giving practical care and support that does not intrude
- Assessing needs and concerns
- Helping people access basic needs
- Comforting people and helping them to feel calm
- Helping people connect to information, services and social supports
- Protecting people from further harm
- Based on the consensus model and doesn’t expect disclosure or the expression of emotion

WHAT PSYCHOLOGICAL FIRST AID ISN’T
- NOT something that everybody who has been affected by
- NOT obtaining details of traumatic experiences and losses
- NOT treating
- NOT labelling or diagnosing
- NOT counseling
- NOT debriefing
- NOT something that only professionals can do

IMPORTANT NOTE:
In removing the stigma, it’s important to remind ourselves about the following:
- Use the terms ‘distress’ and ‘acute distress’ when describing unspecified psychological impacts after distressing event.
- Not linked to diagnosis.
- It entails crying, feelings of anxiety, sleeping problems, loss of appetite, being withdrawn, and concentration problems.
GOALS OF PSYCHOLOGICAL FIRST AID – THE 3 L’S: LOOK, LISTEN & LINK

LOOK & LISTEN
- Contact & engagement. This is to respond to contacts initiated by survivors or to initiate contacts in a non-intrusive, compassionate, and helpful manner.

Introduce yourself, describe your role, and ask about their immediate needs. Make sure to use LGBTQI+ affirmative statements.

“Hello, ako nga pala si [pangalan]. Ako ang in-charge rito sa aming tanggapan [sabihin kung saan nagtatrabaho]. Ano po ba ang maitutulong ko?”

(Hintaying ang sagot. Pwedeng magtanong para malaman ang detalye na kailangan niya sa panahon na nakausap mo siya. Pwedeng tanungin kung kailangan ba niya ng tubig o pagkain.)

If you are not sure with someone’s sexuality, it’s better to ask politely their preferred pronouns.

“Ano po ba ang preferred pronoun po ninyo? Mas comfortable po ba kayo sa miss o mister?”

If the client is a child, your suggested initial contact will be:


Don’t forget to assure your clients about confidentiality. You must maintain the highest level of confidentiality in any interactions or conversations you have with survivors.

“Lahat ng pag-uusapan natin dito ay sa pagitan lang natin. Makakasiguro ka na safe at confidential ang lahat ng ibabahagi mo.”

- Safety & comfort. To enhance immediate and ongoing safety and provide physical emotional comfort.

Ensure immediate physical safety, orient survivors, and provide necessary information about response activities and services
In probing information, use your judgment as to whether and when to present information. Listen carefully and adjust your way of responding depending on the situation

“Maiintindihan na ba niya ang nangyayari? Handa na ba siyang marinig ang sasabihin mo?”

Try to adjust your way of communication based on survivors’ profile. Do not use incomprehensible and complicated statements.

“Ginagawa po namin ang aming makakaya para maasikaso po kayo. Mayroon po ba kayong katanungan?”

Do not reassure the survivors that they are safe unless you have all important details. Moreover, do not give them false hope about the availability of resources unless you have definite information of such goods and services.

- **Stabilization (If necessary).** To calm and orient emotionally overwhelmed or disoriented survivors. For instance, you may start by using the following example transcript:

“Kapag may mga pangyayaring ganito, normal ‘yang nararamdaman mo. Importante na may makausap ka na mahalagang tao sa’yo para mas maging okay ka. Sino ba siya? Gusto mo hanapin ko o tawagin natin para mas bumuti pakiramdam mo? May kailangan ho kayo ngayon?”

**LINK**

- **Information gathering.** To identify immediate needs and concerns, gather additional information and tailor PFA interventions.

- **Practical assistance.** To offer practical help in addressing immediate needs and concerns.

- **Connection with social support.** To establish brief or ongoing contacts with primary support persons and other sources of support, including family members, friends, and community helping resources.

**WHEN DO WE PROVIDE PSYCHOLOGICAL FIRST AID?**

- Endorsed intervention for the acute stage of trauma when medical needs, basic needs (food, water, shelter, clothing, etc.) and restoration of safety are necessary.

- It provides basic services and security. It aims to help those people who have been recently affected by a crisis event.

- When you first have contact with very distressed people. This is usually during or immediately after an event. However, it may sometimes be days or weeks after, depending on how long the event lasted and how severe it was.

- It is useful for the PFA provider to link the person to mental health professionals if there are severe psychological cases (see MHPSS Intervention Pyramid).

**WHO ARE IN NEED OF PSYCHOLOGICAL FIRST AID?**

PFA is aimed at helping people, both children and adults, who have been recently exposed to a serious crisis event.

However, it is important to note that not all people need psychological first aid. We cannot force to help someone but it is best to make yourself present and easily available to those people who might need help.
WHERE IS PFA PROVIDED?

- Offered wherever there is a safe space enough for both of you and your client to do so.
- In community settings, health centers, shelters or evacuation camps, schools and distribution sites can be a place for PFA as long as you will look for a place within the vicinity where you can have some privacy to talk with the person when appropriate.
- In cases where people have been exposed to certain types of crisis events, such as sexual violence, privacy is essential for confidentiality and to respect the person’s dignity.

WHO CAN PROVIDE PSYCHOLOGICAL FIRST AID?

Anyone as long as someone have undergone training by mental health professional/s.

USUAL PROCESS OF PSYCHOLOGICAL FIRST AID

- Pakikipagpalagayang-loob
- Maintain calm and ensure safety
- Kamustahan & pakikining
- Identifying mental health concerns
- Psychoeducation on the effects of distressful event, spot strength, positive traits, positive coping
- Pagbibigay ng pag-asa
- Link

COMMON REACTIONS TO STRESS BASED ON ALL AGE GROUP

It is important to determine common reactions to your clients to better deal with them. Here are common reactions to stress based on all age group. Your response will be discussed in the preceding pages of this module.

Here are common reactions:

- Signs of fear/worry that the event will take place again
- Reactions to separation from loved ones (e.g. parents and siblings)
- Sleep disturbances
- Crying
- Low energy
- Feelings of body pains or aches

PEOPLE WHO NEED MORE IMMEDIATE ADVANCED SUPPORT:

- people with serious, life-threatening injuries who need emergency medical care
- people who are so upset that they cannot care for themselves or their children
- people who may hurt themselves or may hurt others
PRINCIPLES OF PSYCHOLOGICAL FIRST AID: LOOK, LISTEN, AND LINK

The action principles of psychological first aid are easy to remember. All you need to think of is 3 Ls which represents look, listen, and link. These principles will guide you on how to approach your client in a crisis situation. See the table below for your reference.

**LOOK**
- Enhance immediate and ongoing safety: physical and emotional comfort.
- Check for people with obvious urgent basic needs
- Check for people with serious distress reactions

**LISTEN**
- Establish a human connection: a non-intrusive, compassionate manner
- Approach people who may need support
- Ask about people’s needs and concerns
- Help survivors to articulate immediate needs and concerns
- Offer practical assistance and information
- Listen to people, and help them to feel calm
- Support positive coping, acknowledge coping efforts and strengths
- Provide psychoeducation

**LINK**
- Refer to higher levels of care
- Help people address basic needs and access services
- Help people cope with problems
- Give information
- Connect survivor to social support networks including family members, friends, and community helping resources

**LARGE GROUP PSYCHOLOGICAL FIRST AID**
- Provide information
- Provide a sense of leadership
- Reduce sense of chaos
- Enhance credibility
- Rumor control
- Provide coping resources
- Engender unit cohesion, morale
- Re-establish a sense of “community”
- Psychological screening

**WHEN TO REFER YOUR CLIENTS**
- Harm to self or others
- Inability to make simple decisions
- Significant withdrawal
- Hallucinations/paranoia
- Disorientation to time and place
- Unable to care for self
- Significant change to person’s behavior and usual activities
SELF-CARE OF PFA PROVIDERS

Questions to ask oneself before providing PFA:
Before:
– Are you ready to help?
During:
– How can you stay physically and emotionally healthy?
– How can you support colleagues and they support you?
After:
– How can you take time to rest, recover and reflect?

Take note:
Helpers need to keep realistic expectations of what they can and cannot do and remember that their role is to help people help themselves.

PROVIDE BASIC INFORMATION ON WAYS OF COPING
Adaptive coping actions are those that help to reduce anxiety, lessen other distressing reactions, enhance the coping response, or assist people to get through difficult situations. The following are adaptive coping actions that are useful for your clients:

• Talking to another person for social and emotional support
• Getting enough rest, nutrition, and exercise
• Engaging in positive distractive activities (e.g. Zumba, paghalaman o pagtatanim, any sports-related activities)
• Taking breaks
• Joining social support groups
• Seeking counseling from mental health experts (e.g. psychologist, psychiatrist, social worker, guidance counselors, etc.)
• Trying out successful coping methods that have been successful before
• Trying out relaxation techniques
• Positive self-talk (e.g. “kaya ko ‘to”, “Mahirap pero malalampasan ko ‘to”, “Mahalaga ako”, etc.)
• Maintaining normal and manageable schedule.
• Allowing oneself to be upset for some period of time.
HOW TO COMMUNICATE AND PROVIDE PFA

BASIC MENTAL HEALTH SUPPORT SKILLS

This is a guide for offering basic support and providing comfort. It is not true that promoting mental wellbeing is only the purview of professionals or other experts.

With basic skills and knowledge, other professionals as well as lay persons can be equally effective in reducing psychological distress and keeping people safe. These include staff of local barangays.

The content of this guide is for information and for skills-building. It is not intended as a substitute for clinical treatment, medical care, or psychotherapeutic intervention.

Barangay staff are reminded to practice and promote mental wellbeing within the legal and ethical parameters of their role and profession.

OBJECTIVE

The aim of this guide is to introduce and learn helpful things to say and do in order to support people, including those who have recently experienced a crisis event. When we do this:

- Client are more likely to disclose their experience thereby providing us with more details/information for next steps (e.g., “My parents abuse me at home.”)
- They are more likely to share with us their thoughts and feelings—and thereby feel better and feel safer (e.g., “I want to leave my house, but I don’t know what to do.”)
- They are more likely to do the behavior(s) we wish them to do if they feel that they have been supported, heard, or listened to. (e.g., seek legal assistance).

PART I. HOW TO START ‘THE TALK’: FIRST, LISTEN

The overall goal is to listen and offer support. You are not to “fix,” “manage” or “control” the client. They are more likely to cope through their mental health concerns when a caring staff has genuinely listened and validated their feelings and when they feel supported.
COMMON MISTAKES WE MAKE DURING CONVERSATION

**Focusing on our own feelings.**
We focus on our own feelings. This is a common mistake. When we focus on our own feelings, it can risk diminishing the feelings of the other person—not to mention that it can shift the conversation about you.

You’re going to feel feelings during that conversation. And that’s good. That shows empathy. However, back off a bit from talking about your own feelings and focus instead on their feeling.

**Making the conversation about us.**
Another common mistake is shifting that conversation to us. Imagine someone sharing whatever it is going on with them. We have this natural habit then to say something like, “You know the same thing happened to me...” Or, “Oh, I know what you mean. When my [person] was you...” Or, “Oh yeah, my [person] did the exact same thing.”

The mental health support becomes about us. Notice how that shifts the conversation towards us and away from the other person. Again, this is not meant to invalidate our own experience. We should have our feelings, but “the talk” is not about us.

**Blaming the other person.**
This does not necessarily mean pointing fingers (which we should not be doing). We do subtle things to shame, blame, and judge the other person when they are talking, such as, “Oh, why did you do that?”, “What did you do?”, “You shouldn’t have done that,” or “If I were you, I would’ve instead...”

All these are ways of blaming and judging the other person. They are invalidating and ultimately not helpful.

**Denying that what happened did not happen.** We have a natural inclination to know the facts. We want to be sure that we have all the “right” information, perhaps more so when our clients are possibly victims of interpersonal violence.

However, when we suspect that something did not really happen, we have this bad habit of then correcting the other person or outright questioning them or simply stating, “No, I don’t think that happened.”

Put yourself in the shoes of the other person and imagine hearing, “No, I don’t think that happened.” It robs you of the feelings you have about it. Does “the truth” really matter? Or perhaps the feelings and thoughts matter more?

**Using our phone during ‘the talk’.** This is a common mistake that show we are not listening.
PART II. HOW TO HAVE THE CONVERSATION

Step 1. Recognize our own feelings.
It is crucial that we acknowledge our own feelings about the conversation. More often than not, we’re going to be nervous—anxious even. This is normal. Own it. Go with it. You can best manage your nervousness by owning it.

Step 2. Plan—not too much.
One thing we can do to plan is to prepare a few phrases or words that we can use during the conversation. Think about how you want to open the conversation and, equally important, how you want to end the conversation.

Depending on the situation, but most especially for perhaps more challenging ones, it is helpful to think about contingency plans (e.g., how to leave a conversation). Or what happens if the other person walks out? What do you do then?

However, we also do not plan too much because planning can make us sound scripted and therefore artificial. Too much planning can look disingenuous.

Step 3. Give the invitation. There are simple ways to open conversations.
- “I notice that you seem down lately. I’m here if ever you want to talk.”
- “Lapitan mo lang ako kung kailangan mo ng kausap.”
- “I wonder if something’s bothering you.”

We’re just dropping that seed. We’re not forcing that conversation. By opening the invitation to conversation, we empower the other person to make a decision that is best for them. And when they are ready, they will take that invitation. If they are not ready, that is OK, too.

OARS TECHNIQUE
The OARS (open questions and probes, attending and listening, reflection of feelings, and summaries and restatements) are basic skills in mental health support. They encourage explorations of thoughts and feelings. They are the core of this guide.

(O) Open questions and probes

How we do it:
- Ask open-ended questions. Limit the use of closed-ended questions. This limits sharing.
- Focus on one question or part of a problem at a time. Do not jump from one thing after another.
- Do not hesitate to bring up later a lesser important topic that the student might have mentioned.
- Providing a listening ear or being supportive does not mean answering all their problems or covering all the parts of a problem.
• Avoid asking “why” questions. They might feel defensive. It can also feel intrusive.
• Be sensitive to topics the client is not yet ready to share.
• Say questions in a short and simple manner.

Why we do it:
• To establish rapport with clients.
• To encourage them to express their thoughts and feelings.
• To give clarification or focus the discussion.
• To let the client reflect on the importance of their thoughts and feelings.
• To identify a specific example in order to get a clearer picture of what they are talking about

What to say:

<table>
<thead>
<tr>
<th><strong>Objective</strong></th>
<th><strong>Examples of what to say</strong></th>
</tr>
</thead>
</table>
| To clarify or to focus      | • “What did you mean by that?”  
• “Help me understand.”  
• “I want to make sure I get this right...”                                                                                                                |
| To bring out thoughts       | • "Tell me more your thoughts about that.”  
• “You’re thinking that...”  
• “It sounds like you think...”                                                                                                                            |
| To bring out feelings       | • “What feelings do you have about it?”  
• “I wonder about your feelings.”  
• “Some feelings might come up.”                                                                                                                           |
| To bring out an example     | • “Give me an example of what you do when you feel...”  
• “Walk me through it.”  
• “I wonder what that looks like.”                                                                                                                         |

(A) Attending and listening
When we ask open questions, we should complement that with attending and listening.

Attending and listening are two different but related techniques of making sure difficult conversations are easier.

Attending is how we physically orient ourselves towards the other person. Listening is making sure that we are capturing and understanding the other person’s story.

We attend and we listen because we want to communicate to others that we are paying attention to them.
We attend and listen because it helps them talk more openly about their thoughts and feelings.
We attend and listen because it makes others feel valued and worth being listened to.
And attending and listening are actually ways to communicate to others in nonverbal ways.
This requires us to be mindful of our body language.
WE USE THE ENCOURAGES TECHNIQUE.

<table>
<thead>
<tr>
<th>How Skills</th>
<th>What and Why Skills</th>
</tr>
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</table>
| **(E) eye contact and facial expression** | • Maintain moderate eye contact.  
• Avoid looking away frequently or staring.  
• Too little eye contact can make others feel like you are not interested in the interaction.  
• Too much eye contact can make others feel uncomfortable, intruded on, dominated, or controlled.  
• For some of us, this is going to be challenging because we usually stare at our phones. But remember, you should not be on your phone—you’ve put that away.  
• Like all the other skills, this takes practice. |
| **(N) nods** | • Use moderate amounts of head nods, especially at the end of sentences.  
• Nods communicate that you are “with” others and attuned to/support them.  
• Too few, others feel anxious.  
• Too many, you can appear distracting. |
| **(C) cultural differences** | • We live in a diverse country—with lots of cultures and subcultures. This is not only about ethnicity, race, religion or language. There are other diverse groups, such as socioeconomic status, LGBT identity, education level, world experience, etc.  
• Adapt to others’ nonverbal style.  
• Do not expect others to adopt them to yours. |
| **(O) open stance** | • Lean towards others but not too long.  
• Maintain an open body stance.  
• Do not cross your arms or legs. |
| **(U) um-hmm** | • Use simple non-language sounds (e.g., "yeah," "wow," “UM-hmm”).  
• Non-language sounds encourage others to keep talking, without you saying a statement or a sentence.  
• This communicates that you are attentive and supportive.  
• We want moderate um-hmms.  
• Too few, you appear distant.  
• Too many, you appear distracting and annoying. |
| **(R) relax and be natural** | • It is important not to just appear relaxed, but actually be, relaxed.  
• Start with the "encourages" skill most comfortable to you (e.g., nods).  
• Then, move to the next MOST comfortable, and so on.  
• Observe others' reactions.  
• It’s just a conversation, it’s just listening to a friend, classmates, loved one, co-worker.  
• You’re not going on an espionage here. It’s not brain surgery. You’re just listening.  
• Relax.  
• Part of our challenge is that when we have these so-called difficult conversations, our expectations are unrealistic—as if we’re there to “save” our friend, to solve all their problems, or “fix” everything. |
(A) avoid distracting nonverbal behaviors or interruptions

- If you watch yourself in conversation, you would be amazed at the many nonverbal things you do that have the potential to be distracting or not helpful.
- You could be playing with your pen or scratching your head. These are habits we have that do not communicate anything helpful.
- Sometimes we use our hands a lot. Sometimes we move our body or arms a lot. Sometimes we change our posture a lot. This is distracting.
- These communicate that you are not listening.
- Be mindful of your nonverbal behaviors.

