

TT 8: Referral of Protection Cases

Use if you are informed of a protection incident (violation of rights, gender-based violence, etc.)

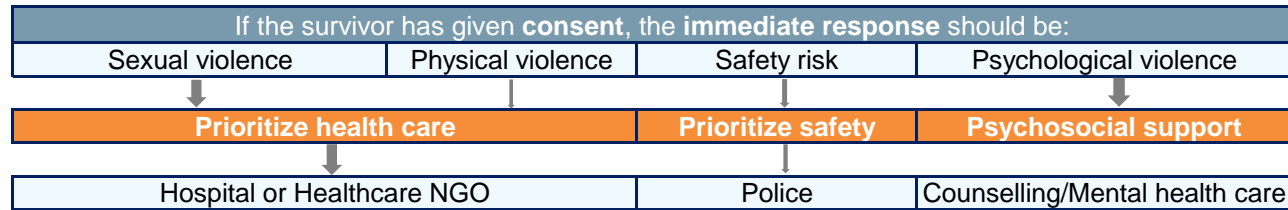
1. Provide a **safe** and **caring** environment for the survivor and respect his/her wishes and the principle of **confidentiality**.
2. Ask what are his/her **immediate needs**.
3. Provide clear and honest information about **available services**.

NO REFERRAL WITHOUT **explicit consent**, **except**:

1. When there is a threat to the life of the survivor
2. When a survivor threatens to cause serious harm to another person
3. In case of suspicion of abuse or neglect towards a child and in child's best interest

In the event of **rape**, inform the victim of the importance of accessing medical care within 72 hours.

If the survivor agrees and requests, ask for his/her informed consent and carry out referrals and support for accessing services.



Update : DATE

What services are available?

SGBV

ORGANIZATION

Point focal: Name, contact details (phone/email)

Services provided:

Target group:

Opening hours:

Languages services provided in:

ORGANIZATION

Point focal: Name, contact details (phone/email)

Services provided:

Target group:

Opening hours:

Languages services provided in:

MHPSS

ORGANIZATION
Point focal: Name, contact details (phone/email)
Services provided:
Target group:
Opening hours:
Languages services provided in:

ORGANIZATION
Point focal: Name, contact details (phone/email)
Services provided:
Target group:
Opening hours:
Languages services provided in:

Health/Nutrition

ORGANIZATION
Point focal: Name, contact details (phone/email)
Services provided:
Target group:
Opening hours:
Languages services provided in:

ORGANIZATION
Point focal: Name, contact details (phone/email)
Services provided:
Target group:
Opening hours:
Languages services provided in:

Protection and Legal assistance/advice

ORGANIZATION
Point focal: Name, contact details (phone/email)
Services provided:
Target group:
Opening hours:
Languages services provided in:

ORGANIZATION
Point focal: Name, contact details (phone/email)
Services provided:
Target group:
Opening hours:
Languages services provided in:

Education

ORGANIZATION
Point focal: Name, contact details (phone/email)
Services provided:
Target group:
Opening hours:
Languages services provided in:

ORGANIZATION
Point focal: Name, contact details (phone/email)
Services provided:
Target group:
Opening hours:
Languages services provided in:

WASH

ORGANIZATION
Point focal: Name, contact details (phone/email)
Services provided:
Target group:
Opening hours:
Languages services provided in:

ORGANIZATION
Point focal: Name, contact details (phone/email)
Services provided:
Target group:
Opening hours:
Languages services provided in: