



KONPAL* CHILD ABUSE PREVENTION SOCIETY

KONPAL Child Abuse Prevention Society is an NGO working against all form of child abuse. It comprises child rights activists who share the common vision of a society free of child abuse, with zero tolerance against child sexual abuse and commercial sexual exploitation, involvement of children in hazardous occupation, armed conflicts and violence. The members are professionals from different fields who are concerned with therising incidence of abuse against children. The group is fighting for the rights of children and against all forms of abuse, neglect, maltreatment and exploitation of children.

Concept paper on prevention of child abuse and child protection

KONPAL Child Abuse Prevention Society is a group of professionals concerned with the rising incidence of abuse against children. The group is fighting for the rights of children and against all forms of abuse.

It works in close collaboration with the Child Rights Committee of Pakistan Paediatric Association (CRC, PPA) and other NGOs working on the same issue.

The group shares the common vision of a society free of child abuse with zero tolerance against worst form of child abuse such as sexual abuse and commercial exploitation, child labour in hazardous occupation and involvement of children in armed conflicts and violence.

Paediatrician Professor Dr Aisha Mehnaz is the chairperson and coordinator of various activities. The group main objective is to create awareness regarding all forms of child abuse among healthcare providers, parents, teachers and other stake holders towards prevention and care of child victim of abuse, through awareness raising seminars, conferences, work-

shops, interactive/open forum discussions and launching a campaign against child abuse through electronic and print media. The group also aims to provide complete physical and psychological treatment of the child victims of abuse and provide legal support and rehabilitation of the victims/survivors of child abuse.

The activities have been organized by Konpal group include:

1. Three 2-day workshops have been held on child protection and case management of child abuse for the health care providers at three different hospitals in Karachi: the Sindh Government Lyari General Hospital, the Civil Hospital and the Liaquat National Hospital.

2. A seminar was held on early detection and management of child abuse at the Dow University of Health Sciences, Karachi.

3. A workshop was organized on child abuse for the school teachers at Lyari, Karachi.

4. Programmes were presented on child abuse and child rights on radio and television channels.

5. Literature is being developed on

child abuse for healthcare providers, teachers, parents, children and other stake-holders.

6. Children's Day was organized at the Lyari General Hospital. With nutritional negelect as the main theme, the programme comprised a discussion on various aspect of nutrition and malnutrition with doctors and mothers of the Lyari area. It was followed by distribution of food items and musical programme for the children.

7. A Hospital Child Protection Committee (HCPC) has been constituted at the Civil Hospital and the Lyari General Hospital. Both the hospitals are affiliated with the Dow University of Health Sciences. The medical superintendents of both the hospitals have taken keen interest in the formation and functioning of HCPC.

The committees look after the welfare and protection of children coming to CHK and LGH. These committees are helpful in early diagnosis, optimum treatment (physical and psychiatric) and rehabilitation of abused children. The members comprise paediatricians,

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Konpal meeting in progress



Proposed plan of action for 2007



A meeting at the Konpal head office in Karachi

BASED on detailed deliberations spread over several sessions, Konpal prepared a comprehensive plan of action for the year 2007. The plan unfolds below:

1. Preparation of IEC material on child abuse February 20.
2. Six/seven training workshops on “Early case management of child abuse for the medical and paramedical staff. Four workshops will be held at Karachi and one each will be held at Hyderabad and Larkana.
3. Two seminars and thematic drama skits on child abuse at Karachi and Sukkur.

4. Children’s Day celebration: a walk is being organized to raise awareness about the issue of child abuse.

5. Preparation of information and teaching material on child abuse for health care providers, school teachers and children.

6. Workshop for medico-legal officers in collaboration with the NGO WAR (War against Rape).

7. Awareness raising seminar on child abuse for teachers, parents and children in collaboration with school health service.

8. Formation of two more HCPC committee in Karachi.

Activities of CRC PPA during 2006

THE following activities on the issue of child rights and abuse were organized by PPA, CRC, Sindh in collaboration with Konpal, child abuse prevention society in 2006.

