

Article

Professionals' support role for survivors of femicide and relatives of victims: The case of Ecuador

by

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Abstract

The ways in which care professionals' support is provided to survivors of femicide, as well as to victims' families (children, parents and siblings), may be crucial for their process of rehabilitation and integration into society, thereby increasing their chances to live a relatively satisfying life in the future. The objective of this article is to analyse the characteristics of this professional response, and suggest recommendations to enhance the care provided to femicide survivors and their families, in order to make it more significant and context-sensitive. Thus, a qualitative research, including 12 in-depth interviews, was conducted among femicide survivors and family members of femicide victims from the provinces of Imbabura and Carchi in the Ecuadorian highlands. Notwithstanding the governmental efforts, both through legislative changes and the development of care plans for the victims, the findings indicate an ambivalent professional response, as well as a significant lack of support networks for survivors and families of femicide victims.

Keywords

femicide, professional response, Ecuador, social care, gender violence

Introduction

Gender violence and femicide constitute a social and public health problem, as well as a serious violation of human rights that has a global impact (Ellsberg, Jansen, Heise, & Watts; Garcia-Moreno, 2008; WHO, 2013). Attitudes regarding violence against women are formed by a wide range of social processes at multiple levels of the social order, influencing the perpetration of violence against women, the individual and institutional responses to violence against women, as well as women's own responses to victimization. Key influences on attitudes include gender relations and roles, cultural issues and other forms of social difference associated with ethnicity and class (Flood & Pease, 2009). Among them universal rape myths, such as 'blaming the victims', shape societal perceptions of rape victims, including those of service providers, which can affect victims' psychological and social health, in addition to their coping mechanisms (Suarez & Gadalla, 2010).

When considering femicide at the Symposium held on 26 November 2012 at the United Nations Office in Vienna, it was defined as the extreme manifestation of existing forms of violence against women and girls'. This crime can take different forms, so therefore when analysing its causes, the historical development of relations of power and inequality between men and women based on a systematic dynamic of gender discrimination, must be considered (Laurent et al., 2013).

Femicide includes the killing of women as a result of intimate partner or interfamily violence, the torture and misogynist slaying of women, the killing of women in the name of honour, the targeted killing of women and girls in the context of armed conflicts, dowry-related killings of women, the killing of women because of their sexual orientation and gender identity, the killing of aborigine and indigenous women due to their gender, female infanticide and gender-based sex selection feticide, genital mutilation-related femicide, accusations of witchcraft and other femicides connected to gangs, organized crime, drug dealers and human trafficking (UNDOC, 2013).

A report from the Pan American Health Organization in Latin America indicated that violence against women constitutes a serious problem that radically affects their daily life. It is expressed and aggravated through the development of abusive power relations, the control of the victims' relationships and the impunity of the aggressors (Sagot, 2000). Several Latin American countries present some of the highest figures in the world on gender violence. In countries like Ecuador, historical, cultural, political and socio-economic circumstances affect the construction of the imaginary where gender supremacy prevails, allowing for some tolerance towards violence. In this context, six out of 10 women are victims of some kind of violence (Ibáñez, 2017).

When addressing public policies and professional responses regarding femicide, it is necessary to consider a few central elements that vary among countries, such as: the definition of femicide and the way in which violence against women is typified; the possibility of access to information about the cases; the ways in which the victim support network is structured and how aggressors are dealt with (Boira, Paredes, & Pabón, 2015).

In general, it is important to look at some specific issues in the context of this phenomenon in Latin America. According to Caivano and Marcus-Delgado (2013), there are two constant barriers which may increase the risk of death as a result of femicide: poverty and the lack of support from the authorities to break the cycle of violence. Therefore, it is often very complex for women to escape situations of violence and not only gender-based ones, but also other forms, such as violence faced in the context of war or displacement, or as a consequence of issues of race and socioeconomic status. Thus, in Ecuador and elsewhere in Latin America, specific ethnic and cultural realities make them different from the European perspective. Likewise, both the administrative structure, and the differences in accessibility to public services between urban and rural environments, add another significant factor to be taken into consideration (García & Astete, 2012).