Match (G) grammatical style and pace of speech

- Do not appear “smart” or “educated”. Do not be an “expert”.
- Language should match the cultural experience and educational level of the other person.
- Avoid jargon or fancy words.
- Sound natural rather than stilted/monotone or condescending.
- Match their pace of speech (within some limits). If a client is speaking slowly, speak slowly.

Listen with a third (E) ear

- We all too often listen not to understand but to respond: we are half listening to what someone is saying because we are thinking about what to say next. This is not helpful.
- Say nothing. Stay in the moment.
- And when we do that, we might notice something that the other person is saying something but they are not actually saying it.
- Listen to what they are not telling you.
- For example, a friend might be sharing a story that sounds lonely or sad but they themselves are not actually saying that they feel lonely or sad.
- But when we listen with a third ear this allows us to identify that feeling of loneliness or sadness and bring it up. We can then say, “That sounds lonely,” or “That sounds sad”—even when they themselves did not say it.

Use (S) space appropriately

- We want to be mindful of how we use the space.
- Intimate conversations are usually less than 2 feet apart; personal conversations, less than 4 feet; and social conversations, between 4 and 12 feet.
- For some, their life experience warrants our particular attention. For example, victims of abuse might be uncomfortable having another person sit close to them. For others, having a table or desk between them and you might be a source of comfort or might be a source of distance. For some who are agitated, sitting near an open door might be a good idea.
- Consider the situation and context, too. If you are behind a desk, this can make you appear authoritative but also distant. In some cultures, it is appropriate for same-sex conversations to be close, but not for opposite-sex ones.

(R) Reflection of feelings

The O and A skills are the foundations. Let us deepen those skills. To reflect feelings requires a great deal of attending and listening. To explore those feelings requires steady open-ended questions.

Reflection of feelings is repeating or rephrasing what the other person said but not just that. We also explicitly identify a particular feeling. Feeling our feelings is a good thing. We reflect the other person’s
feelings because it allows them to become more immersed in their inner feelings. It also helps them identify and experience feelings and thoughts. It also helps others clarify those feelings or instill a sense of hope.

<table>
<thead>
<tr>
<th>How Skills</th>
<th>What Skills</th>
</tr>
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</table>
| Basic      | “You feel [insert a feeling].”  
|            | “You feel [emotion] because [paraphrase their statement].” |
| Advanced   | I wonder if you’re feeling...  
|            | Perhaps you're feeling...  
|            | You sound (or seem)...  
|            | If I were you, I might feel...  
|            | Could you be...?  
|            | It sounds like you feel...  
|            | So, you're feeling... |

(S) Summaries and restatements

Finally, a closely related technique to reflection of feelings is summarizing and restating. It is repeating or rephrasing what the other person said but with fewer words, more concrete, and clearer.

Why do we do that? So, we can be a “sounding board” “mirror” to others. It also lets others hear back what have said so they can evaluate what they are thinking/feeling. This happens to all of us. When we talk, it’s hard to pay attention to what we just said because we are talking.

In other words, when we talk, sometimes we are not listening to what we said.

When someone else summarizes or restates what we just said, they are a sounding board—they are an echo. This then allows us to hear what we just said. And this can give us an opportunity to add things we might have forgotten.

When we summarize and restates, it can help others thinks about whether they actually believe what they have said. And when we do that, it can help others think about things at a deeper level. And of course, it lets others know you are listening.

How skills:  
- Be short and more concise than the client’s statements.  
- Capture the “essence”.  
- Emphasize their thoughts, not other people’s thoughts.
What to say:
• I hear you saying... (short/concise)
• It sounds as though... (fewer words)
• I wonder whether... (to the point)
• You're saying that... (essence)

PART III. HOW TO CLOSE THE CONVERSATION

It is important that there is a “natural” ending to ‘the talk’. Otherwise, it can make clients feel that they have been stopped short. The way to end a conversation is to the way we started it.

Step 1. Recognize shared feelings.
This is a good place to acknowledge shared feelings. Previously, you were cautioned not to share your worries or anxieties to the client. Now, it is OK to do so but still in a way that is supportive, without shifting the conversation about you. We can say something simple: “I was a bit nervous, but I am so glad that we had this conversation.” Or, “I’m relieved that we’re able to talk. I hope I was helpful.”

Step 2. Plan—not too much.
And the next step then is to plan for next steps. What does the client want to happen next? This will vary from situation to situation. For some situations, maybe you need some concrete planning—like, “Let’s talk again tomorrow,” or, “What do you think about talking to the police?”

But as with starting the conversation, we do not want to be too planned out, or else it can be stilted or disingenuous. And like starting the conversation, we also want to be honest about what we can or cannot do. We must acknowledge our limitations. This is a good place to link them to specific services or supports (e.g., legal support, shelter).

Step 3. Give an open invitation.
This means letting the other person know that we’re here if ever they want to talk again. We can something simple: “Just let me know if ever you want to talk again.” Or, “What do you think about touching base next week?” Something simple, straightforward.

When we give an open invitation, we are further opening the door to empathy. When and how you end your help will depend on the context of the crisis, your role and situation, and the needs of the people you are helping. Use your best judgment of the situation, the person's needs and your own needs.

If appropriate, explain to the person that you are leaving. If someone else will be helping them from that point on, try and introduce them to that person. If you have linked them to other services, let them know what to expect and be sure they have the details to follow up.
AFFIRMATIVE COUNSELING
– How to handle cases for LGBT survivors of domestic and family violence

RATIONALE
This module aims to show how responders, particularly from the barangay level, should properly handle and manage cases and situations of lesbian, gay, bisexual, and transgender (LGBT) individuals experiencing abuse and violence at home and in the community using the frameworks for affirmative counseling and mental health psychosocial support.

The main goal is to give guidelines to the barangay units to help minimize and eventually alleviate further psychological effects to LGBT clients brought about by discrimination or discriminative practices and create safe spaces to the members of the LGBT community.

GOALS AND OBJECTIVES
At the end of the session, participants are expected
1. to have basic knowledge of affirmative counseling;
2. to be able to know proper use of verbal and nonverbal language and terminologies when communicating (gathering information/data, giving guidelines/instruction);
3. to have an understanding and awareness of the psychological effects of domestic/family abuse and violence and effects of discriminative behavior from other people;
4. to know different intervention strategies using affirmative counseling model in handling cases; and
5. to have knowledge of the risk factors and psychological symptoms as effect of the negative experiences in aid of proper assessment of client’s situation.

INTRODUCTION TO AFFIRMATIVE COUNSELING

“Embraces and validates clients’ diverse sexual and gender identities and proactively addresses the impact of heterosexism and transgender oppression on LGBTQ clients’ lives” (Rock, Carlson, & McGeorge, 2010).

“Professional counselors have an obligation to, “avoid harming their clients, trainees and research participants and to minimize or to remedy unavoidable or unanticipated harm.” American Counseling Association’s Code of Ethics (ACA, 2005)

“In order to provide LGBTQ-affirmative counseling, counselors should be familiar with the terms commonly used, prevalence, lifespan, multicultural, and social justice considerations.”
COMMUNICATION

Talking with the LGBTIQ+ person

- use appropriate and inclusive language
- use the same terms that the person uses to describe themselves, their sexual or romantic partners, relationships, and identity
- make your questions as open as possible (e.g. instead of asking “are you straight, gay or bisexual?”, ask “how do you describe your sexuality?”

NO

- ‘homosexual’
- ‘hermaphrodite’ or ‘disorders of sex development’ (DSD)
- ‘tranny’, ‘transsexual’, ‘transvestite’, or ‘cross-dresser’
- ‘fag’ or ‘dyke’ or ‘bading’

Pronouns

- Communicate in terms that are gender and relationship neutral, e.g. using ‘partner’ rather than ‘boyfriend’ or ‘girlfriend’.
- Use non-gendered pronouns (i.e. ‘they’, ‘them’, ‘their’, even though referring to an individual) or use the person’s name in place of a gendered pronoun (i.e. instead of saying, “That belongs to her”, say “That belongs to Sam”).
- Ask about this in a respectful and inclusive way, e.g. “I use feminine pronouns to refer to myself. Can I ask what pronouns you use?”.

TALKING AND ASKING QUESTIONS ABOUT EXPERIENCE

- Do not ask the person if they are LGBTIQ+.
- Seek permission from the person to ask about their LGBTIQ+ experience.
- Do not ask any questions of the person that you would not ask a non-LGBTIQ+ person.
- Talking and asking questions about experience
- Do not ask a transgender person what their ‘real’ name is (i.e. the name they were born with), as this may be offensive.
- Do not make jokes about sexuality, gender identity or intersex variation or say things that involve stereotyping, e.g. “gay people are so…”.
- Talking and asking questions about experience
- Do not ask questions about sex, sexuality, sexual partners, genitals or similar, unless it is relevant to assisting the person.
DIFFICULTIES THE PROVIDER MAY ENCOUNTER

• If the person doesn’t feel comfortable talking to you or vice versa, help them find someone more suitable to talk to.
• Ask the person to tell you if you do or say anything that makes them uncomfortable and apologize if you do.
• Do not let the fear of saying the wrong thing prevent you from offering to help the person.
• Be aware that LGBTIQ+ people who have been marginalized may express anger and hostility.

PSYCHOLOGICAL EFFECTS OF DOMESTIC/FAMILY ABUSE AND VIOLENCE AND EFFECTS OF DISCRIMINATIVE BEHAVIOR FROM OTHER PEOPLE

Treat and support the LGBTIQ+ person as a person first and foremost, rather than defining them by their LGBTIQ+ experience.

• Appropriately and correctly acknowledging the person’s LGBTIQ+ experience, which can also improve the person’s sense of wellbeing.
• Asking the person what they think would help them, irrespective of the possible causes of their distress.
• Asking what help the person needs, rather than making assumptions about what they need based on their LGBTIQ+ experience.
• Showing your support in a concrete way by respecting the choices the person makes about clothing, name and pronouns, even if you don’t understand or feel comfortable with it.
• Listening to the person and not feeling that you need to have answers or provide advice. Sexuality and gender identity are not a choice, and any attempts to convince the person that they can change these can be harmful.

NOT

• Offer your opinion on the person’s LGBTIQ+ experience unless it is invited.
• Express judgement about the person’s LGBTIQ+ experience when interacting with them.
• Refer to your own religious or moral beliefs about LGBTIQ+ people.
• Give the person the impression that being LGBTIQ+ is a ‘deviation from the norm’.
• Say things that are intended to reassure but are mostly not helpful or patronizing, e.g. “Some of my best friends are gay”
LGBTQQ-Affirmative Counseling

- Counselors should also be familiar with intervention and prevention strategies, as well as how to establish LGBTQ-affirmative counseling environments.

Creating LGBTQQ-Affirmative Counseling Environment (Aca 2010)

- Foster a supportive counseling space where clients feel safe and empowered to authentically discuss their sexual and gender identities.
- Providing LGBTQ-affirming reading material ensuring that additional LGBTQ-related resources are readily available.
- Affirming and inclusive language should be included on all paperwork and assessments.
- Refer to clients by their chosen name and use pronouns that affirm their gender identity.
- Avoid making assumptions about a client’s gender and/or sexual orientation.

We need to understand that the presenting issues are not solely about their sexual orientation and/or gender identity and gender expression.

Risk factors for mental health problems that are specific to or more common for LGBTQI people.

- Being in a minority group
- Discrimination, prejudice and abuse
- Actual or anticipated insensitive treatment or violence
- Intersex people receiving ‘corrective’ surgery they did not consent to, often in infancy

Signs and Symptoms of Abuse

- Anxiety, agitation or chronic apprehension
- Depression
- Feelings of hopelessness, helplessness or despair
- Low self-esteem
- Suicidal ideation, gestures or attempts
- Somatic/psycho-somatic complaints including headaches, sleeping disorders, difficulty concentrating, chronic fatigue, nightmares and abdominal or gastrointestinal complaints
- Substance over-use, including alcohol, medications or other drugs
- Post-traumatic stress
- Failure to keep appointments, or comply with care protocols, for example medication schedules
- Secrecy or obvious discomfort when interviewed about the incident
- An individual return repeatedly with vague complaints
- An individual who presents health problems associated with abuse
- Delay between an injury and seeking medical treatment
- Chronic pain without apparent etiology
- An unusually high number of visits to health care providers
- Social withdrawal
INTERVENTION STRATEGIES

Assessment for Abuse

Opening the Conversation
• Begin the conversation using gender-neutral terms, e.g. “the person with whom you are having a relationship”.
• Don’t assume that all men who have intimate relationships with men want to be referred to as gay or bisexual. Let the individual indicate how he wants to be identified.
• The assessment questions below use the term “partner” as a convenience. But, again, you may want to find out what term the individual you are serving wants to use to describe the person with whom he is having a relationship: boyfriend, girlfriend, date, husband, roommate, etc.
• Since some tend initially not to identify their experience as abuse, avoid using general terms such as “partner abuse” or “domestic violence”, as well as clinical terms. Ask questions about specific, representative behaviors.
• Let the individual tell you what terms he wants used to refer to himself, his relationship, his experience and so on and then, use his terms. Or if you are comfortable doing so, ask what terms the individual wants to use. Indicate that although you may not fully understand his experience or the lives of LGBT people, you are willing to learn.

Assessment of Immediate Safety
Sample Questions
• Do you feel safe at home?
• Are you in any immediate danger?
• Is your (perpetrator) with you here today?
• Do you want to (have to) go home with?
• Do you have someplace safe to go?
• Has the violence gotten worse or is it getting scarier? Is it happening more often?
• Are you afraid your life may be in danger?

What to Do If an Assessment Identifies Abuse

Provide validation
• Listen non-judgmentally.
• “I am concerned about your safety.”
• “You are not alone; many people, including men, experience partner abuse.” “Assistance is available.”
• “You do not deserve the abuse; it is not your fault.”
• “Stopping the abuse is the responsibility of your partner, not you.”

Provide information
• Give a simple definition of partner abuse, describe the different types of abuse and give some examples of each.
• “25 to 33% of men in intimate relationships with men experience partner abuse.”
• “Abuse, once it begins, usually continues and often becomes more frequent and severe.”

Respond to safety issues
• Offer the individual information on safety planning
• Offer the individual immediate and private access to abuse advocate (provide contact information, etc.)
• Review ways in which to safely maintain contact with the individual.

Make referrals to local resources
• Describe any advocacy and support services in your organization.
• Refer the individual to advocacy and support services within the local area.
• Refer the individual to GBT organizations but include a range of possible resources, such as those that serve straight men. Not all men who have relationships with men want to be referred to a GBT organization.

What to Do If an Individual Says “No”*
• Respect their response.
• Advise that if he/she feels he/she is being abused that it is not his/her fault or responsibility; have experienced abuse; and that it is OK to get assistance and there are resources available.
• Let them know that you are available should the situation ever change.
• If he/she says “no” but you believe he/she may be at risk, discuss the specific risk factors and offer information and resources.
• Provide key information: the definition of domestic abuse, the types of abuse with examples and local partner abuse resources.
• Assess the individual again at the intervals recommended.
OPTIONS OF AN LGBTI VICTIM-SURVIVOR OF DOMESTIC VIOLENCE & FAMILY VIOLENCE

One of the important roles of a service provider is to present the different options available to LGBTI victim-survivors of domestic violence and family violence.

REMEDIES OF LGBTI VICTIM-SURVIVORS

1. Barangay
   - Barangay Protection Order (BPO) under Republic Act 9262 (RA 9262) or QC Gender-Fair Ordinance;
   - Rescue; Assistance, Home visit

2. Police – warrantless arrest, complaint

3. QC Protection Center
   - Medico-legal exam and medical concerns, psycho-social counseling, police assistance, legal consultation, social welfare assistance, referral for shelter if needed and other services

4. DSWD/Local Social Welfare and Development Office (LSWDO)
   - To rescue/visit
   - Conduct Investigation and issue an assessment report/case study
   - Protective Custody under RA 7610;
   - Involuntary Commitment, Supervision of DSWD while at Home, Protective Custody under PD 603
   - Voluntary Commitment (PD 603)

5. Commission on Human Rights (CHR)
   - Conduct Investigation as Gender Ombud under MCW;
   - Assist in the filing of cases against individuals, agencies, institutions or establishments that violate the provisions of RA 9710;
   - Financial Assistance

6. Department of Justice (DOJ)
   - Monetary claim for victims of violent crimes including rape & offenses committed with malice under RA 7309/Board of Claims

7. Administrative Cases
   - Administrative cases against abusive public officials may be filed with the People’s Law Enforcement Board (PLEB), Philippine National Police (PNP) Internal Affairs, National Police Commission (NAPOLCOM), and Armed Forces of the Philippines Provost Marshal.
   - Complaints against abusive private individuals may be filed with their employers, the Professional Regulations Commission and other professional organizations

8. Court –
   - Criminal Complaints
     - Violation of Revised Penal Code & Special Laws;
     - Violation of QC Gender-Fair Ordinance; Violation of QC GAD Code
   - Civil Remedies
     - Temporary & Permanent Protection Orders & Hold Departure Order under RA 9262;
     - Writ of Habeas Corpus; Writ of Amparo;
     - Temporary Restraining Order (TRO)/Preliminary & Permanent Injunction;
     - Damages;
   - For minors:
     - Writ of Habeas Corpus/Protection Order to Stay Away, Cease & Desist, etc under Rule on Habeas Corpus;
     - Protective Custody (for sexual abuse, Serious Physical Injury of Life threatening neglect, etc) under RA 7610;
     - Involuntary Commitment (for dependent, abandoned, neglected), Supervision of the Department of Social and Development (DSWD) while at Home (for abandonment/neglect), Protective Custody (for those engaging in prostitution or illicit conduct) under PD 603

Other Points:
- Regular Monitoring of Victim-Survivor and Perpetrator;
- Prevention of discrimination and abuses
- Intervention of Family, Relatives, Community
STEP 1 - Designate an Officer-of-the-Day who will assist LGBTI victim-survivors of domestic and family violence. (In QC, the VAWC Desk Officer is designated as the SOGIE Help Desk Officer. In case the VAWC Desk Officer is not available, there should be a designated alternative Officer-of-the-Day)

STEP 2 - Get immediate assistance from the Police or BPSO
- Police or barangay may arrest the offender if the arrest qualifies as a lawful warrantless arrest;
- Police may confiscate any deadly weapon in the possession of the perpetrator or within plain view and assist the survivor in removing personal belongings from the house (RA 9262)

STEP 3 – Get Referral Letter for medico-legal exam from the police

STEP 4 – Get immediate medico-legal exam from:
- QC Protection Center, QC General Hospital and Medical Center, Seminary Road, QC;
- PNP Crime Laboratory (e.g., QC PNP Station 10; Camp Crame Crime Laboratory);
- Women and Children Protection Units and Protection Centers at government hospitals;
- Emergency rooms of government hospitals

STEP 5 – Get copy of the Complaint-Affidavit (Sinumpaang Salaysay) for violation of appropriate laws at the police station

STEP 6 – Get the BPO from the barangay to protect the survivor and children against physical harm and threats of physical harm (RA 9262; QC Gender-Fair Ordinance)

STEP 7 – File the necessary administrative, civil and criminal complaints. For criminal complaints, file the complaint (Complaint-Affidavit/Sinumpaang Salaysay) with the Prosecutor’s Office that has jurisdiction. Seek appropriate civil remedies (e.g., Temporary/Permanent Protection Order by filing the petition with the Regional Trial Court/Family Court where the survivor resides or with the court hearing the criminal complaint)

STEP 8 – Get counseling and counseling/psychological/psychiatric evaluation report from:
- Quezon City Protection Center, QC General Hospital and Medical Center, Seminary Road, QC;
- UP-PGH Women’s Desk;
- UP-PGH Child Protection Unit or any Women and Children Protection Unit in the locality;
- Women’s Crisis Center, St. Scholastica Archives & Museum Center, Pablo Ocampo St., Manila;
- National Center for Mental Health for survivors with mental disability;
- Any center providing such services (e.g. Psychiatry Department, Eastern Visayas Regional Medical Center (EVRMC); Mental Health Dept., Cotabato Regional & Medical Center)

STEP 9 – Refer the survivor to a shelter if necessary
REMEDIES OF LGBTI VICTIM-SURVIVORS

- **REMEDIES FROM BARANGAY**
  LGBTI victims of domestic violence and family violence seeking assistance from the Barangay can approach the following:
  1. BCPC
  2. Barangay Head (or Punong Barangay)
  3. Barangay Officials (or Kagawad)
  4. BPSO
  5. Barangay VAWC/SOGIE Desk Officer
  6. GAD Focal Person

**BARANGAY TASKS**
Under the Anti-Violence Against Women and Children Act (Anti-VAWC) or RA 9262, the following are the responsibilities of the Barangay:

1. **Take immediate action** upon being informed of a violent incident.
2. **Issue a BPO** on the date of filing after *ex parte* determination of the basis of application.
3. **Not to allow all forms of amicable settlement** under the Katarungang Pambarangay such as mediation, settlement, conciliation, arbitration to cases of VAWC.
4. **Report within 4 hours** the incident to the PNP and to the City or Municipal Social Welfare and Development Office from the time of reporting.

**REPORTING DUTIES OF BARANGAY OFFICIALS**

- **Anti-VAWC Law (RA 9262)**
  o The Barangay Officials shall report the incident and refer the victim-survivor to the Local Social Welfare and Development Office and the PNP Women and Children’s Protection Desk within four (4) hours from the time of reporting of the RA 9262 case.
  o Any barangay official or law enforcer who fails to report the incident shall be liable for a fine not exceeding Ten Thousand Pesos (P 10,000.00) or whenever applicable criminal, civil or administrative liability

- **Magna Carta on Women (MCW)**
  o Record the number of gender-based violence handled by the barangay and submit a quarterly report on all cases of VAW to the DILG and the City/Municipal Social Welfare Development Office (C/MSWDO)

- **QC GENDER-FAIR ORDINANCE LEGAL REMEDIES**
  1. Barangay Protection Order and/or Court Protection Order.
  2. Criminal and Non-Criminal Complaints (Section 32).
Criminal complaints for violation of the ordinance field directly with the Metropolitan Trial Court (MeTC) (Sec. 32.1).
Civil complaints for damages field with either MeTC or Regional Trial Court (RTC) (Sec. 32.1).
Mediation complaints filed with the QC Pride Council (QCPC) Executive Committee (32.2).

3. Independent Action for Damages and other affirmative relief (Section 25).
4. Hold Departure Order (Section 27) upon the request of the counsel for the victim-survivor or applicant.

ROLE OF BARANGAY VAWC DESK UNDER THE GENDER-FAIR ORDINANCE

The QC Gender-Fair Ordinance incorporates SOGIE Concerns with the Functions of the Existing Barangay VAWC Desk such as the following:

- Develop a system to document and report cases of discrimination and violence and provide assistance,
- Undergo training to respond to victims of discrimination and violence,
- Assist in filing the appropriate complaint, and
- Ensure that all pertinent documents are forwarded to the QCPD.

ROLE OF PNP VAWC DESK/HUMAN RIGHTS DESKS UNDER THE GENDER-FAIR ORDINANCE

The QCPD is strongly encouraged to handle the concerns relating to SOGIE through the existing VAWC/Human Rights Desk in all police stations in QC in close coordination with the QC Protection Center.

COURT CIVIL, SPECIAL OR PROVISIONAL REMEDIES

CRIMES RELATED TO DOMESTIC VIOLENCE AND FAMILY VIOLENCE

A) Criminal Complaint for Violation of National Penal Laws that can be filed in Court:

- Anti-Violence Against Women and Their Children Act (RA 9262)
- Special Protection of Children Against Abuse, Exploitation and Discrimination Act (RA 7610)
- Acts of Lasciviousness (Art. 336, Revised Penal Code (RPC)
- Rape (RA 8353)
- Physical injuries and Maltreatment (Art. 266, RPC)
- Unjust vexation (Art. 287, 2nd par., RPC)
- Slander by deed (Art. 359, RPC)
- Slander (Art. 358, RPC)
- Light Threats (Art. 285, RPC)
- Grave Threats (Art. 282, RPC)
- Serious Illegal Detention (Art. 267, RPC)
- Slight Illegal Detention (Art. 268, RPC)
- Expanded Anti-trafficking (RA 10364)
- Anti-Photo & Video Voyeurism (RA 9995)
- Anti-Child Pornography Act (RA 9775)
- Cybercrime Prevention (RA 10175)
- Grave Coercion (Art. 286, RPC)
Complaint for Violation of Local Ordinances
In QC, the following criminal complaints for violation of local ordinances may be filed with the Court:

- **QC Gender-Fair Ordinance (Comprehensive Anti-Discrimination Policy on the Basis of SOGIE; Ordinance No. SP-2357, Series of 2014)** - The victim-survivor may file the following complaints with the Metropolitan Trial Court (MeTC) for discrimination and abuses based on actual or perceived SOGIE:
  - **Verbal, Non-Verbal Ridicule and Vilification** (Sec IV, para. 5):
    - Making fun or contemptuous imitating or making mockery whether in writing, or in words, or in action
    - Uttering of slanderous and abusive statements
    - Executing any activity in public which incites hatred towards, serious contempt for, or severe ridicule of a person
    - Analogous act of ridicule which could intimidate or result in loss of self-esteem of the person
  - **Harassment, unjust detention and involuntary confinement** (Sec IV, para. 6) – when committed because of one’s actual or perceived SOGIE
  - **Any Other Analogous Act** (Sec IV, para. 9):
    - Any act of discrimination or harassment based on actual or perceived SOGIE which demeans the dignity and self-respect of a person or impairs, mars, reduces, or nullifies the recognition, enjoyment or exercise of a person’s human and legal rights and basic freedoms in the civil, political, labor, economic, social, cultural, educational spheres, and other spheres

- **Quezon City GAD Code (Ordinance No. SP 1401-1, S-2004)** penalizing sexual harassment of women in public spaces:
  - **Light violations** – cursing, wolf-whistling, catcalling, calling a woman in public with words having dirty connotations or implications, which tend to ridicule, humiliate, or embarrass the woman;
  - **Medium violations** - stalking, making offensive mouth, tongue, lip, hand or body gestures at someone, or other analogous gestures or visual harassment directed at a woman for the sexual gratification of the perpetrator or with the intention to demean, sexually harass, intimidate, or threaten a woman;
  - **Severe violations** – Touching, pinching, or brushing up against the body of a person unnecessarily or deliberately; the introduction of any object into the genitalia, anus or mouth, of any person, whether of the same or opposite sex; public masturbation, lascivious exhibition of the genitals or pubic area of a person or other analogous acts of lasciviousness directed at a woman for the sexual gratification of the perpetrator or with the intention to demean, sexually harass, intimidate, or threaten a woman
1. Under Anti-VAWC Law (RA 9262) – the victim-survivor may avail of the following remedies by filing the petition with the Regional Trial Court/Family Court where the survivor resides or with the court hearing the criminal complaint:
   a) **Temporary Protection Order (TPO)** is effective for 30 days and may be renewed by the court. The TPO is granted without the need of a hearing, enjoining the abuser from going near the victim, the victim’s residence and office within a designated radius and disallowing the abuser from harassing and abusing the victim, their common children, her friends and relatives.
   b) **Permanent Protection Order (PPO)** is valid unless revoked by the issuing court upon application of the person in whose favor the protection order was issued.
   c) **Hold Departure Order** against the perpetrator prohibiting travel outside the country.

2. **Writ of Habeas Corpus (Rule on Habeas Corpus)** ordering the perpetrator to bring the body of the victim-survivor to the Court.

3. **Writ of Amparo (violation of life, liberty, security)** – Is a remedy available to any person whose right to life, liberty and security is violated or threatened with violation by an unlawful act or omission of a public official or employee, or of a private individual or entity. The writ shall cover extralegal killings and enforced disappearances or threats.

4. **TRO, Preliminary Injunction and Permanent Injunction/Preliminary Mandatory Injunction** (Rule 58, Civil Procedure) in favor of the petitioner-victim, children, friends, relatives and those assisting the victim.
   a) **TRO** - If the matter is of extreme urgency and the victim-survivor will suffer grave injury and irreparable injury, the court may issue *ex parte* (without hearing) a TRO effective for 72 hours. It may be filed where the action is pending and shall be granted after hearing and with prior notice to the person sought to be enjoined.
   b) **Preliminary Injunction** – An order issued prior to the judgment requiring a party or a court, agency or a person to refrain from or require a particular act or acts. It may be filed where the action is pending and shall be granted after hearing and with prior notice to the person sought to be enjoined.
   c) **Permanent Injunction after hearing.** If after the trial of the action it appears that the applicant is entitled to have the act or acts complained of permanently enjoined, the court shall grant a final injunction perpetually restraining the party or person enjoined from the commission or continuance of the act or acts.

5. **Damages** - Civil complaints for damages field with either MeTC or Regional Trial Court (RTC)

### REMEDIES FOR CHILD OR MINOR VICTIMS

1. **Writ of Habeas Corpus and Protection Order Rule on the Custody of Minors**
   The Family Court may issue the following:
   a) **Writ of Habeas Corpus** to bring the body of the victim-survivor to the Court
   b) **Protection Order** requiring any person:
      - To *stay away* from the home, school, business, or place of employment of the minor, other parent or any other party, or from any other specific place designated by the court;
      - To *cease and desist* from harassing, intimidating, or threatening such minor or the other parent or any person to whom custody of the minor is awarded;
• To refrain from acts of commission or omission that create an unreasonable risk to the health, safety, or welfare of the minor;
• To permit a parent, or a party entitled to visitation by a court order or a separation agreement, to visit the minor at stated periods;
• To permit a designated party to enter the residence during a specified period of time in order to take personal belongings not contested in a proceeding pending with the Family Court; and
• To comply with such other orders as are necessary for the protection of the minor.39
• If the court judgment finds that both parties are unfit to have the custody of the minor, the court may designate the grandparents, oldest brother or sister, or any reputable person to take charge of such minor or commit him to any suitable home for children.40

2. Protective Custody under DOJ Rules & Regulations on Sec. 32 of RA 7610
If the investigation discloses sexual abuse, serious physical injury of life-threatening neglect of the child (include threat to life and limb), the duly authorized officer or social worker of the DSWD** shall immediately remove the child from his home or the establishment where he was found and place the child under protective custody to ensure safety of the child.41

**Department – refers to a duly authorized officer or social worker of the DSWD or similar agency of a local government unit

• REMEDIES UNDER THE CHILD AND WELFARE CODE (Presidential Decree 603)42
1. Petition for Involuntary Commitment of a Child -The DSWD Secretary or Secretary’s authorized representative or any duly licensed child placement agency having knowledge of a child who appears to be dependent, abandoned or neglected, may file a verified petition for involuntary commitment of said child to the care of any duly licensed child placement agency or individual.43
   The petition shall be filed with the Family Court, if any, or with the Regional Trial Court of the province or City Court in which the parents or guardian resides or the child is found.
2. Voluntary Commitment of the child with DSWD - The parent or guardian of a dependent, abandoned or neglected child may write to the DSWD to voluntarily commit the child to the DSWD or any duly licensed child placement agency or individual.44
3. Supervision of DSWD while the Child Stays at Home - If in the court’s opinion the cases of the abandonment or neglect of any child may be remedied, it may permit the child to stay in her/his own home and under the care and control of her/his own parents or guardian, subject to the supervision and direction of the DSWD.45 When it appears to the court that it is no longer for the best interests of such child to remain with her/his parents or guardian, it may commit the child.
4. Protective Custody - Any minor who is apprehended or taken into custody by the duly authorized officers of the DSWD for engaging in prostitution or illicit conduct punished under existing laws shall, immediately from such rescue/apprehension, be delivered by the law enforcement officer to the DSWD or to its duly authorized office or agency within a particular territorial jurisdiction for protective custody. The DSWD shall be responsible for the appearance of the minor under its protective custody in court or any administrative agency whenever required.46

• RECORDING, REPORTING, AND INVESTIGATION OF CHILD ABUSES
  ○ Under RA 7610 and the DOJ Rules on the Reporting and Investigation of Child Abuse Cases47
    ▪ Any Person May Report
SECTION 3. Reporting. — A person who learns of facts or circumstances that give rise to the belief that a child has suffered abuse may report the same, either orally or in writing, to the Department, to the police or other law enforcement agency or to a Barangay Council for the Protection of Children.

Duty of Government Workers to Report

SECTION 5. Duty of Government Workers to Report. — It shall be the duty of all teachers and administrators in public schools, probation officers, government lawyers, law enforcement officers, barangay officials, corrections officers and other government officials and employees whose work involves dealing with children to report all incidents of possible child abuse to the Department [DSWD/local SWD]

Mandatory Reporters and Fine for Failure to Report

SECTION 4. Mandatory Reporting. — The head of any public or private hospital, medical clinic and similar institution, as well as the attending physician and nurse, shall report, either orally or in writing, to the Department* [DSWD/local SWD] the examination and/or treatment of a child who appears to have suffered abuse within forty-eight (48) hours from knowledge of the same.

*Department – refers to a duly authorized officer or social worker of the DSWD or similar agency of a local government unit

Failure of the individuals mentioned in Section 4 above** and the administrator or head of the hospital, clinic or similar institution concerned to report a possible case of child abuse within 48 hours shall be punishable with a fine of not more than two thousand pesos (P2,000.00).

**The head of any public or private hospital, medical clinic and similar institution, as well as the attending physician and nurse

Investigation

Investigation (Sec. 8). — Not later than forty-eight (48) hours after receipt of a report on a possible incident of child abuse, the Department shall immediately proceed to the home or establishment where the alleged child victim is found and interview said child to determine whether an abuse was committed, the identity of the perpetrator and the need of removing the child from his home or the establishment where he may be found or placing him under protective custody pursuant to Section 9 of these Rules.

Whenever practicable, the Department shall conduct the interview jointly with the police and/or a barangay official.

To minimize the number of interviews of the child victim, the child’s statement shall be transcribed or recorded on voice or videotape.

Administrative Remedies

Appropriate administrative cases against perpetrators of domestic and family violence who are public officials may be filed with the Ombudsman, PLEB, PNP Internal Affairs, NAPOLCOM, and Armed Forces of the Philippines Provost Marshal.

Remedies under the Commission on Human Rights (CHR)

Guided by the nine key human rights treaties the Philippines has ratified and the Yogyakarta Principles, the CHR can look into complaints filed by women, lesbians, bisexual women, and transgender women and transgender men and investigate discrimination against intersex persons
LGBTI victims of human rights violations are entitled to assistance from the CHR Gender and Development Ombud (Sec 39 and 41, MCW):

- **Designate one Commissioner** and/or by the Women’s Human Rights Center to investigate complaints of discrimination and violations under MCW committed by individuals, agencies, institutions or establishments.
- **Recommend to the President, Department of Interior and Local Government (DILG), or the Civil Service Commission (CSC)** any possible administrative action based on noncompliance or failure to implement the provisions of the MCW. The person directly responsible for the violation as well as the head of the agency or local chief executive shall be held liable.
- **Assist in the filing of cases against public officials and agencies** that violate the provisions of MCW.
- **Assist in the filing of cases** against a private individual or private entity, institutions or establishments for violation of the Magna Carta of Women, specifically for damages and other applicable criminal laws.

**CASES INVOLVING LGBTI PERSONS AND INTERVENTION OPTIONS**

Below are sample case scenarios and corresponding options for interventions which are provided to assist service providers in handling cases of domestic violence and family violence experienced by LGBTI persons.

**FAMILY VIOLENCE INVOLVING LGBTI PERSONS AND INTERVENTION OPTIONS**

**CASE 1: 5-YEAR OLD BOY WITH FEMININE GENDER EXPRESSION.**

A mother brought her 5-year old boy to the Barangay to complain about the father’s maltreatment of the boy. The mother complained that her husband has been physically abusing their son for showing feminine gender expression. The father would not let his son eat and would hit the child with a belt every time he exhibits feminine gestures.

**Criminal cases - Violation of national laws**

- RA 7610 (Child Abuse)
- RA 9262 (Anti-VAWC)
- Physical injuries or maltreatment (Art. 266, RPC)
- Slander by deed if abuse was witnessed by a third party (Art. 359)
- Slander (Art. 358) for offensive verbal statements
- Grave Coercion (Art. 286)

**Criminal cases - Violation of local ordinances**

- QC Gender-Fair Ordinance for discrimination and abuses based on actual or perceived SOGIE (i.e., being an LGBT); filed with the MeTC (Sec. 32.1, Gender Fair Ordinance IRR):
  1. Verbal, non-verbal ridicule and vilification (Sec IV, para. 5)
  2. Harassment, unjust detention and involuntary confinement (Sec IV, para. 6);
  3. Analogous acts (Sec IV, para. 9).
| Barangay Remedies |  • Seek assistance from the Barangay VAWC Desk Officer and the BCPC.  
• The mother can apply for a BPO under RA 9262 and under the QC Gender-Fair Ordinance. |
|-------------------|--------------------------------------------------------------------------------------------------|
| DSWD or Local Social Welfare |  • **Protective Custody** under the DOJ Rule on RA 7610, Sec. 32.⁴⁹ Although the DOJ Rule specifically mentions that the child shall be placed under DSWD protective custody where there is sexual abuse or serious physical injury of life-threatening neglect (Sec. 9), the DSWD has, in the past, taken into protective custody a child suffering from various kinds of abuses.  
• **Commitment of the child with DSWD** by judicial order through a Petition for Involuntary Commitment since the child is neglected/maltreated or by voluntary commitment.  
• **Supervision of DSWD while the child stays at home** through a request made to the DSWD or by judicial order if the court decides in the Petition for Involuntary Commitment that the neglect may be remedied and the child may continue to stay at home. |
| Court Civil or Special Remedies |  • **TPO and PPO** under RA 9262;  
• **Writ of Habeas Corpus and Protection Order** (Under the Supreme Court Rule on Habeas Corpus) to ask for a stay away order; cease and desist order from harassing, intimidating, or threatening such minor; refrain from acts of commission or omission that create an unreasonable risk to the health, safety, or welfare of the minor;  
• **Writ of Amparo** for violation of the right to life, liberty and security or threatened with violation.  
• **Hold Departure Order** under RA 9262 or the Gender-Fair Ordinance Implementing Rules and Regulations prohibiting the perpetrator from leaving the country;  
• **Complaint for damages filed** with either MeTC or RTC. |
| Other Government Agencies |  • If the complainant identifies as a transgender girl, she can seek assistance from the **CHR-Gender Ombud** (Sec. 39 of RA 9710) where a complaint against the private individual can be filed for violation of the MCW and the offender can be made liable for damages and other applicable criminal laws (Sec. 41 of RA 9710). Based on the complainant’s perceived or actual SOGIE of being an LGBT, the complainant can file with the CHR based on its Constitutional mandate;  
• The complainant can seek assistance from **DOJ** under RA 7309 (Creating Board of Claims for Victims) for claims (not exceeding P 10,000 or reimbursement of medical treatment, loss of wage, or other expenses related to the injury; w/in 6 months from the incident) for victims of violent crimes including rape and offenses committed with malice resulting in death or serious physical injury and/or psychological injuries, serious trauma, or committed with torture, cruelty or barbarity.  
• **QC Protection Center** for medico-legal and health concerns, psycho-social counseling, police assistance, legal consultation, social welfare assistance, referral for shelter if needed; |
• The nearest police station with jurisdiction can arrest the perpetrator without a warrant if committed within three to five days.

CASE 2: A 9-YEAR OLD GIRL WITH MASCULINE GENDER EXPRESSION

A 9-year old girl is not allowed to go to school by her parents for showing masculine gender expression. She is forced to wear dresses and act feminine and not allowed to leave the house if she wears stereotypical boy’s clothing. The 9-year old girl was accompanied to the Barangay by the neighbor.

| Criminal cases - Violation of national laws | • RA 7610 (Child Abuse)  
• Maltreatment (Art. 266, RPC)  
• Unjust vexation (Art. 287, 2nd par.)  
• Slander by deed if abuse was witnessed by a third party (Art. 359)  
• Slander (Art. 358)  
• Grave Coercion (Art. 286)  
• Serious Illegal Detention of a minor (Art. 267, paragraph 4, RPC). |
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Criminal cases - Violation of local ordinances</td>
<td>Same violations of local ordinances as in Case No. 1</td>
</tr>
</tbody>
</table>
| Barangay Remedies | • Seek assistance from the Barangay VAWC Desk Officer and the BCPC.  
• Apply for a BPO under the QC Gender-Fair Ordinance. |
| DSWD or Local Social Welfare | Same remedies as in Case No. 1 |
| Civil Court or Special Remedies | • Writ of Habeas Corpus and Protection Order (Under the Supreme Court Rule on Habeas Corpus);  
• TRO and Permanent Injunction (Rule 58 Civil Procedure) in favor of the petitioner-victim, children, friends, relatives and those assisting the victim specifically a TRO issued ex parte (without hearing) if the victim-survivor will suffer grave injury and irreparable injury effective for 72 hours and a Permanent Injunction issued by the court after hearing perpetually restraining the person enjoined from the commission of the act;  
• Writ of Amparo  
• Hold Departure Order under the Gender-Fair Ordinance  
• Complaint for damages filed with either MeTC or RTC |
| Other Government Agencies | • The complainant can seek assistance from the CHR as Gender Ombud (Sec. 39 of RA 9710) where a complaint against the private individual can be filed for violation of the MCW and the offender can be made liable for damages and other applicable criminal laws (Sec. 41 of RA 9710)  
• The complainant can seek assistance from the DOJ Board of Claims  
• QC Protection Center  
• The nearest police station with jurisdiction to conduct warrantless arrest |

CASE 3: AN 18-YEAR OLD WOMAN WITH MASCULINE GENDER EXPRESSION
An 18-year old adult woman is not allowed to go to school by her parents for showing masculine gender expression. She is forced to wear dresses and act feminine and is not allowed to leave the house if she wears stereotypical boy’s clothing. She was detained at home for three days. The 18-year old woman was accompanied to the Barangay by the neighbor.

<table>
<thead>
<tr>
<th>Criminal cases</th>
<th>Same violations of national law as in Case No. 2 except RA 7610 (Child Abuse)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Criminal cases</td>
<td>Serious Illegal Detention would be on the ground of her being a female (Art. 267, paragraph 4, RPC).</td>
</tr>
<tr>
<td>Criminal cases</td>
<td>Same violations of local ordinances as in Case No. 1</td>
</tr>
<tr>
<td>Barangay Remedies</td>
<td>Same answer as in Case No. 2.</td>
</tr>
<tr>
<td>Civil Court/special Remedies</td>
<td>TRO and Permanent Injunction</td>
</tr>
<tr>
<td>Civil Court/special Remedies</td>
<td>Writ of Amparo</td>
</tr>
<tr>
<td>Civil Court/special Remedies</td>
<td>Hold Departure Order under the Gender-Fair Ordinance</td>
</tr>
<tr>
<td>Civil Court/special Remedies</td>
<td>Complaint for damages filed with either MeTC or RTC</td>
</tr>
<tr>
<td>Other Government Agencies</td>
<td>Same responses as in Case No. 2</td>
</tr>
</tbody>
</table>

**CASE 4: AN 18-YEAR GAY IN A RELATIONSHIP**
An 18-year old gay adult is not allowed to leave the house because his parents found out he had a boyfriend. He was detained at home for three days.

<table>
<thead>
<tr>
<th>Criminal cases</th>
<th>Same violations of national law as in Case No. 2 except RA 7610 (Child Abuse)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Criminal cases</td>
<td>Slight Illegal Detention because he is a male adult, his detention is not more than five days, he did not suffer serious physical injuries and there were no threats to kills him (Art. 268, RPC).</td>
</tr>
<tr>
<td>Criminal cases</td>
<td>Same violations of local ordinances as in Case No. 1</td>
</tr>
<tr>
<td>Barangay Remedies</td>
<td>Same answer as in Case No. 3.</td>
</tr>
<tr>
<td>Civil Court or Special Remedies</td>
<td>Same answer as in Case No. 3.</td>
</tr>
<tr>
<td>Other Government Agencies</td>
<td>Same responses as in Case No. 1 except a gay complainant does not have recourse under MCW. However, based on the complainant’s actual or perceived SOGIE (i.e., being an LGBT), the complainant can file with the CHR based on its Constitutional mandate.</td>
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</tbody>
</table>

**CASE 5: A 17-YEAR OLD GAY THROWN OUT OF HIS HOME**
A 17-year old gay boy was forced to leave home by the parents because he was found out to be gay.

<table>
<thead>
<tr>
<th>Criminal cases</th>
<th>Same violations of national law as in Case No. 2 except there was no serious Illegal Detention (Art. 267, RPC).</th>
</tr>
</thead>
</table>
DOMESTIC VIOLENCE CASES INVOLVING LGBTI PERSONS AND INTERVENTION OPTIONS.

CASE 6: ADULT TRANSGENDER WOMAN VICTIM
An adult transwoman went to the Barangay to complain against her male partner whom she has been living with for four months. She was badly beaten by her male partner because of jealousy and, before leaving their place of residence, the male partner took her wallet, laptop and jewelry.

### Criminal cases
- Violation of national laws
  - RA 9262 (Anti-VAWC; test case)
  - Physical injuries (Art. 266, Revised Penal Code)
  - Unjust vexation (Art. 287, 2nd par.)
  - Qualified Theft (Art., 310, RPC; alleging commission with grave abuse of confidence) or Robbery (Art. 292, RPC alleging by means of violence or intimidation)
  - Slander by deed if abuse was witnessed by a third party (Art. 359)
  - Slander (Art. 358).

- Violation of local ordinances
  - Same violations of local ordinances as in Case No. 1

### Barangay Remedies
- Seek assistance from the Barangay VAWC Desk Officer and the BCPC.
- Apply for a BPO under RA 9262 (test case) and under the QC Gender-Fair Ordinance

### Civil Court or Special Remedies
- TPO and PPO under RA 9262 (test case);
- TRO and Permanent Injunction
- Writ of Amparo
- Hold Departure Order under RA 9262 (test case) or under the Gender-Fair Ordinance
- Complaint for damages filed with either MeTC or RTC

### Other Government Agencies
- Same responses as in Case No. 2

CASE 7: ADULT TRANSGENDER MAN VICTIM
An adult transman and his adult female partner went to the Barangay because the female partner complained of verbal and physical abuse. The transgender man also reported that his female partner verbally and physically abused him.
### CASE 8: DOMESTIC VIOLENCE BETWEEN ADULT LESBIANS IN A RELATIONSHIP

Two adult lesbians who were in a lesbian relationship went to the Barangay because one female partner complained of verbal and physical abuse by the other partner.

| **Criminal cases** - Violation of national laws | Same answers as Case No. 7 but the RA 9262 would not be a test case anymore because RA 9262 covers lesbian relationships. |
| **Criminal cases** - Violation of local ordinances | Same violations of local ordinances as in Case No. 1 |
| **Barangay Remedies** | • Seek assistance from the Barangay VAWC Desk Officer and the BCPC.  
• Apply for a BPO under RA 9262 and under the QC Gender-Fair Ordinance |
| **Civil Court or Special Remedies** | • TPO and PPO under RA 9262  
• TRO and Permanent Injunction  
• Writ of Amparo  
• Hold Departure Order under RA 9262 (test case for transman) or Gender-Fair Ordinance  
• Complaint for damages filed with either MeTC or RTC |
| **Other Government Agencies** | Same responses as in Case No. 2 |
SEXUAL VIOLENCE CASES INVOLVING LGBTI PERSONS AND INTERVENTION OPTIONS

**CASE 9: RAPE OF 16-YEAR OLD BUTCH LESBIAN**
A 16-year old butch (male looking) lesbian was raped by her uncle who has been living with her and her family in their home.

<table>
<thead>
<tr>
<th><strong>Criminal cases</strong></th>
<th><strong>Barangay Remedies</strong></th>
<th><strong>Civil Court or Special Remedies</strong></th>
<th><strong>Other Government Agencies</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>- Violation of national laws</td>
<td>Same answers as in Case No. 2</td>
<td>Same answers as in Case No. 2</td>
<td>Same answers as in Case No. 2</td>
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</tbody>
</table>

Criminal cases for violation of national laws: RA 8353 (Anti-Rape Law).

**CASE 10: RAPE OF AN ADULT BUTCH LESBIAN**
An adult femme (female looking) lesbian was raped by her uncle who has living with them in their home.

<table>
<thead>
<tr>
<th><strong>Criminal cases</strong></th>
<th><strong>Barangay Remedies</strong></th>
<th><strong>Civil Court or Special Remedies</strong></th>
<th><strong>Other Government Agencies</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>- Violation of national laws</td>
<td>Same answers as in Case No. 3.</td>
<td>Same answers as in Case No. 3.</td>
<td>Same answers as in Case No. 3.</td>
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<tr>
<td>RA 8353 (Anti-Rape Law)</td>
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<tr>
<td>- Violation of local ordinances</td>
<td>Same answers as in Case No. 3.</td>
<td>Same answers as in Case No. 3.</td>
<td>Same answers as in Case No. 3.</td>
</tr>
</tbody>
</table>

**THE PARENT OF AN LGBTI PERSON AS PERPETRATOR AND INTERVENTION OPTIONS**

**CASE #11: ADULT LESBIAN ACCUSED OF KIDNAPPING**
A mother who filed kidnapping charges with the police against the live-in partner of her adult lesbian daughter to separate from her adult lesbian partner. The mother uttered hurtful words to the lesbian partner and threatened to slap the lesbian partner in the heat of anger.

<table>
<thead>
<tr>
<th><strong>Criminal cases</strong></th>
<th><strong>Barangay Remedies</strong></th>
<th><strong>Civil Court or Special Remedies</strong></th>
<th><strong>Other Government Agencies</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>- Violation of national laws</td>
<td>Cases that can be filed against the mother:</td>
<td>Same answers as in Case No. 3.</td>
<td>Same answers as in Case No. 3.</td>
</tr>
<tr>
<td></td>
<td>- Light Threats (Art. 285 par. 2, RPC)</td>
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<td>- Unjust vexation (Art. 287, 2nd par.)</td>
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<td>- Slander (Art. 358)</td>
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<td></td>
<td>- Violation of local ordinances</td>
<td>Same answers as in Case No. 3.</td>
<td>Same answers as in Case No. 3.</td>
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</table>
THE LGBTI PERSON AS PERPETRATOR OF SEXUAL VIOLENCE AND INTERVENTION OPTIONS

CASE #12: STATUTORY RAPE OF AN ADULT GAY MAN
A gay man has been living with a 14-year old boy succeeded in having sexual intercourse with the boy with the use of money.

<table>
<thead>
<tr>
<th>Criminal cases</th>
<th>RA 7610 (Child Abuse) and Expanded Anti-Trafficking</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Violation of national laws</td>
<td></td>
</tr>
<tr>
<td>Criminal cases</td>
<td>Same answers as in Case No. 2.</td>
</tr>
<tr>
<td>- Violation of local ordinances</td>
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</tr>
<tr>
<td>Barangay Remedies</td>
<td>Same answers as in Case No. 2.</td>
</tr>
<tr>
<td>Civil Court/special Remedies</td>
<td>Same answers as in Case No. 2.</td>
</tr>
<tr>
<td>Other Government Agencies</td>
<td>Same answers as in Case No. 2.</td>
</tr>
</tbody>
</table>

PROTECTION CLAUSES

PROTECTION OF COMPLAINANT UNDER NATIONAL LAWS

- No dismissal of criminal complaint based on affidavit of desistance
  - Criminal complaints will not be dismissed based on issuance of an affidavit of desistance in Child Abuse (RA 7610)\(^{50}\) cases and Anti-trafficking cases (RA 10364).\(^{51}\)

- Protection against Retaliatory Suits, Pressure to abandon complaints; Protecting Monetary Claims Against the Perpetrator Through Injunction and Attachment
  - Anti-Child Abuse Law (RA 10364)
  - Legal Protection to Trafficked Persons (Sec. 17). – Trafficked persons shall be recognized as victims of the act or acts of trafficking and as such, shall not be penalized for unlawful acts committed as a direct result of, or as an incident or in relation to, being trafficked based on the acts of trafficking enumerated in this Act or in obedience to the order made by the trafficker in relation thereto. In this regard, the consent of a trafficked person to the intended exploitation set forth in this Act shall be irrelevant.
  - Victims of trafficking for purposes of prostitution as defined under Section 4 of this Act are not covered by Article 202 of the Revised Penal Code and as such, shall not be prosecuted, fined, or otherwise penalized under the said law.
  - Immunity from Suit, Prohibited Acts and Injunctive Remedies (Sec. 17-C).
  - The prosecution of retaliatory suits against victims of trafficking shall be held in abeyance pending final resolution and decision of criminal complaint for trafficking.
  - It shall be prohibited for the DFA, the DOLE, and the POEA officials, law enforcement officers, prosecutors and judges to urge complainants to abandon their criminal, civil and administrative complaints for trafficking.
  - The remedies of injunction and attachment of properties of the traffickers, illegal recruiters and persons involved in trafficking may be issued *motu proprio* by judges.

PROTECTION OF COMPLAINANTS UNDER THE QC GENDER FAIR ORDINANCE:

- Prohibited Defense (Sec. 26) - Being under the influence of alcohol, any illicit drug or any other mind-altering substance shall not be a defense of an abuser under the Ordinance.
- Hold Departure Order (Section 27) – [cite the IRR]
Confidentiality – At any stage of the investigation, rescue, prosecution and trial of an offense under the Ordinance, law enforcement officers, prosecutors, judges, court personnel, social workers and medical practitioners, as well as parties to the case, shall protect the right to privacy of the complainant (Sec. 30, Sec. 30.6, Sec. 35.2), identities of children of LGBTI persons (Sec. 30.5, Sec. 35.5), and the complainant’s family shall not be disclosed to the public with the exception of the QC pride Council, accredited NGOs supporting LGBT rights and researchers who will use the information to assist the victim-survivor or use the information for research purposes to raise awareness on issue related to SOGIE (Sec. 30.2), including the media (Sec. 30.4, Sec. 35.4)

Privacy of legal process (Sec. 30.1, 35.1) – Law enforcement officers, prosecutors, judges to whom the complaint has been referred may, whenever necessary to ensure a fair and impartial proceeding, and after considering all circumstances for the best interest of the parties, order a closed-door investigation, prosecution or trial.

The investigating officer or prosecutor shall inform the parties that the proceedings can be conducted in a language known or familiar to them Sec. 30.3.

Violation and Discrimination Shield (Sec. 34) – evidence of complainant’s past sexual conduct, sexual behavior and expression and opinion thereof of the person’s reputation shall not be admitted.

Sec. 35.3 The investigating officer or prosecutor shall inform the parties that the proceedings can be conducted in a language known or familiar to them.

Sec. 35.6 Any Person Who Violates this Provision shall suffer the penalty of one (1) year imprisonment and a fine of not more than Five Thousand Pesos (5,000)

PROTECTION OF SERVICE PROVIDERS AND OTHER PERSONS FROM LIABILITY
Service providers are protected from liability under RA 7610, RA 9262 and RA 10364.

Anti-Child Abuse Law (RA 7610)
  o Immunity from Liability of DSWD/LSWDO taking Protective Custody (Sec. 28). Protective Custody of the Child. – X x x In the regular performance of this function, the officer of the Department of Social Welfare and Development shall be free from any administrative, civil or criminal liability.
  o Immunity from Liability of DSWD/LSWDO taking Protective Custody and the Assisting
  o Barangay Official and Police Officer under the DOJ Rules on RA 7610 (Sec. 10). Immunity of Officer Taking the Child under Protective Custody. — The duly authorized officer or social worker of the Department* [DSWD/Local Social Welfare Development Office] and the assisting police officer or barangay official, if any, who shall take a child under protective custody shall be exempt from any civil, criminal and administrative liability therefor.
  *Department – refers to a duly authorized officer or social worker of the DSWD or similar agency of a local government unit/LSWDO.52
  o Immunity of Persons Reporting (Sec 7). Immunity for Reporting. — A person who, acting in good faith, shall report a case of child abuse shall be free from any civil or administrative liability arising therefrom. There shall be a presumption that any person acted in good faith.

Anti-VAWC Law (RA 9262)
  o Any person, police, barangay official acting in accordance with law & w/o using violence or restraint greater than necessary to ensure safety of the survivor shall not be liable for any criminal, civil or administrative liability (Sec. 34).
  o Implementing Rules and Regulations (IRR RA 9262)
- **Persons Intervening Exempt from Liability, (Sec. 43).** – In every case of VAWC as herein defined, any person, private individual or police authority or barangay official who, acting in accordance with law, responds or intervenes without using violence or restraint greater than necessary to ensure the safety of the victim-survivor, shall not be liable for any criminal, civil or administrative liability resulting therefrom.

- Workers of NGOs, POs, church, civic and other groups, be they Filipino citizens or foreigners, fall under “any person,” are free from any criminal or civil liability when acting in accordance with law in responding to a call for help or when assisting the victim-survivor.

- **Expanded Anti-Trafficking Law (RA 10364)**
  - **Immunity from Suit, Prohibited Acts and Injunctive Remedies (Sec. 17-C).** – No action or suit shall be brought, instituted or maintained in any court or tribunal or before any other authority against any: (a) law enforcement officer; (b) social worker; or (c) person acting in compliance with a lawful order from any of the above, for lawful acts done or statements made during an authorized rescue operation, recovery or rehabilitation/intervention, or an investigation or prosecution of an anti-trafficking case: Provided, that such acts shall have been made in good faith.

- **RESCUE**
  - **Immediate Rescue by the Barangay or Law Enforcement Agency Even Without a Social Worker If Child’s Safety will be Compromised**

- **Anti-Child Abuse Law (RA 7610)**
  - **The Committee for the Special Protection of Children Protocol for Case Management of Child Victims of Abuse, Neglect, and Exploitation issued a Protocol stating the following:**
    - “The barangay or law enforcement agency...may immediately rescue a child if coordinating the rescue operations with the nearest available social worker would compromise the safety of the child. As soon as the child is rescued, the child shall be endorsed to LSWDO and the rescue operations entered in the barangay and/or LEA blotter.”

- **Expanded Anti-Trafficking Law (RA 10364)**
  - **Temporary Custody of Trafficked Victims (Sec. 17-A).** – The rescue of victims should be done as much as possible with the assistance of the DSWD or an accredited NGO that services trafficked victims. A law enforcement officer, on a reasonable suspicion that a person is a victim of any offense defined under this Act including attempted trafficking, shall immediately place that person in the temporary custody of the local social welfare and development office, or any accredited or licensed shelter institution devoted to protecting trafficked persons after the rescue.

**PROTECTION OF SERVICE PROVIDERS/INDIVIDUALS PROVIDING ASSISTANCE:**

- **Legal Protection for Persons Intervening and Assisting Victims (Sec. 13)** – In every case of discrimination and violence against LGBTQ persons on the basis of SOGIE as herein defined, any person, private individual or police authority or barangay official who, acting in accordance with law, responds or intervenes without using violence or restraint greater than necessary to ensure the safety of the victim-survivor, shall not be liable for any criminal, civil, administrative liability.

- Parties that may be report to police authority or barangay are the following:
- Offended party;
- Offended party’s spouse or common law partner whether of the same or opposite sex;
- Parents or guardian of offended party;
- Ascendants, descendants or collateral relatives within the fourth civil degree of consanguinity or affinity;
- Officers or social workers of the DSWD or social workers of local government units (LGUs);
- Police officers, preferably those in charge of women and children’s desks;
- Punong Barangay or Barangay Kagawad;
- Officers or members of LGBTIQ People’s Organizations in the barangays or community-based organizations; and
- At least two (2) concerned responsible citizens of the city or barangay where the discriminatory incident occurred and who has personal knowledge of the offense committed.
- Anonymous reporting involving acts of discrimination and violence against LGBTIQ persons on the basis of actual or perceived SOGIE, initiated by persons who prefer anonymity shall be entertained, and the person who reported the incident shall be afforded protection from possible retaliation.

**PRIVACY AND CONFIDENTIALITY**

As service providers, part of providing sensitive and appropriate assistance is ensuring the privacy and safety of the victim-survivor at all times.

**PRIVACY AND CONFIDENTIALITY**

The following laws provide protection for confidentiality:

- **Anti-Child Abuse Law (RA 7610)**
  - Confidentiality (Sec. 29). - At the instance of the offended party, his name may be withheld from the public until the court acquires jurisdiction over the case.
  - It shall be unlawful for any editor, publisher, and reporter or columnist in case of printed materials, announcer or producer in case of television and radio broadcasting, producer and director of the film in case of the movie industry, to cause undue and sensationalized publicity of any case of violation of this Act which results in the moral degradation and suffering of the offended party.

- **Rape Victim Assistance and Protection Act of 1998 (RA 8505)**
  - Protective measures (Sec. 5). — At any stage of the investigation, prosecution and trial of a complaint for rape, the police officer, the prosecutor, the court and its officers, as well as the parties to the complaint shall recognize the right to privacy of the offended party and the accused. Towards this end, the police officer, prosecutor, or the court to whom the complaint has been referred may, whenever necessary to ensure fair and impartial proceedings, and after considering all circumstances for the best interest of the parties, order a closed-door investigation, prosecution or trial and that the name and personal circumstances of the offended party and/or the accused, or any other information tending to establish their identities, and such circumstances or information on the complaint shall not be disclosed to the public.
The investigating officer or prosecutor shall inform the parties that the proceedings can be conducted in a language or dialect known or familiar to them.

### Anti-VAWC Law (RA 9262)

- **Confidentiality (Sec. 44).** All records pertaining to cases of violence against women and their children including those in the barangay shall be confidential and all public officers and employees and public or private clinics or hospitals shall respect the right to privacy of the victim. Whoever publishes or causes to be published, in any format, the name, address, telephone number, school, business address, employer, or other identifying information of a victim or an immediate family member, without the latter’s consent, shall be liable to the contempt power of the court.
- Any person who violates this provision shall suffer the penalty of one (1) year imprisonment and a fine of not more than Five Hundred Thousand Pesos (P 500,000.00).

### Expanded Anti-Trafficking Law (RA 10364)

- **Confidentiality (Sec. 7).** At any stage of the investigation, rescue, prosecution and trial of an offense under this Act, law enforcement officers, prosecutors, judges, court personnel, social workers and medical practitioners, as well as parties to the case, shall protect the right to privacy of the trafficked person.
  
  Towards this end, law enforcement officers, prosecutors and judges to whom the complaint has been referred may, whenever necessary to ensure a fair and impartial proceeding, and after considering all circumstances for the best interest of the parties, order a closed-door investigation, prosecution or trial.

  The name and personal circumstances of the trafficked person or any other information tending to establish the identity of the trafficked person and his or her family shall not be disclosed to the public.

- It shall be unlawful for any editor, publisher, and reporter or columnist in case of printed materials, announcer or producer in case of television and radio, producer and director of a film in case of the movie industry, or any person utilizing tri-media facilities or electronic information technology to cause publicity of the name, personal circumstances, or any information tending to establish the identity of the trafficked person except when the trafficked person in a written statement duly notarized knowingly, voluntarily and willingly waives said confidentiality.

- Law enforcement officers, prosecutors, judges, court personnel, social workers and medical practitioners shall be trained on the importance of maintaining confidentiality as a means to protect the right to privacy of victims and to encourage victims to file complaints.

### Use of alias for the child victim-survivor

- The police blotter, child’s sworn statement, police investigation report, endorsement letter to Prosecutors Office, resolution, criminal information, court calendar, arraignment, court decision shall indicate the alias used to protect the identity of the child (e.g., Minor AAA versus Juan de la Cruz). Send all preliminary investigation and subpoena to the child’s given address.

### For prosecutors, observe color-coding case folders

- (e.g., pink case file for child abuse; violet case file for VAW-related cases)
PREVENTION AND MONITORING OF LGBTI VICTIM-SURVIVORS

SOGIE-related domestic and family violence must be stopped. Such violence is not a private matter. The parents, siblings, family, community and the service providers must take immediate and effective intervention and must recognize the danger and threat to life and limb.

Due Diligence of Service Providers

Service providers must prevent, investigate, and provide the necessary assistance should the victim-survivor decide to prosecute. Such due diligence in holding perpetrators of SOGIE-related domestic and family violence will prevent any further acts of violence.

Awareness-raising, Home Visits, Monitoring

The barangay officials and the community must be involved in prevention activities including awareness-raising trainings on the rights of LGBTI persons and the remedies under the law, intervention, home visits, among others. Home visits by the barangay and community members can deter future acts of abuse and even strengthen the resolve of the victim-survivor in finally deciding to sever the ties with the abusive domestic partner or leave the abusive home.

Accompanying victim-survivors when seeking medical, medico-legal, psycho-social and legal services and in pursuing their civil, criminal, and administrative cases is crucial to the empowerment, well-being, recovery, and reintegration of the victim-survivor. This also bolsters the victim-survivor’s resolution to pursue her/his case, greatly impacting the success of the victim-survivor’s access to justice.

Comprehensive Education of Marginalized Groups and Sectors

Discussion about issues of LGBTI persons and other marginalized sectors and groups should be included as part of the education and information programs barangays offer to the communities they serve. Long-held misinformation and prejudicial opinions of people about LGBTI persons should be corrected even before discrimination, violence and abuse happen. Issues about intersectionality should be part of a broad review and revision of services being offered and in future plans of barangays.

Coordinate with private and government schools covered by the Barangay

The barangay can coordinate with public and private elementary and secondary schools on prevention efforts especially since the Barangay Chairperson can designate a BCPC member as the representative to the school Child Protection Committee in line with the DepEd Child Protection Policy (DepEd Order No. 40, s. 2012).