1. Workshop held: A workshop on case detection and management of child abuse was held at Liaquat National Hospital, Karachi, on Nov 28-29.

2. Hospital Child Protection Committee (HCPC): This committee has been active during the whole year. It held eleven case meetings to discuss cases of abuse observed, and used a multidisciplinary approach for the case management of victims of child abuse in nine cases that were seen:

- (a) Three cases of physical abuse (one male, two females)
- (b) Three cases of sexual abuse in male children (two gang rape)
- (c) Three cases of sexual abuse in female children (one gang rape)

3. National Conference on Child Abuse: The committee participated in the national conference held at Peshawar. The focal person of PPA,

CRC Sindh, participated in the conference and presented a paper on HCPC.

5. First SAARC Conference: In July a SAARC conference on Paediatric



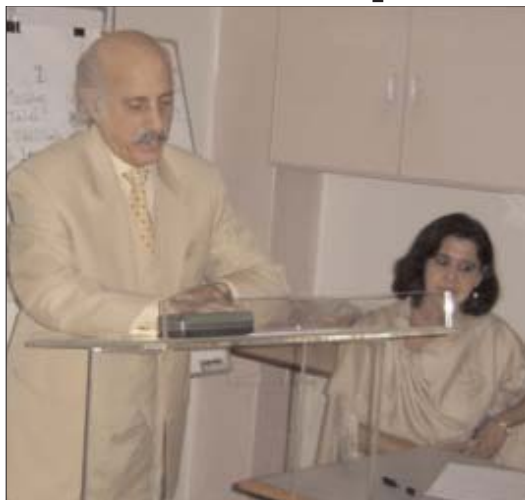
Bangladesh conference

4. Conference on male child abuse at Bangladesh: In June 2006, the focal person of PPA, CRC, and member of Konpal attended a conference on male child sexual abuse.

HIV infection was held at Mumbai, India.

6. Children’s Day: A Children’s Day activity was held on Nov 25 at the Sindh Govt Lyari General Hospital, Karachi.

Training workshop at Civil Hospital



Workshop participants (left). Dr Kaleem Butt addresses the audience (right).

THE second two-day training workshop on child protection and early case management was held at Dow University of Health Sciences and Civil Hospital Karachi on Dec 23 and 24, 2005. It was held on the Second Dow Symposium in collaboration of PPA Child Rights and Abuse Committee, Save the Children Fund Sweden, WGACSA and Konpal. A brief account of the workshop follows:

DAY I: Professor A G Billo was the Chief Guest and Professor D S Akram chaired the session. Both are renowned paediatricians. After a brief welcome and addresses by the chief guest and chairperson, the facilitators and the participants got themselves introduced. A pre-test then followed. Before the formal initiation of the workshop, the participants were requested to express their expectation of the workshop. They were also explained the rules of the workshop.

Dr Aisha outlined the objectives of the two-day workshop. Professor Billoo discussed the Child Rights Convention (CRC), giving a brief background and Pakistan's commitment to CRC's 54 articles which included child abuse prevention and child protection issues. A brainstorming session regarding the concept of child abuse and protection followed. The participants discussed and described various types of child abuses prevalent in our society and the concept and definition of child protection. The participants were then

given a case study and were asked to identify the apparent, hidden and possible type of child abuse in a case study. This session was conducted by Dr Aisha.

This was followed by a session on interviewing child abuse victim. Psychiatrist Dr Raza, conducting this session, described the cost of managing a child who suffered abuse with the help of a case scenario. After describing the technique of interviewing a child who has suffered abuse, he divided the participants into four groups, gave a case scenario to each group and asked the participants to demonstrate the interviewing skill according to each scenario which depicted various types of abuse. The participants got enthusiastically involved in the role play, demonstrating and learning interviewing skills. The participants were given the task to identify the role of government, parents, teachers and healthcare providers in prevention of child abuse and to formulate their recommendations.

The Day I session ended with this activity. Two volunteers were assigned to present the summary of the day's activity and their comments on the next day. The Egg Exercise, an activity much appreciated in the previous workshop was repeated. Four participants were given four raw eggs decorated as dolls. The participants were instructed to take care of these eggs as a little child and be brought intact or perhaps in a better condition next day. Day I activity ended with lunch.

DAY II: The participants briefly summarized the previous day's activities. The four participants who were given eggs were asked to briefly narrate their experience during the past 24 hours. Not only were all the four eggs brought intact but the participants had taken good care of them and shared their experience with their own children.

The next session was on the recognition of signs and symptoms of child abuse conducted by Dr Aisha, who described the symptoms commonly seen in a victim of child abuse and with the help of photographs explained the various mode of presentation of physical and sexual abuse. She also explained reporting of a case of child abuse to a medico-legal officer. This was an interactive session.

Farah Iqbal, a psychologist from Karachi University, demonstrated by means of a role play an effective counselling technique and described various aspects of counselling. She involved the group in the discussion. This session was followed by group presentation. Each of the four groups outlined the responsibilities of the government, the hospital child protection (HCP) committees, the parents and teachers in the prevention of child abuse.

Dr Aisha informed the participants about the HCP committee formed at Civil Hospital and the composition of its members.

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Konpal developing literature on child abuse

A ONE-DAY workshop on literature development on child abuse was held on Feb 20 at the Konpal Office. It was organized in collaboration with Child Protection Committee, Civil Hospital Karachi.

The workshop started with a brainstorming session in which the members discussed the various aspects of literature development, focusing on content and its applicability to the target group. After the session, the members split into three groups for preparing Information, Education and Counseling (IEC) material on child abuse.

Group A was given the task of preparation of IEC material on child abuse for parents and children. They were asked to identify the IEC content and suggest ways to increase the participation of parents and children in the awareness on child abuse.

Group B was asked to develop IEC literature for school teachers. The contents included: (1) what a school teacher should know about child abuse? (2) how can awareness raising seminars /workshops be organized for them? (3) how many hours should be devoted to the activity? (4) how their interest and participation can be increased? These were some of the questions the participants were asked to deliberate upon.

Group C was given the task to develop literature for health care providers (doctors, nurses, LHV and paramedics). They discussed what HCP should learn about child abuse (from IEC material); how they should be taught at a workshop or seminar; the duration of each activity and the involvement and participation in CPC.

Group A comprised Nasreen, Sara, Nosheen, Khalida and Dr Mushtaq. The group gave following recommendations and suggestions for conducting seminars/workshops for parents: (1) Brainstorming sessions to be held on definition and types of abuses; (2) Behavioral changes (signs) of abuses to be taught to the parents; (3) Impact of effective and ineffective child guidance about abuse; (4) emphasize the responsibility of par-



Dr Aisha Mehnaz



Shahnaz Yasin



Dr Mushtaq Sheikh



Nasreen



Dr Farah Ahmed



Farah Iqbal

ents' to keep an eye on friends, relatives, employees and teachers, while maintaining close contact with their children; (5) Teach their children to avoid any gift from suspected person; (6) Teach parents and children about personal safety skill.

The group member said that they will deliberate more on the subject and will prepare the detail IEC material for both parents and teachers and children and will present it in the next meeting.

Group B participants were: Seema, Shahnaz, Dr Ashfaq and Farah Iqbal. The group recommended: (1) raise awareness and advocate the issue of child abuse among them and create awareness about all types of child abuse among students; (2) train teachers so they can help students identify and protect themselves from abuse; (3) train teachers so they can act as role model for students; (4) highlight the importance of positive attitude, perception and behaviour; this should be incorporated in their personality; (5) help teachers improve their teaching style; (6) help them improve their knowledge about

abuse; (7) at the end of awareness session some award /reward should be given to teachers and students; (8) teachers should be told about the ethical values of the society which include hope, happiness, love, caring, tolerance, justice and giving helping hands to those needed.