In Ecuador, the crime of femicide was defined for the first time in the Comprehensive Criminal Code (COIP) enforced in 2014, which referred to an aggressor as 'the person who, as a result of power relations manifested in any type of violence, kills a woman because she is a woman or because of her gender, and will be punished by imprisonment for 22 to 26 years' (Código Orgánico Integral Penal, 2014). After the Code's enforcement, various publications analysed this phenomenon (e.g. State Attorney General's Office, Ecuador, 2016; Fernández, 2017, Boira & Rivera, 2016). Regarding the prevalence of femicide in Ecuador, Boira and Rivera (2016) estimated that from 2012 to 2015 the number of women killed was 246, of which 106 deaths were in 2013, 76 in 2014 and 64 in 2015. This data differs that offered by the Office of the Prosecutor, which only covers the period from August 2014 to August 2015, during which the number of homicides of women was 188, of which 45 were classified as femicide, while 143 deaths (76% of the total) were classified as homicides, murders or hired killers (State Attorney General, Ecuador, 2016). These figures seem to be increasing in recent years and, according to data from the Ecumenical Commission for Human Rights, from January 1 to August 2, 2017, 103 women were murdered in Ecuador (Colectivo de Geografía Crítica, 2017).

Regarding the Imbabura and Carchi Provinces where the study was carried out, little information is available. In the aforementioned report from the Office of the Prosecutor

General, four cases are identified, all of them in Imbabura (Office of the Attorney General of the State, Ecuador, 2016).

In this context, the work of the professionals involved in the care of the victims who survived, as well as the families of the women killed, can be critical. Many studies have analysed the impact of various types of professional care, such as psycho-social, health, legal or law enforcement (e.g. Monckton-Smith, Williams, & Mullane, 2014; Horwitz et al., 2011; Lila, Gracia, & García, 2013; Stout & Kennedy, 2017; Mears et al., 2001; Rivas et al., 2015).

An important issue to be considered is to provide these professionals with relevant and specialized training in order to avoid gender biases, thereby minimizing the consequences of violence for survivors and families, as well as its impact on their life in the future (e.g. Fernández, 2015; Erturk, 2004). In addition, the incorporation of a gender perspective may influence aggressors' judicial processes (Hall, Whittle, & Field, 2016). Considering the aforementioned, it is important for professionals to be aware of the primary theories which attempt to explain violence against women (Cunningham et al., 1998; Foa et al., 2000; Stith & Rosen, 1992; WHO, 2002), or the fact that they remain, sometimes for years, inside of a violent relationship (Barnett, 2001). It is also necessary for them to be aware of some of the most important consequences suffered by women who are victims of violence (Ellsberg et al., 2008). Other family members, especially children, can suffer from different problems related to emotional and behavioural issues, such as depressive and anxious symptoms, fears, regressive symptoms or school problems (Baker & Campbell, 2012; Orjuela, Perdices, Plaza, & Tovar, 2008). This may be further increased by the fact that minors frequently witness the crime or arrive at the scene shortly after it occurs, as indicated by as Farnos and San Martin (2005).

Another important issue to consider in the professionals' response is their ability to coordinate and network among themselves and others involved in these cases.

In addition, they must consider the resources available to victims, and must avoid painful and unnecessary processes of victimization, not only concerning the survivors, but also their children and the rest of the family (Calle-Fernández, 2004; Domínguez,

2016). In this sense, victims can encounter different barriers when seeking formal and informal help, also increasing the risk of femicide (Gover, Tomsich, & Richards, 2015).