Separate logbook

The Barangay Secretary shall record all BPOs in a logbook specifically for cases of violence and discrimination against LGBTI persons on the basis of their actual or perceived SOGIE. This logbook is confidential and must be kept form the public especially from media. All issued BPOs should be reported to the Field office of the Department of Interior and Local Government (DILG), Quezon City Police District (QCPD) The Quezon City Pride Council (QCPC), the Commission on Human Rights (CHR) and in other designated agencies in Quezon City.
ANNEXES

ANNEX A – DIRECTORY OF SERVICES

MEDICO LEGAL EXAMINATION CENTERS
- Emergency rooms of government hospitals (e.g., Quezon City General Hospital)
- PNP Crime Laboratory (e.g., Camp Crame Crime Laboratory, Quezon City PNP Station 10);
- Women and Children Protection Units and Protection Centers at government hospitals;

COUNSELING FOR LGBTI VICTIMS
- National Center for Mental Health for survivors with mental disability;
- QC Protection Center for Gender-based Violence, QC General Hospital and Medical Center, Seminary Road, Quezon City;
- UP-PGH Child Protection Unit or any Women and Children Protection Unit in the locality;
- UP-Philippines General Hospital (PGH) Women’s Desk;
- Women’s Crisis Center, St. Scholastica Archives & Museum Center, Pablo Ocampo St., Manila;
- Any center providing such services
  - Psychiatry Department, Eastern Visayas Regional Medical Center (EVRMC);
  - Mental Health Dept., Cotabato Regional & Medical Center)

HOTLINES
Metro Manila
- Center for the Prevention and Treatment of Child Sexual Abuse (CPTCSA) – (02)4347528; (02)4267839
- International Justice Mission (IJM) - (02)6373983; (02)6385615; (02)6385621
- Inter-Agency Council Against Trafficking (IACAT) Action Line – Dial 1343
- National Bureau of Investigation (NBI) Anti-Trafficking – (02)5238231 to 38
- NBI Anti-VAWC Division - (02)5256028; (02)3027623; (02)5238231 to 38 Loc. 3444
- NBI Cyber Crime Division - (02)5238231 to 38 Loc. 3454
- Philippine National Police - Dial 911; trunk line (02)7230401
- Philippine National Police (PNP) Anti-Cybercrime Group (ACG) –(02)4141550
- PNP Crime Laboratory – (02)4143334; (02)7230401 loc. 4436
- PNP DNA Analysis Branch – Lt. Alagar Street, Camp Crame, Quezon City, Philippines (02)7230401 loc. 4516
- PNP Women and Children Protection Division (WCPD), CIDG – (02)5846511; (02)7230401 loc. 5232
- Quezon City Protection Center, QC General Hospital and Medical Center, Seminary Rd., Quezon City - (02)4261318 loc.1047; 533-4586
- Women’s Care Center, Inc. (WCCI) formerly Women Crisis Center (WCC), St. Scholastica’s Archives-Museum, 844 Pablo Ocampo St., Brgy. 279, Malate, Manila City –0928-4200859/0999-5779631/0916-2467470

REPRODUCTIVE HEALTH SERVICES
- Caloocan Population Services Pilipinas, Inc. – (02) 3639052
- Manila UP PGH Teen Mom Program (Dr. Emma Llanto) – (02) 554-8400 (Trunk line)
- Ob-Gyne Dept., QC General Hospital and Medical Center – (02) 4261318 (trunk line)
- Quezon City Adolescent Medicine, Philippine Children’s Medical Center (Dr. Rosa Ma. Nancho, Chair; Dr. Erlinda Cuisia Cruz) – (02)9246601/25
- Women’s Health Care Foundation – 9264045
LESBIAN, GAY, BISEXUAL, TRANSGENDER, AND INTERSEX (LGBTI) GROUPS

- Association of Transgender Men of the Philippines (Pinoy Transman) (ATMP) – Nil Nodalo; nicholasgene_09@yahoo.com
- Association of Transgender People in the Philippines (ATP) – Kate Montecarlo; 09164212582; katemontecarlo1986@gmail.com
- Bahaghari Advocacy Group – 09183899952, bahaghariadvocacygroup@gmail.com
- Bahaghari LGBT Organization
- Cebu Coalition for the Liberation of the Reassigned SEx (COLORS) – 09321852159, colorful.colors@gmail.com
- Cordillera Rainbow Connect - https://www.facebook.com/groups/benguetfinestlilies/
- GALANG Philippines – Unit 312 Llanar Building, 77 Xavierville Ave, Quezon City, (02) 4354103, 09272933731, galangphilippines@gmail.com
- GANDA Filipinas – Naomi Fontanos 09202697607; ganda.filipinas@gmail.com
- Initiative and Movement for Gender Liberation against Discrimination (IM GLAD) – 09362505086
- Kapederasyon LGBT Organization - 09296082502, 09177262553, 09173569254, kapederasyon@gmail.com
- Pinoy FTM – 09162954797, pinoyftm@gmail.com
- Promoting Rights and Equality for Society's Marginalized (PRISM) – 09173122524, prisminc2013@gmail.com
- Rainbow Rights Project, Inc. (R-Rights) - (02) 4330149, rainbowrightsproject@gmail.com
- SHINE Mindanao, General Santos City - shine.mindanao@gmail.com
- Society of Transsexual Women of the Philippines (STRAP) – strapmanila@gmail.com

PEOPLE LIVING WITH HIV (PLHIV) SUPPORT GROUPS

- Babae Plus - Telefax: 02-52845
- Pinoy Plus – (02) 7437293
- The Red Ribbon Project – Email: contact@ProjectRedRibbon.org , www.ProjectRedRibbon.org
- The Lovelife Project for Health and Environment, Inc. - Unit 401 Wil-Vic Bldg. 96 V. Luna Ave. Quezon City, (02)433-4328/+639472974677, thelovelife.ph@gmail.com

SEXUAL ORIENTATION, GENDER IDENTITY AND GENDER EXPRESSION (SOGIE) COUNSELING

- Ateneo Psychology Department – (02) 426-6001 local 5260-62; 426-5905
- De La Salle University (DLSU) Psychology Dept., Taft – (02) 524-4611 (trunk line)
- DLSU-Dasmariñas Student Wellness Center – (02) 779-5180 and (046) 481-1900 to 1930
- Ramon Magsaysay High School-Cubao Guidance Department – (02) 727-1046
- University of the East (UE) Guidance Dept., Caloocan City – (02) 365-4124; (02) 367-4572 loc. 175
- UP Gender Office – Precy Tulipat

PSYCHOLOGICAL/PSYCHIATRIC COUNSELING CENTERS

- Metro Manila QC Protection Center, Quezon City – (02) 4261318 loc. 1047; 533-4586
- National Center for Mental Health – (02)5319001
- PSYCHPROS - (Dr. Leticia Peñano-Ho) (02) 7242038; (02) 7239750
- University of the Philippines Center for Women’s Studies (UP CWS) Magsaysay Ave. corner Ylanan road, Diliman Quezon City, (02)9206950
- UP Diliman Gender Office – 2nd Floor of Benton Hall, Palma Hall Annex (PHAN) M. Roxas Street, 981-85-00 Local 2467 (Central), Counseling Number: Local 2465, Direct line: 9269053, updgo@upd.edu.ph
- UP Philippines General Hospital (PGH) Child Protection Unit, Taft Ave., Manila – (02) 5268418
- UP PGH Women’s Desk, Taft Ave., Manila – (02) 554-8400 Loc. 2435, 3072; Fax: (02) 5242990
- Women’s Care Center, Inc., Manila City –0928-4200859; 0999-5779631; 0916-2467470
SUICIDE INTERVENTION
▪ Natasha Goulbourn Foundation – (02)8972217

SIGN LANGUAGE INTERPRETERS FOR DEAF SURVIVORS
▪ De La Salle’s College of Saint Benilde School of Deaf Education and Applied Studies (CSB-SDEAS) – Joy Villareal, Trunk line 2305100 loc. 1661, 0917-8698231, deaf.partnerships@benilde.edu.ph
▪ Deaf Resources Philippines - Dr. Liza B. Martinez - 0927.5288662; 9941441; deafresourcesphilippines@mail.com
▪ Philippines National Association of Sign Language Interpreters (PINASLI)

Visayas
Tacloban, Leyte
▪ City Social Welfare and Development Office (CSWDO) – 09159664456 (Lili Baltazar, Social Worker, CSWDO)
▪ PNP Crime Laboratory, Police Regional Office 8, Camp Ruperto Kangleon, Palo, Leyte – (053)323-7730
▪ Tacloban Central Police Station – 09176317752
▪ Women & Children Protection Unit (WCPU), Eastern Visayas Regional Medical Center (EVRMC) – (053) 8321126
▪ Women’s Shelter - 09289969244 (Carmela Bastes, Center Head, City Social Welfare)

Borongan City, Eastern Samar
▪ Eastern Samar Provincial Police Office– 09174268861; (055)2613830; 09998408922 (SPO1 Katherine Poro)
▪ Eastern Samar Provincial Social Welfare and Development Office (PSWDO) – 09176323855 (Gil Remabontan);
  09218106742 (Gil Remabontan)
▪ Provincial Crisis Intervention Center – 09393589925 (Maria Myrla Arma)
▪ WCPU, Eastern Samar Provincial Hospital (ESPH)– (055)5609555

Balangkayan, Eastern Samar
WCPU, LGU Balangkayan – 09177216694 (Dr. Nelsie Labro) ; 09062360115 (Daisy E. Rosaldo, WCPDO)

Salcedo, Eastern Samar
▪ WCPU, LGU Salcedo – 09208049678 (Dr. Ma. Socorro S. Campo)

Metro Manila
▪ Center for the Prevention and Treatment of Child Sexual Abuse (CPTCSA) – (02)4347528; (02)4267839
▪ Inter-Agency Council Against Trafficking (IACAT) Action Line 1343
▪ International Justice Mission (IJM) - (02)6373983; (02)6385615; (02)6385621
▪ NBI Anti-VAWC Division - (02)5256028; (02)3027623; (02)5238231 to 38 Loc. 3444
▪ Philippine National Police - 117; Trunk line (02)7230401
▪ PNP Crime Laboratory – (02)4143334; (02)7230401 loc. 4436
▪ PNP DNA Laboratory – (02)7230401 loc. 4516
▪ QC Protection Center, QC General Hospital and Medical Center, Quezon City - (02) 4261318 loc.1047; 533-4586
▪ Women and Children Protection Division (WCPD), CIDG – (020)5846511; (02)7230401 loc. 5232
▪ Women’s Care Center, Inc., Manila City –0928-4200859/0999-5779631/0916-2467470

Mindanao
▪ Community and Family Service International (CFSI), Cotabato City - 09175342374
▪ Iligan City Council of Women (ICCW), Iligan City – 09164007967/09358568454
ANNEX B – QC PROTECTION CENTER

The Quezon City Protection Center for Women, Children and LGBT victim- survivors of Violence and Abuse is a one-stop shop crisis center for women, children, and LGBTI persons who are victim-survivors of gender-based violence and abuse.

Services:
1) Medico – legal Services and Medical Care
2) Legal Consultation
3) Police Assistance
   - Assistance in filing criminal complaints
   - Follow up/Monitoring of cases
4) Barangay Assistance (for BPO issuance)
5) Psychiatric/Psychological Evaluation and Counseling and Therapy
6) Social Service Assistance (shelter assistance, home visits; referral for rescue/protective custody)
7) Temporary Shelter/Safekeeping of at-risk clients
8) Livelihood and educational Support
9) Follow up and monitoring of clients and cases
10) Educational seminars and internship training

Address and Contact Information:

QC Protection Center Building
Quezon City General Hospital and Medical Center
Seminary Road, Quezon City

Tel. No. 533-4586; (02) 4261318 loc.1047
Monday through Friday 8:00 am – 5:00 pm
Facebook Page: facebook.com/quezoncityprotectioncenter
Email Add: quezoncityprotectioncenter@gmail.com
ANNEX C.1. SAMPLE BARANGAY PROTECTION ORDER (BPO)

NAME OF RESPONDENT: ________________________________________________

ADDRESS: _____________________________________________________________

ORDER: ____________ applied for a Barangay Protection Order (BPO) on ________, under oath stating that: ______________________________________________________________
_______________________________________________________________________________

After having heard the application and the witnesses and evidence, the undersigned hereby issues this BPO ordering you to immediately cease and desist from causing or threatening to cause physical harm to and from harassing, annoying, telephoning, contacting or communicating with the person of ________________________ and/or her child/children namely:

_______________________________________________________________________________

This BPO is effective for fifteen (15) days from receipt.
VIOLATION OF THIS ORDER IS PUNISHABLE BY LAW.

Punong Barangay: ___________________________ Date issued: ________________
Copy received by: __________________________ Date received: ________________
Served by: __________________________

Valid Modes of Service:
1) The BPO is deemed served upon receipt thereof by the respondent or by any adult who received the BPO at the address of the respondent;
2) In case the respondent or any adult at the residence of the respondent refuses to receive the BPO, it shall be deemed served by leaving a copy of the BPO at the said address in the presence of at least two (2) witnesses. The barangay official serving the BPO must issue a certification setting forth the manner, place and date of service.

(Section 13, Rules and Regulations Implementing RA 9262)

ATTESTATION (in case the Punong Barangay is unavailable)

I hereby attest that Punong Barangay _____________________ was unavailable to act on the Application for

Barangay Protection Order No. ______ filed by ________________________________ on _____________ at
_______________a.m./p.m. and issue such order.

________________________________
Barangay Kagawad
C.2. **SAMPLE APPLICATION FOR BARANGAY PROTECTION ORDER**

**BPO Application Form**
(Sample)

Republic of the Philippines
Province of __________
City/Municipality __________
Barangay __________

**APPLICATION FOR BARANGAY PROTECTION ORDER**

1. NAME OF APPLICANT: ____________________  DATE OF BIRTH: ______
ADDRESS: ________________________________  TEL. NO.: ______
RELATIONSHIP TO VICTIM/S: ________________  OCCUPATION: ____________

2. NAME OF VICTIM/S: _____________________  DATE/S OF BIRTH: ______
ADDRESS: ________________________________  TEL. NO.: ______
OCCUPATION/SOURCE OF INCOME: ____________
CIVIL STATUS:
__ Single  __ Married  __ Widow  __ Separated  __Legally Separated  __Common law/Live-in

3. NAME/S OF CHILDREN:  DATE/S OF BIRTH:  SEX:
____________________  ________________  __
____________________  ________________  __
____________________  ________________  __
____________________  ________________  __

OTHER CHILDREN UNDER HER CARE:  DATE/S OF BIRTH:  SEX:
____________________  ________________  __
____________________  ________________  __

4. NAME OF RESPONDENT: _____________________  DATE/S OF BIRTH: ___
ADDRESS: ________________________________  TEL. NO.: ______
OCCUPATION/SOURCE OF INCOME: ________________
CIVIL STATUS:
__ Single  __ Married  __ Widow  __ Separated  __Legally Separated  __Common Law/Live-in
5. RELATIONSHIP OF VICTIM TO RESPONDENT:

__ Wife  __ Former Wife  __ Live-in Relationship  __ Former Live-in Relationship
__ Dating Relationship  __ Former Dating Relationship
__ Sexual Relationship  __ Former Sexual Relationship

6. ACTS COMPLAINED OF:  __ Threats  __ Physical Injuries

DESCRIPTION:__________________________________________________
_____________________________________________________________

7. DATE/S OF COMMISSION: ______________________

8. PLACE/S OF COMMISSION: _____________________

9. If applicant is not the victim, state the circumstances of consent:
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________

  Applicant                  Date

  ____________________________________________________________

  Signature over Printed Name

VERIFICATION OF THE PUNONG BARANGAY

I certify that the applicant for BPO who personally appeared before me is a bonafide resident of this barangay and is the same person who supplied all the above information and attested to the correctness of said information.

______________________________
Punong Barangay
Signature over Printed Name
Date Issued: ______

Consent - Pahintulot

OFFICE OF THE VICE MAYOR
QUEZON CITY PROTECTION CENTER
● QUEZON CITY GENERAL HOSPITAL MEDICAL CENTER ● SEMINARY ROAD, EDSA, QUEZON CITY

By signing this form, you authorize QCPC physicians to perform the medical exam requested by the patient, parent, and/or guardian. Parental consent for an evidentiary examination is not legally required in cases of known or suspected child abuse. A social worker, or other adult acting as the child's guardian, may authorize the exam in place of the child's parent(s). If you have questions, please contact your local Department of Social Welfare and Development office.

Ang paglagda sa papel na ito ay nangangahulugang pinahintulutan ang mga doktor ng QCPC na magsagawa ng pagisayat pang-medikal ayon sa kahilingan ng pasyente, magulang, at/o tagapag-alaga. Hindi kinakailangan ang pahintulot mula sa magulang sa mga kasong tinitiyak o pinagbibinaalang na may naganap na pang-aabuso. Maaaring magbigay ng pahintulot ang isang social worker o sino mang nakatatanda na tumatayong tagapag-alaga sa bata. Kung may mga katanungan, maaari pong makipag-ugnayan sa DSWD sa inyong lugar.

I hereby request a medical examination of ________________________, ________ years old, for evidence of sexual and/or physical abuse and treatment for injuries. I understand that collection of evidence may include photographing injuries and these photographs may include the genital area. All such photographs are part of the patient’s confidential medical record. I further understand that hospitals and physicians are required by law to notify child protective agencies (e.g., DSWD) about the incident.

Hinihiling kong masiyasat at mabigyan ng karampatang lunas si ________________________, ________ gulang, ng isang doktor upang matugunan ang anumang hinala hinggil sa anumang anyo ng abuso. Batid ko na maaaring sa pangangalap ng katibayan ay may pangangailangang kunan ng mga larawan ang ilang bahagi ng katawan tulad ng "genitalia" o maseselang bahagi. Ang lahat ng larawan ay mananatiling bahagi ng mga dokumentong itinuturing na kompidesyal (confidential). Batid ko rin na tungkulin ng mga pagamutan/ospital at/o daluhhasa/doktor na ipagbigay-alam sa mga ahensiya para sa pangangalaga ng mga bata, tulad ng DSWD, ang pangyayari.