Participants of Group C were Dr Aisha Mehnaz, Dr Aisha Sarwat and Dr Zain. The group was assigned the task of developing IEC material on Child Abuse for HCP. It discussed the module for training of HCP at length and also in the light of the feedbacks received from the last four workshops held for HCP in Karachi and Hyderabad, and decided to bring about further changes. The group opined that session should be more interactive and the talks by the facilitators should be short not more than ten minutes each. The following format for two-day workshop was decided.

Day I: Introduction of facilitators and participants; pretest and set rules of the workshops; decide objectives of the workshop; child right and CRC hands-out to be

given; conceptualize child abuse case definition followed by case study and group work.

It was decided that after tea break the session will focus on interviewing techniques/counseling, role-play; group work-prepare plan of action for rehabilitation of victims of abuse-role play if time permits. Home assignments will be given with egg exercise and feedback.

Day II: Assignment feedback; myths

related to child abuse to be discussed; behavioral indicators of child abuse; effects of child abuse.

After tea break, cost of child abuse will be discussed; followed by recognition and recording of signs and symptoms of child abuse; medico-legal reporting; management and rehabilitation of child abuse and role of CPC; ending with concluding session and certificate distribution.

The group also gave the following rec-

ommendation for conducting workshops: they should be conducted on regular basis; doctors from different disciplines should participate; separate one-day workshop should be conducted for LHV and paramedics; duration of each workshop should not be more than five hours per day; proper record keeping of activities by CPC and preparation of hospital personnel for participation, formation and establishment of CPC in the hospital.

Child protection training workshop at Liaquat National Hospital



At the child protection training workshop: (from right) Dr Ashfaq Mala, Dr Aisha Sarwat, Dr Zain-ul-Abidin and a participant

A two-day training workshop on child protection and early case management of child abuse was held at Liaquat National Hospital, Karachi, on November 28-29 in collaboration with PPA, Child Rights and Abuse Committee, Save the Children Fund Sweden, WGACSA and Konpal.

The workshop was coordinated by Dr Aisha Mehnaz. It was attended by 25 participants, which included six nursing instructors and senior nurses beside doctors from the department of paediatrics, gynae-obs, paediatric surgery and casualty.

A brief account of the workshop follows:

DAY I: After the brief welcome addresses by Dr Arshalooz Rehman (Head of the Department of Paediatrics, LNH and Coordinator, CRC, PPA, Sindh) and Dr Aisha Mehnaz (Focal Person, PPA, CRC Sindh and Chairperson Konpal, the facilitators and the participants introduced themselves. A pretest

then followed. Before the formal initiation of the workshop the participants were asked to express their fear and expectation regarding the workshop and they were explained the rules of the workshops.

Dr Aisha outlined the objectives of the workshop and then conducted a brainstorming session regarding the conceptualization of child abuse and protection. The participants in this session were involved in the discussion to describe various types of child abuses prevalent in our society and the conception and definition of child protection and abuse. The participants were then given a case study (this was a case handled and effectively managed by the hospital child abuse committee of civil hospital Karachi). The participants were asked to identify the apparent, hidden and possible type of child abuse in the case study. They were divided into four groups, each group was asked to interact with each other and the facilitators to discuss various types of abuse/s in the given case. A working tea was served dur-

ing group work. Each group was then asked to present their work. An interactive discussion followed. Participants were then asked to prepare a plan of action for the management of this case. This was given to them as home task and was asked to present next day.

This was followed by a session on interviewing a victim of child abused. Psychiatrist Dr Raza conducted this session. He described the technique of interviewing a child who has suffered an abuse. He then divided the participants into four groups and gave a case scenario to each group and asked the participants to demonstrate the interviewing skill involved according to each scenario, which depict the various types of abuses. The participants enthusiastically participated in the role-play and demonstrated and learned the interviewing skill.

This session was followed by a session on Myths related to child abuse.

They were then shown a case scenario and were asked to calculate the cost of

managing a child who suffered an abuse. They were asked to come prepare for the discussion on the cost of child abuse for the next day.

The first day session ended with this activity. Two volunteers were assigned to present the summary of the Day I activity and their comments on the next day. The Egg exercise, an activity much appreciated in the previous workshops, was repeated. Four participants were given four raw eggs decorated as dolls. The participants were instructed to take care of these eggs as if they were little children and were to be brought back intact next day. The Day I activity then ended with lunch.

DAY II: The proceedings of the next day started with the feedback of the first day. The participants briefly summarized the previous day activities and gave their feedback on the Day I. The four participants who were given eggs the previous day with the instruction to take care of them as children were asked to briefly narrate their experience of twenty-four hours. Not only were all the four eggs brought intact but the participants had taken good care of them and shared their experience with their own children.

The next session was on the recognition of signs and symptoms of child abuse conducted by Dr Aisha who described the symptoms commonly seen in a victim of child abuse and with the help of photographs explained the various mode of presentation of physical and sexual abuse. She also explained the medico legal reporting of a case of child abuse to MLO dept. This was an interactive session where participants took active part.

Farah Iqbal, a psychologist from Karachi University, then demonstrated by means of role-play an effective counselling technique and later described the various aspects of counselling methods. She involved the group in a discussion. This session was followed by group presentation of the task assigned to them on Day I. Each of the four groups outlines the plan of management of child abuse case.

Dr Aisha then informed the participants about the hospital child protection committee formed at the Civil Hospital and Lyari General Hospital, and the composition of its members. The cases handled so far, including the case given to the participants for study and as home assignment were discussed at length.

She suggested that an HCPC should be



Certificate distribution: Dr Arshalooz and some of the participants

formed at Liaquat National Hospital and assured Dr Arshalooz of her team's full support. A post-test was conducted at the end of the session.

The second day session then ended with the certificate distribution to the participants and the facilitators.

The participants feed back-obtained daily on a prescribed form were highly appreciative of the various activities conducted during workshop.

Abbasi Shaheed Hospital

A two-day training workshop on child protection and early case management of child abuse was held at Abbasi Shaheed Hospital, Karachi, on May 23-24. It was held in collaboration with the Pakistan Paediatric Association, the Child Rights and Abuse Committee, the Save the Children Fund Sweden, the Working Group Against Child Sexual Abuse and the Konpal Child Abuse Prevention Society.

The workshop was attended by 30 participants which included 12 paediatricians and other doctors from the paediatrics, gynae-obs, paediatric surgery and medico-legal departments.

DAY I: Brief welcome addresses were presented by Dr Sultan Mustafa, head of the paed department at Abbasi Shaheed Hospital and Dr Aisha Mehnaz. After the facilitators and the participants had introduced themselves, a pretest followed. In his address, Professor A Ghaffar Billoo discussed the role of CRC and the commitment of Pakistan as its signatory. The participants discussed a case handled and

effectively managed by the hospital child abuse committee of Civil Hospital Karachi. Participants were asked to identify the apparent, hidden and possible type of child abuse in the case study. They were divided into four groups; each group was asked to interact with each other and the facilitators to discuss types of abuse in the given case.

Each group presented their work, followed by an interactive discussion. Participants were then asked to prepare a plan of action for the management of this case which was discussed on Day II.

A session on interviewing a child abuse victim was conducted by psychologist Farah Iqbal. She described the technique of interviewing a child who has suffered abuse, followed by a role play. The participants learned the interviewing skills.

It was followed by a session about myths related to child abuse. A case scenario was presented and the participants were asked to calculate the cost of managing a child who suffered abuse. The Day I session ended with the following activity: The egg exercise was repeated.

Day II: The proceeding of the Day II began with a roundup of the Day I. The participants summarized the previous day's activities and gave their feed back on the first day.

The next session discussed recognition of the signs and symptoms of child abuse. Dr Ashfaq Mala, Dr Arshalooz Rehman, Dr Aisha Mehnaz, Farah Iqbal, also delivered their respective presentations. The session ended with certificate distribution by Dr Masroor.

Training workshop at Civil Hospital

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The Medical Superintendent of Civil Hospital, Karachi, Dr Kaleem Butt, the Supervisor of the HCPC and the chief guest on the day II was also present along with gynaecologist Prof Nusrat Khan, who is also an active member of the committee. The Medical Superintendent applauded the effort of Dr Aisha, the organizer and the coordinator, in her efforts to fight against the menace of child abuse and assured her of his wholehearted cooperation. His views were seconded by Professor Nusrat Khan. The Day II session ended with certificate distribution to participants and facilitators.

The recommendations by the four groups are summarized below:

1. The government should feel its responsibility and play an active role in prevention of child abuse.

2. Healthcare providers should play their due role in prevention, protection, rehabilitation and re-integration of child abuse cases.

3. HCP needs to be adequately educated about management of child abuse cases.

4. Information should be disseminated through workshops and the media.

5. The topic of child abuse as a subject should be introduced in undergraduate curriculum.

6. Information regarding concerned NGOs and related institutions should be collected and made available for contact when needed.

7. Parents and law-enforcing agencies should be involved in management of child abuse.

8. A multidisciplinary approach to rehabilitate the child by involving psychiatrist, paediatrician and other relevant professionals is imperative.

9. Arrangement of a proper rehabilitation centre for the victims of child abuse is essential.

10. Teachers and the management should come forward to play an active role in eradicating and handling cases of child abuse in educational institutions.

Role of the community: It was felt that there is a lack of awareness regarding the rights of children and the magnitude of the problems in the community. There is also a lack of interest and insensitivity to understand and take action when a child is abused. The community also has a biased attitude when it comes to gender equality and the male child is considered an asset while the female child a burden to the family. The law-enforcing authority are reluctant to report cases of child abuse.

There is a lack of proper coordination between community members, medical community, law-enforcing agencies and

government functionaries.

There is no mechanism to treat the abused and proper rehabilitation.

The following recommendations were given to improve the role of community in prevention of child abuse:

1. Enhance awareness in the community through seminars and plays. Print and electronic media can play a positive role in this regard.

2. Increase awareness of the rights and protection of children.

3. Train and educate social workers to identify and manage cases effectively.

4. Involve local groups like local committees to identify the children at risk and to help them either by themselves or report it to relevant organization.

5. Orientate school teachers to respect the rights of the child and help in identifying the children at risk.

6. Remove social stigma so that the cases are better reported.

7. Provide a safe environment to the child.

8. Create different support groups for children where they can share their fears and apprehensions.

9. The community leaders should coordinate with the government functionaries, NGOs and medical practitioners.

10. Create safe environment in order to minimize the risk of abuse to the child.

Concept paper on prevention of child abuse

Continued from page 1

psychiatrists, psychologist, gynaecologist, medico-legal officers and medical superintendents. The committee is holding its case meeting regularly and has managed eight cases during 2006.

The main objectives of the child protection committee are:

1. To create awareness about the various overt and covert forms of child abuse among hospital personnel by organizing seminars and discussion session.

2. To strengthen the capacity of health care providers in the management of victims/survivors of child abuse by arranging a series of workshops for the medical and paramedical staff of both the hospitals and

later the service will be extended to other hospitals of the city and province.

The committee discusses all matters pertaining to child abuse cases seen in the hospitals (CHK/LGH at present) within the committee and use all resources to solve the problems of the affected children and their family.

The committee has prepared a plan of action for the management of the victims of abuse case including early detection, medical and psychosocial management and rehabilitation.

Providing medico-legal or legal support and reporting, monitoring, advocacy and lobbying is also the responsibility of the committee.

Nurses' workshop

KONPAL organized a one-day workshop on in collaboration with Sind Nurses Examination Board, Karachi, on May 19. Twenty-two nurses and senior nurses from different hospitals and the School of Nursing attended the workshop.

Jacqueline Sommer highlighted the main objective of the workshop, that was, to raise awareness of the problem among nurses. Dr. Aisha Mehnaz shared the view that child abuse is very common in different age groups, and explained its different types through a display of slides.