Child’s name (pangalan ng bata) _____________________________________________

Printed name of guardian (pangalan ng tagapag-alaga) __________________________

Signature of guardian (lagda ng tagapag-alaga) ________________________________

Relation to child (kangyayay sa bata) _______________________________________

Others accompanying child to CPU (iba pang kasama) __________________________

Date (petsa) _____ / _____ / _____ Time (oras) _____ : _____
## C.3. SAMPLE INTAKE FORM

### PROPOSED INTAKE FORM
QUEZON CITY BARANGAY ________________

<table>
<thead>
<tr>
<th>CLIENT'S LEGAL NAME:</th>
<th>CASE NO:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preferred name: (If different from name in birth certificate):</td>
<td></td>
</tr>
<tr>
<td>Nickname or alias:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Birthdate:</th>
<th>AGE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sex at birth: ___ Male ___ Female</td>
<td>Date &amp; time of intake:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Case manager:</th>
<th>Social worker:</th>
</tr>
</thead>
</table>

| PRIMARY COMPLAINT: ___ Physical abuse ___ Sexual abuse ___ Neglect |
|---------------------|--------------------|

<table>
<thead>
<tr>
<th>SERVICE SOUGHT: ___ Complaint ___ Full eval ___ Physical exam ___ Interview ___ Referral ___ intervention ___ Police</th>
</tr>
</thead>
</table>

| Informant name: | |
|-----------------||
| Informant address & contact no: | |
| Informant relation to complainant: | |

### CLIENT'S CONTACT INFORMATION

<table>
<thead>
<tr>
<th>Sexual Orientation: * Sexual orientation is who you are romantically, emotionally, physically attracted to.</th>
</tr>
</thead>
<tbody>
<tr>
<td>___ Heterosexual (opposite sex attraction) ___ Bisexual (attracted to female or male)</td>
</tr>
<tr>
<td>___ Lesbian (female attracted to female) ___ Not sure</td>
</tr>
<tr>
<td>___ Gay (male attracted to male)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gender Identity: * Gender identity is how you see yourself regardless of the sex you are born with.</th>
</tr>
</thead>
<tbody>
<tr>
<td>___ Male ___ Female</td>
</tr>
<tr>
<td>___ Transgender man (born female, identify as male)</td>
</tr>
<tr>
<td>___ Transgender woman (born male, identify as female)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Present address:</th>
</tr>
</thead>
</table>

| Directions to address: | |
|------------------------||

<table>
<thead>
<tr>
<th>Contact nos:</th>
<th>Mobile nos:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Relationship status: ___ Single ___ Married ___ In a relationship ___ Separated ___ Widowed</th>
</tr>
</thead>
</table>

### CLIENT’S RELATIONSHIP INFORMATION

| Name of spouse/partner: | |
|-------------------------||

<table>
<thead>
<tr>
<th>How long in the relationship?</th>
<th>How long, if living together?</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Gender Identity of partner: * Gender identity is how you see yourself regardless of the sex you are born with.</th>
</tr>
</thead>
<tbody>
<tr>
<td>___ Male ___ Female</td>
</tr>
</tbody>
</table>
**Transgender man** (born female, identify as male)

**Transgender woman** (born male, identify as female)

<table>
<thead>
<tr>
<th>Present caretaker</th>
<th>Relation to child</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Child's Legal status: ___ Legitimate ___ illegitimate ___ Adopted ___ Unknown</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Family contact</th>
<th>Name of school if studying</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Family address</th>
<th>Educational level</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of company if employed</th>
<th>Position in company</th>
<th>Years working at present work</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Disability if there are any: ___ Visual ___ Hearing ___ Speech ___ Movement</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

### CLIENT'S FAMILY INFORMATION

<table>
<thead>
<tr>
<th>RELATION w/ client</th>
<th>NAME</th>
<th>Lives w/ client</th>
<th>AGE/SEX</th>
<th>Civil Status</th>
<th>Employed Y/N Occupation</th>
<th>School/Company</th>
<th>Contact Info</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mother</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Father</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Guardian</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Partner</td>
<td></td>
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</tr>
<tr>
<td>Siblings</td>
<td></td>
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<tr>
<td>Children if any</td>
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</tr>
<tr>
<td>Socio-economic status: ___ Low ___Middle ___ Upper</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No. of children: ___ Own ___ Partner</td>
<td></td>
<td></td>
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<td></td>
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<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>No. of household members:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### LIVING ARRANGEMENT AT TIME OF ABUSE

<table>
<thead>
<tr>
<th>__ Street child</th>
<th>__ House with friends</th>
</tr>
</thead>
<tbody>
<tr>
<td>__ Street family</td>
<td>__ Dormitory</td>
</tr>
<tr>
<td>__ NGO shelter</td>
<td>__ House with relatives</td>
</tr>
<tr>
<td>__ House with partner</td>
<td>Government agency</td>
</tr>
<tr>
<td>__ Single parent</td>
<td>__ Others</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>__ Street child</th>
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<td>__ House with partner</td>
<td>Government agency</td>
</tr>
<tr>
<td>__ Single parent</td>
<td>__ Others</td>
</tr>
</tbody>
</table>

### LIVING ARRANGEMENT AT PRESENT

### NARRATION:
SAMPLE REFERRAL FORM

Date: _______________________

Dear Vice Mayor Joy Belmonte,

This is to endorse the case of ________________________________, ___ years old, with residence address at ____________________________ and allegedly a victim of:

- [ ] Child abuse
- [ ] Physical Injuries/Maltreatment
- [ ] VAWC
- [ ] Unjust Vexation/Slander/Slander by Deed
- [ ] Rape
- [ ] Threats/Coercion
- [ ] Acts of Lasciviousness
- [ ] Illegal Detention
- [ ] Trafficking in persons
- [ ] Prostitution
- [ ] Anti-voyeurism
- [ ] Anti-Child Pornography
- [ ] Cybercrime

Client is requesting assistance specifically for:

- [ ] Medical treatment
- [ ] Medico-legal Exam/Medical Certificate
- [ ] Legal Counseling
- [ ] Counseling
- [ ] Psychiatric Counseling
- [ ] Police Assistance/Direct Case Filing (if incident occurred after 24 hours)

Client is requesting referral for:

- [ ] TPO/PPO
- [ ] Protective Custody, Shelter, etc
- [ ] Writ of Habeas Corpus/Amparo
- [ ] CHR
- [ ] TRO/Injunction
- [ ] DOJ
Attached are the photocopies of required documents for reference:

- Barangay Protection Order (BPO)/RA 9262
- Certificate of Indigence
- BPO/QC Gender-Fair Ordinance
- Others (pls. specify)
- Blotter

For your honor’s further assistance please. Thank you.

___________________________________
(Signature Over Printed Name)
GAD/VAWC Desk Officer

Noted by: _________________________
(Signature Over Printed Name)
Punong Barangay or Kagawad

Barangay: _________________________
Contact Nos: _________________________
C.5. SAMPLE CRIMINAL COMPLAINT

REPUBLIC OF THE PHILIPPINES

CITY ) S. S.

COMPLAINT-AFFIDAVIT
(Violation of RA 9262)

I, ______, of legal age, Filipino, with residence at ______________________________, after being sworn under oath in accordance with the law, do hereby depose and state that:

1. I am filing ____ counts for Violation of Sec. 5.a, 5.b, 5.e, 5.e.1, 5.e.2, 5.f, 5i of the Anti-Violence Against Women and Their Children Act of 2004 (RA 9262) against my estranged lesbian partner ____ , a Filipino citizen, (hereafter called “Ms. ___” or my estranged partner) residing at ______________ Quezon City, Metro Manila;

2. The physical abuse, threats of physical harm, deprivation of custody of my three children, threats to kill the children, threat to commit suicide verbal, and emotional abuse are crimes of violence against women and their children under the Anti-Violence Against Women and Their Children Act of 2004 (Anti-VAWC or RA 9262), as follows:

SEC. 5. Acts of Violence Against Women and Their Children.- The crime of violence against women and their children is committed through any of the following acts:

(a) Causing physical harm to the woman or her child;
(b) Threatening to cause the woman or her child physical harm;
(c) Attempting to cause the woman or her child physical harm;
(d) Placing the woman or her child in fear of imminent physical harm;
(e) Attempting to compel or compelling the woman or her child to engage in conduct which the woman or her child has the right to desist from or to desist from conduct which the woman or her child has the right to engage in, or attempting to restrict or restricting the woman’s or her child’s freedom of movement or conduct by force or threat of force, physical or other harm or threat of physical or other harm, or intimidation directed against the woman or her child. This shall include, but not limited to, the following acts committed with the purpose or effect of controlling or restricting the woman’s or her child’s movement or conduct:

(1) Threatening to deprive or actually depriving the woman or her child of custody or access to her/his family;
(2) Depriving or threatening to deprive the woman or her children of financial support legally due her or her family, or deliberately providing the woman’s children insufficient financial support;
(3) Depriving or threatening to deprive the woman or her child of a legal right;
(4) Preventing the woman in engaging in any legitimate profession, occupation, business or activity, or controlling the victim’s
own money or properties, or solely controlling the conjugal or common money, or properties;

(f) Inflicting or threatening to inflict physical harm on oneself for the purpose of controlling her actions or decisions;

(g) Causing or attempting to cause the woman or her child to engage in any sexual activity which does not constitute rape, by force or threat of force, physical harm, or through intimidation directed against the woman or her child or her/his immediate family;

(h) Engaging in purposeful, knowing, or reckless conduct, personally, or through another, that alarms or causes substantial emotional or psychological distress to the woman or her child. This shall include, but not be limited to, the following acts:

   (1) Stalking or following the woman or her child in public or private places;
   (2) Peering in the window or lingering outside the residence of the woman or her child;
   (3) Entering or remaining in the dwelling or on the property of the woman or her child against her/his will;
   (4) Destroying the property and personal belongings or inflicting harm to animals or pets of the woman or her child; and
   (5) Engaging in any form of harassment or violence;

(i) Causing mental or emotional anguish, public ridicule or humiliation to the woman or her child, including, but not limited to, repeated verbal and emotional abuse, and denial of financial support or custody of minor children or denial of access to the woman’s child/children.

3. Ms. _____ has subjected me to constant physical, verbal, emotional, financial and psychological abuses since __, the year we started living together. There were several times that she beat me up, threatened to beat me up and threatened to kill me. Every time ___ was mad at me, she always ….;

4. In 20__, I was beaten up by ___ for confronting her about the intimate text messages in her cellphone. She denied the issue but she physically abused me---she choked me, …., boxed me, kicked my chest, …. and verbally abused me. When she left our house, I rushed to the police station and the policewoman brought me to the hospital (a copy of my police blotter, complaint-affidavit and my medico-legal certificate are attached hereto as Annexes “”-“”). These acts are in violation of RA 9262 Sec. 5.a of RA 9262;

5. Ms. _____ would continually subject me to verbal and psychological abuses. When I was … These acts are in violation of RA 9262 Sec. 5.b, 5.e.1, 5.e.2 and 5i of RA 9262;

6. On July 8, 2010, I told Ms. _____ that she should respect my decision to leave her. Ms. ____ got angry and shouted at me in front of my daughter and she threatened to take the child away from me in violation of RA 9262 Sec. 5.e.1 and 5.i. She punched the wall, shouted and threatened to kill herself and the children if I do not stay with her. She suddenly charged and hit my face with her fist. These acts are in violation of RA 9262 Sec. 5.b, 5.f, 5.i;

7. On July 9, 2010, Ms. _____ took the child without my consent thereby depriving me my custody of our child in violation of RA 9262 Sec. 5.e.1; I organized a rescue of the child together with the officials of Barangay _____ and police officers of station ____, Quezon City and we were able to successfully get the child from my estranged partner (copy of the Barangay Blotter is attached hereto as Annex “”);
8. On July 11, 2010, I asked Barangay _______ where I was residing to issue a Barangay Protection Order for me and my child (copy of the Barangay Protection Order is attached hereto as Annex “__”);

9. On July 19, 2010, the Temporary Protection Order (TPO) issued by Regional Trial Court Branch ____, Quezon City was served on Ms. ___ July 20, 2010 (copy of the TPO is attached hereto as Annex “I”). The TPO prohibited Ms. ____ from committing acts against me and my children in violation of Sec. 5 of RA 9262;

Persistent Abuse by Ms. __________

10. Throughout my nine-year live-in relationship with Ms. ______, she has persistently physically and psychologically abused me and my daughter. Ms. ____ gets easily mad at anything and she would let out her anger on me and my daughter. Last November 2009, she hit me with her fist during my daughter’s graduation. This incident made me summon my strength to finally leave my daughter. After years of abuse, I fled for my safety and that of my daughter’s safety in January 2010 to live in a rented apartment in Quezon City;

11. This Honorable Public Prosecutor should not countenance Ms. ___’s acts of violence and abuse. It is high time that abusive and threatening estranged partners like Ms. ___ be made accountable for their violent and abusive acts. It is now the imperative task of this Honorable Office of the Prosecutor to uphold the interest of justice and immediately file the information for ____ counts for Violation of the Anti-Violence Against Women and Their Children Act of 2004 (RA 9262) to finally put a stop to Ms. ______’s continued abuses and to hold her accountable for her abuses;

12. I am executing this affidavit to attest to the veracity of all the foregoing for the purpose of filing the criminal complaints for seven counts for Violation of Sec. 5.a, 5.b, 5e, 5.e.1 , 5.e, 5f, 5i of the Anti-Violence Against Women and Their Children Act of 2004 (RA 9262).

In witness whereof, I have hereunto affixed my hand this ____ day of _______, 201_, at Quezon City.

Complainant

CERTIFICATION

SUBSCRIBED AND SWORN to before me this ____ day of ____________, 201_ at Quezon City. I hereby certify that I have personally examined the affiant and that I am satisfied that she voluntarily executed and understood this counter-affidavit.

Assistant City Prosecutor
C.5.1. SAMPLE SWORN STATEMENT BEFORE THE POLICE

PASUBALI: Ikaw ba ay handing magbigay ng iyong Malaya at kusang-loob na salaysay at pawang katotohanan lamang at lahat ng iyong sasabihin ay maaaring gamitin laban o pabor sa iyo sa alin mang hukuman dito sa ating bansa?

Sagot: Opo.

1. Tanong: Bakit ka naririto sa aming tanggapan at nagbibigay ng malayang salaysay?
   Sagot:

2. Sabihin mo muli ang iyong pangalan at iba pang pagkakakilankilan tungkol sa iyo?
   Sagot:

3. Maaari ko bang malaman ang buong pangalan at iba pang pagkakakilanlan ng inirereklamo mo, na sinasabi mong nanakit sa iyo?
   Sagot:

4. Maaari mo bang sabihin sa akin kung anong oras, kalian at saan nangyari ang sinasabi mong pananakit sa iyo?
   Sagot:

5. Maaari mo bang isalaysay ang buong pangyayari?
   Sagot:

6. Ano pa ang mga sumusunod na nangyari?
   Sagot:

7. Pansamantala ay wala na muna akong itatanong sa iyo, may nais ka bang idagdag o ibawas sa ibinigay mong pahayag nito?
   Sagot:

8. Lalagdaan mo ba at susumpaan ang salaysay mong ito?
   Sagot:
## ANNEX D CHART OF CRIMES UNDER NATIONAL LAWS

<table>
<thead>
<tr>
<th>Crime</th>
<th>Penalty</th>
<th>Prescription</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unjust Vexation (Art. 287, 2nd par.)</td>
<td>1d-30d</td>
<td>2 mos</td>
</tr>
<tr>
<td>Slight Physical Injuries and Maltreatment (Art. 266):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Injury requiring medical attention from 1-9 days</td>
<td>-1day – 30days</td>
<td></td>
</tr>
<tr>
<td>- Injury not requiring medical attendance</td>
<td>-1day – 30 days</td>
<td></td>
</tr>
<tr>
<td>- Ill-treatment by deed without causing any injury</td>
<td>-1day — 10days (arresto menor minimum)</td>
<td></td>
</tr>
<tr>
<td>Slander by Deed (Art. 359) - any physical act that shall cast dishonor, discredit or contempt on another person with such act witnessed by a third party</td>
<td>Grave=1m1d - 2 yrs 4mos. Simple=1d-30d</td>
<td>6 mos.</td>
</tr>
<tr>
<td>Slander (Art. 358) - Oral defamation</td>
<td>Grave=4m1d – 2 yrs 4 mos. Simple= 1d-30d</td>
<td>6 mos. 2 mos.</td>
</tr>
<tr>
<td>Light Threats</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- under Art. 285 par. 2: threat to commit a crime</td>
<td>1d – 11 days</td>
<td>2 mos.</td>
</tr>
<tr>
<td>- under Art. 285 par. 3: exposure without condition</td>
<td></td>
<td>2 mos.</td>
</tr>
<tr>
<td>- under Art. 285 par. 1 threat using firearms</td>
<td></td>
<td>2 mos.</td>
</tr>
<tr>
<td>Grave Coercion (Art. 286) by means of violence, threats or intimidation</td>
<td>6m, 1d- 6 yrs. &amp; fine P6,000</td>
<td></td>
</tr>
<tr>
<td>- preventing another from doing something not prohibited by law</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- compelling another to do something against her/his will whether it be right or wrong</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Act of Lasciviousness</td>
<td>6m 1d- 6 yrs.</td>
<td>10 yrs.</td>
</tr>
<tr>
<td>Rape by sexual assault (Art. 266-A paragraph 2; RA 8353)</td>
<td>- Prison mayor (6 y 1d- 12yrs)</td>
<td>15 years 20 years</td>
</tr>
<tr>
<td>- w/ aggravating circumstance</td>
<td>-reclusion temporal (12y 1d – 20 yrs)</td>
<td></td>
</tr>
<tr>
<td>Rape (Art. 266-A paragraph 1; RA 8353)</td>
<td>Reclusion Perpetua (20 yrs. 1day - 40 years)</td>
<td>20 years</td>
</tr>
<tr>
<td>RA 9262 pars. a-f (physical/coercion)</td>
<td>Arresto mayor-prision mayor (1m1d-12yrs)</td>
<td>20 years</td>
</tr>
<tr>
<td>Law</td>
<td>Action</td>
<td>Punishment</td>
</tr>
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<td>-----</td>
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</tr>
<tr>
<td>RA 9262</td>
<td>pars. g-i</td>
<td>sexual activity, psychological, economic</td>
</tr>
<tr>
<td>RA 7610</td>
<td>children exploited in prostitution &amp; other sexual abuses (sec. 5)</td>
<td>- children who for money, profit, or any other consideration or due to the coercion or influence of any adult, syndicate or group, indulge in sexual intercourse or lascivious conduct; the penalty shall be imposed upon:</td>
</tr>
<tr>
<td></td>
<td>a) Those who engage in or promote, facilitate or induce child prostitution;</td>
<td>- If the child is below 12 and rape is committed, penalty is reclusión perpetua</td>
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<tr>
<td></td>
<td>b) Those who commit the act of sexual intercourse or lascivious conduct with a child exploited in prostitution or subjected to other sexual abuse; if child is below 12 and rape is committed, file rape; if child is below 12 and acts of lasciviousness is committed, file acts of lasciviousness with penalty of reclusion temporal medium</td>
<td>- If the child is below 12 and acts of lasciviousness is committed, penalty is 14 yrs 8 mos 1 d (reclusion temporal médium)</td>
</tr>
<tr>
<td>RA 7610</td>
<td>Attempt to Commit Prostitution (Sec. 6)</td>
<td>- any person who, not being a relative of a child, is found alone with the child inside the room or cubicle or a house, inn, hotel, motel, pension house, apartelle or other similar establishments, vessels, vehicle or any other hidden or secluded area under circumstances which would lead a reasonable person to believe that the child is about to be exploited in prostitution and other sexual abuse; also, when any person is receiving services from a child in a sauna parlor or bath, massage clinic, health club and other similar establishments</td>
</tr>
<tr>
<td>RA 7610</td>
<td>Other Acts of Abuse (Sec. 10)</td>
<td>any person who shall keep or have in his company a minor, 12 years under or who is 10 years or more his junior in any public or private place, hotel, motel, beer joint, discotheque, cabaret, pension house, sauna or massage parlor, beach and/or other tourist resort similar places; not applicable to any person related w/in 4th degree of consanguinity or affinity or any bond recognized by law, local custom and tradition or acts in the performance of a social, moral, or legal duty</td>
</tr>
<tr>
<td>RA 10364</td>
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**SEC. 4. Acts of Trafficking in Persons.**

In every case, conviction shall cause and carry the automatic revocation of the license or registration of the recruitment agency involved in trafficking. The license of a recruitment agency which trafficked a child shall be automatically revoked.

Note: from the day the trafficked person is delivered or released from conditions of bondage or in the case of a child victim, from the day the child reaches the age of majority.

| SEC. 4-A. Attempted Trafficking in Persons. | 15 years: and a fine PhP 500k-PhP 1M |
| SEC. 4-B. Accomplice Liability. | 15 years: and a fine PhP 500,000-PhP 1M |
| SEC. 4-C. Accessories. | |
| SEC. 5 Acts that Promote Trafficking in Persons | 15 years: and a fine PhP 500,000-PhP 1M |
| **Section 6. Qualified Trafficking in Persons.** | Life imprisonment; and a fine of PhP 2M-PhP 5M |
| **SEC. 7. Confidentiality.** | 6 years: and a fine PhP 500,000-PhP 1M |
SEC. 11. Use of Trafficked Persons. — Any person who buys or engages the services of a trafficked person for prostitution

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<tr>
<th>Provided, That the Probation Law (Presidential Decree No. 968) shall not apply:</th>
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<tr>
<td>(a) 6 yrs. to 12 yrs. imprisonment &amp; a fine of P50k-P100k:</td>
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<tr>
<td>Provided, however, That the following acts shall be exempted thereto:</td>
</tr>
<tr>
<td>(1) If an offense under paragraph (a) involves sexual intercourse or lascivious conduct with a child, the penalty shall be 17 yrs. to 40 yrs. imprisonment &amp; a fine of P500k-P1M;</td>
</tr>
<tr>
<td>(2) If an offense under paragraph (a) involves carnal knowledge of, or sexual intercourse with, a male or female trafficking victim and also involves the use of force or intimidation, to a victim deprived of reason or to an unconscious victim, or a victim under 12 years of age, instead of the penalty prescribed in the subparagraph above the penalty shall be a fine of P1M-P5M &amp; imprisonment of 40 yrs. imprisonment with no possibility of parole; except that if a person violating paragraph (a) 10 years.</td>
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</table>
of this section knows the person that provided prostitution services is in fact a victim of trafficking, the offender shall not be likewise penalized under this section but under Section 10 as a person violating Section 4; and if in committing such an offense, the offender also knows a qualifying circumstance for trafficking, the offender shall be penalized under Section 10 for qualified trafficking. If in violating this section the offender also violates Section 4, the offender shall be penalized under Section 10 and, if applicable, for qualified trafficking instead of under this section.

(b) Deportation. – If a foreigner commits any offense described by paragraph (1) or (2) of this section or violates any pertinent provision of this Act as an accomplice or accessory to, or by attempting any such offense, he or she shall be immediately deported after serving his or her sentence and
be barred permanently from entering the country; and

(c) Public Official. – If the offender is a public official, he or she shall be dismissed from service and shall suffer perpetual absolute disqualification to hold public office, in addition to any imprisonment or fine received pursuant to any other provision of this Act.

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<tr>
<th>Anti-Photo &amp; Video Voyeurism (RA 9995)</th>
<th>3 years - 7 years &amp;/or fine P100,000.00 - P500,000.00</th>
<th>(15 years; by deduction based on prescription of the afflicting penalty of prison mayor)</th>
</tr>
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<tbody>
<tr>
<td>(a) To take photo or video coverage of a person or group of persons performing sexual act or any similar activity or to capture an image of the private area of a person/s such as the naked or undergarment clad genitals, public area, buttocks or female breast without the consent of the person/s involved and under circumstances in which the person/s has/have a reasonable expectation of privacy;</td>
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<tr>
<td>(b) To copy or reproduce, or to cause to be copied or reproduced, with or without consideration;</td>
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<td>(c) To sell or distribute, or cause to be sold or distributed; or</td>
<td></td>
<td></td>
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<tr>
<td>(d) To publish or broadcast, or cause to be published or broadcast, whether in print or broadcast media, or show or exhibit through VCD/DVD, internet, cellular phones and other similar means or device.</td>
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<tr>
<td>The prohibition under paragraphs (b), (c) and (d) shall apply notwithstanding that consent to record or take photo or video coverage of the same was given by such person/s.</td>
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</tbody>
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<thead>
<tr>
<th>RA 10175 “Cybercrime Prevention act of 2021“</th>
<th>one (1) degree higher than that provided for by the Revised Penal</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Violation of the Revised Penal Code, as Amended, Through and with the Use of Information and Communication Technology (Sec. 7). – All crimes defined and penalized by the</td>
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</tbody>
</table>
Revised Penal Code, as amended, and special criminal laws committed by, through and with the use of information and communications technologies shall be covered by the relevant provisions of the Act.

ANNEX E – REMEDIES UNDER THE QC GENDER-FAIR ORDINANCE

- The Barangay VAWC desk shall handle SOGIE concerns
- The Barangay Secretary shall record all BPOs in a separate and confidential logbook specifically for cases of violence and discrimination against LGBTI persons on the basis of their actual or perceived SOGIE.

PROCESS OF APPLYING FOR A BPO UNDER THE QC GENDER-FAIR ORDINANCE

The BPO is an order issued for the purpose of preventing further acts of violence and discrimination against LGBTI victims and granting other necessary reliefs from the abuser. The Relief granted under the protection order should serve the purpose of safeguarding the victim-survivor from further harm, minimizing any disruption in the victim-survivor’s daily life by prohibiting the abuser from threatening to commit or committing personally or through another acts of violence towards the victim, and by prohibiting the abuser from directly or indirectly harassing, annoying, and communicating with the victim.

PROCEDURE TO OBTAIN A BPO

- The victim will apply in writing for a BPO attested before the Punong Barangay (Head) who has jurisdiction over the application. Any non-lawyer advocated in the proceedings may accompany the victim. The Punong Barangay shall assist the victim petitioner in the application for a BPO.
- The BPO shall be effective for 15 days immediately after the issuance of an ex parte BPO. Even if the abuser did not receive the BPO, it will be considered served by tendering a copy of the BPO at the said address in the presence of at least two (2) witnesses.
- Within twenty-four (24) hours after a BPO is issued, the Barangay Head shall assist the victim in filing for an application for a Temporary Protection Order (TPO) or Permanent Protection Order (PPO) with the nearest court in the place of residence of the victim.
- The Punong Barangay must issue the BPO on the same day of application, immediately upon the conclusion of ex parte proceedings. The BPO has the address of the respondent, the date and time of issuance, and the protective remedies for the victim and is free of charge.

- In the absence of the Barangay Head, any Barangay Kagawad (official), Barangay VAWC Desk Officer or GAD Focal Person can act on & sign the application for a BPO with an attestation that the Barangay Head was unavailable at the time of the issuance of the BPO.
- A BPO is granted ex parte, meaning even without notice and court hearing of the abuser. The Punong Barangay, Barangay Kagawad or by the barangay VAWC helpdesk Officer or GAD focal Person, law enforcers and other government agencies shall not mediate or conciliate for a protection order to compromise or abandon the BPO.
- The Punong Barangay shall personally serve a copy of the BPO to the abuser or direct any barangay official. The BPO is deemed served upon receipt of the abuser or by any adult who received the BPO at the address of the abuser. In case the abuser or any adult at the residence of the respondent
refuses for whatever cause to receive the BPO, the barangay official serving the BPO must issue a certification seeking forth the manner, place and date of service, including the reasons why the BPO remain unserved. For indigent victims, the barangay shall ensure that transportation and other expenses are provided in filing for an application for a protection order with the courts.

THE PROCESS OF QC PRIDE COUNCIL MEDIATION - Mediation with the QC Pride Council Executive Committee (Section 32.2, Gender-Fair Ordinance)

**PROCESS OF FILING COMPLAINTS UNDER THE QUEZON CITY PRIDE COUNCIL**

A QCPC Task Force is created to mediate, monitor, respond and assist in the filing of cases of discrimination, and violence cases. This will be under the Legal Program of the Quezon City Pride Council Executive Committee.
ANNEX F - USEFUL EVIDENCE FOR DOMESTIC VIOLENCE AND FAMILY VIOLENCE OF LGBTI VICTIMS

Referencing the Violence against Women and Children Complaints under Anti-VAWC Act (RA 9262), listed are the evidence that can be used for filing complaints of LGBTI persons:

1. **Complaint-Affidavit of Survivor** – Complaint must specify specific violations of Section 5 of RA 9262
2. **Affidavits of Witnesses**
   - Affidavits of eyewitnesses
   - Affidavits executed by friends and family to whom the survivor related the incident while suffering from trauma may be admitted as res gestae evidence (exception to hearsay evidence)
   - **Res gestae evidence** - statements made by a person while a startling occurrence is taking place or immediately prior or subsequent thereto with respect to the circumstances thereof (Rule 130, Sec. 42 Rules on Evidence)
   - **Similar acts as evidence**. – Evidence that one did a certain thing at one time may be received to prove a specific intent or knowledge, identity, plan, system, scheme, habit, custom or usage, and the like (Rule 130, Sec. 34)
3. **Medico-legal Report** if the survivor underwent medico-legal examination
4. **Barangay Blotter and Police Blotter**
5. **Psychological or Psychiatric Report** after undergoing evaluation and counseling for trauma
6. **Psychological Report** for survivors with mental disability (e.g. issued by the National Center for Mental Health)
7. **Marriage Certificate** if survivor and perpetrator are married
8. **Birth Certificates** of children of the survivor or children under her care

ANNEX G – BARANGAY COUNCIL FOR THE PROTECTION OF CHILDREN

The victim-survivor who is a minor may seek help from the BCPC. **The BCPC shall be composed of the following:**

- The Punong Barangay (Chairperson)
- The school head/s in the barangay
- The Barangay health midwife
- The Barangay health worker
- The day care worker/s
- Parents or guardians
- The Sangguniang Kabataan Chairman
- The Barangay nutrition scholar

A representative from non-government organizations/people's organizations for children’s issues

**The Duties of the BCPC are the following:**

- Foster the education of every child in the barangay.
- Encourage the proper performance of the duties of parents, and provide learning opportunities on the adequate rearing of children and on positive parent-child relationship.
- Protect and assist abandoned or maltreated children and dependents.
- Take steps to prevent juvenile delinquency and assist parents of children with behavioral problems so that they can get expert advice.
- Adopt measures for the health of children.
- Promote the opening and maintenance of playgrounds and day-care centers and other services that are necessary for child and youth welfare.
- Coordinate the activities of organizations devoted to the welfare of children and secure their cooperation.
- Promote wholesome entertainment in the community, especially in movie houses.
- Assist parents, whenever necessary in securing expert guidance counseling from the proper governmental or private welfare agency.
- Hold classes and seminars on the proper rearing of the children.
- Distribute to parents available literature and other information on child guidance.
- Assist parents, with behavioral problems whenever necessary, in securing expert guidance counseling from the proper governmental or private welfare agency.
Verified petition for review and payment of docket and other lawful fees and deposit for costs; within 15 days from notice of decision or order denying motion for new trial or reconsideration, extendible by 15 days, and another 15 days for most compelling reason.
ANNEX I – QUEZON CITY SOCIAL HYGIENE CLINICS

Batasan Social Hygiene Clinic
1 IBP Road Cor. Commonwealth Ave. Barangay Batasan Hills, QC
343-6910, 0932-1363674
0922-8012958 0923-2790558
0905-3576353 0923-2790558
0928-7849043

Bernardo Social Hygiene Clinic
Ermin Garcia St. Brgy. Pinagkaisahan cr. Edsa Cubao, Quezon City
0922-8316044

Klinika Novaliches
A.J. Maximo Health Center Complex Barangay Novaliches Proper, District 5, Quezon City
0920-9516595 / 0920-9516595 / 0906-2106540

Klinika Bernardo
Ermin Garcia St. Brgy. Pinagkaisahan corner Edsa Cubao, Quezon City
0917-5811178 / 0932-2959752

Klinika Project 7
29 Bansalangin, Project 7, Quezon City
Hours: 3:00 pm to 11:00 pm
0905 667 2129

Project 7 Social Hygiene Clinic
2nd Floor Project 7 HC, Bansalangin St., Brgy Veterans Village, Project 7, Quezon City
0932-3530951
ENDNOTES
1 Ord. No. 2357, Series of 2014, Section 6 and section 8.
2 Approved on November 28, 2014; Implementing Rules and Regulations approved on December 10, 2015.
4 Sec. 4(b) of the Magna Carta
5 "An Act Providing for the Magna Carta of Women.” Republic Act No. 9710
6 Article 1, Universal Declaration of Human Rights
13 http://www.theduluthmodel.org/training/wheels.html
14 Based from documented legal cases handled by Claire Padilla, lawyer and human rights activists of EnGendeRights, Inc.
15 American Psychiatric Association DSM-5
16 Mayo Clinic; Personality Disorders, available at https://www.psychiatry.org/patients-families/personality-disorders/what-are-personality-disorders
17 American Psychiatric Association DSM-5 (Criteria Revised June 2011)
18 Mayo Clinic
19 http://www.mayoclinic.org/diseases-conditions/antisocial-personality-disorder/home/ovc-20198975
20 Ibid
21 WHO, ICD-10, F60.31 Borderline Personality Disorder
27 The Committee on the Rights of the Child recommended in 2005 to “establish adequate mental health services tailored for adolescents.”
28 Ibid
29 Tips for Creating Dialogue with LGBTQI Clients, Anti-violence Project.
30 Ibid
31 Ordinance No. SP-2357 Implementing Rules and Regulations
32 Section VIII Ordinance No. SP-2357
33 Section VI Ordinance No. SP 2357
34 Sec. 32.1, Gender Fair Ordinance IRR.
35 A.M. No. 03-04-04-SC Rule On Custody Of Minors And Writ Of Habeas Corpus In Relation To Custody Of Minors
36 Section 5, Rule 58 of the Philippines Rules of court
37 Section 1, Rule 58 of the Philippines Rules of Court
38 Section 5, Rule 58 of the Philippines Rules of court
39 Section 9, Rule 58 of the Philippines Rules of Court
40 Section 17 of A.M No. 03-04-04-SC
41 Section 18 of A.M. No. 03-04-04-SC
42 Section 9
44 Article 142, P.D. 603
45 Art. 154, PD 603.
46 Article 150, P.D. 603
47 DOJ Rules & Regulations RA 7610, Sec. 32
48 DOJ Rules & Regulations RA 7610, Sec. 32; SECTION 6. Failure to Report.
49 Under DOJ Rules & Regulations on RA 7610 on Sec. 32, the duly authorized officer/social worker of the DSWD/local social welfare agency shall take Protective Custody of the child.
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SEC. 8. Initiation and Prosecution of Cases. – (c) Affidavit of Desistance. – Cases involving trafficking in persons should not be dismissed based on the affidavit of desistance executed by the victims or their parents or legal guardians. Public and private prosecutors are directed to oppose and manifest objections to motions for dismissal. Any act involving the means provided in this Act or any attempt thereof for the purpose of securing an Affidavit of Desistance from the complainant shall be punishable under this Act.

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Section VIII, R.A. 8980.

Article 87, P.D. 603.

REFERENCE FOR MENTAL HEALTH CHAPTER:


Australian Red Cross. (2013). Psychological first aid an australian guide to supporting people affected by disaster (2nd ed.). Australia: Australian Red Cross