Different scenarios were given to participants for incisive discussion. They were facilitated by Dr Aisha, Dr Ashfaq, Seema and Jacqueline.

It was also recommended that the subject of child abuse should be made a part of nursing curriculum.

What's important for you to know about sexual abuse

YOU, as a person, have the right to maintain boundaries that will help prevent or stop sexual abuse, assault, violence, and harassment. You must understand that no one should coerce, abuse, or assault another person. It is your obligation to make the children under your control, or influence, understand in a positive manner that:

Basically,

- One's body belongs to oneself.
- There are parts of one's body that are considered to be private, including one's mouth, breasts, genital parts.
- No one should touch the private parts of a child's body except for health reasons or to clean them.
- Children should not touch the private parts of other people's bodies.

Importantly,

- Child sexual abuse is when someone touches the private parts of a child's body without a health or hygiene reason. It also occurs when someone asks a child to touch the private parts of his/her body.
- Both boys/men and girls/women can be sexually abused.
- Everyone, including children, has the right to tell others not to touch their body when they do not want to be touched.
- If a child experiences unwanted or uncomfortable touching, he/she should tell a trusted adult, even if he/she was told to keep it a secret.

More importantly,

- Children can be sexually abused by a stranger or by someone they know.
- A child is not at fault if a person – even a family member – touches him/ her in a wrong or uncomfortable way.
- If a stranger tries to get a child to go with him/her, the child should run and tell a parent, teacher, neighbour, or other adult.
- Most people would never abuse children. Still sexual abuse is very common, even though many people do not want to talk about it.

- Sexual abuse is most often committed by someone the child knows, and an abuser can be an adult, a teenager, or child, and can be male or female.

One must be aware that:

- Most sexual abuse involves some kind of secrecy, bribery, trickery, threat or force.
- When people are sexually abused they can have many conflicting emotions including feeling confused, angry, scared, guilty, ashamed, alone, worthless, depressed, and helpless, or feeling special, wanted, loved, needed, and cared for.
- If a child experiences unwanted or uncomfortable touching, he/she should tell a trusted adult; if that adult doesn't believe or help him/her, the child should tell another adult, and keep telling until someone helps.
- There are many people who can help young people who have been abused, including school teachers, doctors, religious leaders, and police.

On Internet,

- Although chatting or meeting people online can be fun, individuals should be cautious because it can be unsafe.
- Some people use the Internet to trick young people into sexually abusive situations.

You must be aware that

- Sexual abuse not involving touch can include being shown pornographic movies, magazines, websites, or other materials; taking photos, videos, or other recordings; or watching sexual acts.
- Sexual assault can occur with physical or psychological force.

What's rape? Who's at fault?

- When sexual assault involves penetration of the vagina or anus it is called rape.
- Both boys/men and girls/women can be sexually assaulted, although it is more commonly reported by girls/women.
- People who are sexually assaulted are never at fault.
- Sexual assault by an acquaintance, a

friend, or a date is often called acquaintance rape or date rape.

- One should never force another person to engage in any type of sexual behaviour.
- Sexual assault is a crime, and a person who is sexually assaulted can report the assault to the police who may start an investigation.
- Domestic violence is psychological, physical, and/or sexual abuse between people in an intimate relationship who are dating, living together, or married.

More facts:

- Psychological, physical, and/or sexual abuse between people who are dating is also known as dating violence.
- Many people who commit sexual abuse, assault, or domestic violence experienced abuse at some point in their lives.
- Many community resources can help individuals who have survived sexual harassment, assault, or other forms of violence. Those who can help include teachers, doctors, religious leaders, rape crisis centres, domestic violence organizations, and the police.
- Sexual harassment can occur in a variety of settings including schools, the workplace, and extracurricular programmes.
- People who have been sexually abused or assaulted may benefit from support, counseling, and medical care.
- Whether or not to report sexual abuse, assault, violence, or harassment, is a personal decision that can be difficult for survivors to make. They need support and assurance.
- The investigation and/or trial resulting from reported sexual abuse, assault, violence, or harassment can be a difficult experience for survivors.

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