Regarding Ecuador, Boira, Tomas-Aragones and Rivera (2017) reviewed some studies which have analysed gender violence in relation to various issues, such as the differences between rural areas and cities (Astete & García, 2012; Cuvi, Ferraro, & Martínez, 2000), the rights of women, including sexual and reproductive rights (Friederic, 2013) as well as the needs of women, the risk of teenage pregnancies and men's attitudes toward gender violence (Goicolea, 2001; Goicolea, Wulff, Öhman, & Sebastian, 2009; Goicolea, Öhman, Torres, Morrás, & Edin, 2012).

However, not many studies have focused on professionals' responses and actions in cases of gender violence and femicide (Boira, Tomas-Aragones, & Rivera, 2017; Boira & Rivera, 2016; Boira, Carbajosa, & Méndez, 2015; Ramírez & Gómez, 2007). In the case of rural areas, the socio-economic structures often remain at subsistence levels, with poverty and a lack of resources further aggravated by the geographic isolation of many of the rural communities. These authors show how victims and aggressors are immersed in a complex system of interpersonal relationships, and subjected to specific sociocultural norms and practices, which are more pronounced in the rural environment. In such a scenario, the role of professionals in cases involving violence can be of utmost importance, as it has the potential to protect against or reinforce violence, and can also be essential for developing effective psychosocial intervention strategies. When specifically considering social workers, Ramírez and Gómez (2007) suggest that they carry out a preventive intervention in the context of human rights as a strategy that could contribute to identify the social responsibilities that different services, institutions and communities should assume in order to prevent femicide, in addition to the causes that lead men to extreme violence against women and femicide. Considering the aforesaid, the aim of this article is to analyse the professional response, both towards survivors of femicide and families of victims (children, siblings, parents), and to suggest some recommendations to improve professional care.

Methodology

This article is part of a larger study that analysed femicide in Ecuador based on interviews of women survivors and relatives of murdered women. A qualitative

research was designed, in which 12 in-depth interviews were conducted in the provinces of Imbabura and Carchi of Ecuador during 2014 and 2015. Nine of them were with relatives of murdered women and three with survivors of violence. The filiation of the family members interviewed and the victims' ages are shown in Table 1.

Table 1: Filiation of the relatives, age of the victims and year of the murder

Interview number	Informant/s	Age of victim	Year of murder
	Brother and sister-		
1	in-law	35	2013
2	Mother	25	2014
3	Father and mother	25	2014
4	Father and mother	24	2013
5	Father and mother	17	2014
6	Father	19	2012
7	Mother and sister	20	2012
8	Son	66	2014
9	Daughter	55	2014
10	Survivor	39	
11	Survivor and mother	15	
12	Survivor	30	

Intensive fieldwork was required in order to contact both femicide survivors and the relatives of the murdered women, using the 'snowball sampling' system (Patton, 1990). It is also known as 'chain sampling', in which a participant who is a member of the target group to be studied facilitates the contact with another one, who then suggests the next one and so on. This type of sampling is usually used when it is not easy for the researcher to access potential participants for a variety of reasons. In some cases, it was necessary to travel to towns and villages in order to make inquiries about survivors or relatives of victims among the neighbours. In addition, during the process of identifying the femicide cases, press reports of the provincial and national newspapers (El Norte, La Hora and El Comercio) were reviewed, and some details

and circumstances related to the violent death of these women were compared with the database of the Ministry of the Interior of Ecuador.

The interviews often took place in the participants' homes, since it was considered that this could help facilitate their participation and create an atmosphere of trust in which they could express themselves, including their emotions and feelings. The interviews included one or more family members, with their duration varying according to the case, usually lasting between 90 minutes to two hours. Each participant was interviewed, recorded and later transcribed verbatim.

An in-depth 'semi-structured interview guide' with the main topics of interest was used. This enabled the process to be flexible, while giving participants ample freedom to share their thoughts and take the interview in various directions. The guide included issues, such as the victim's memories, her relationship with the murderer, the reaction and response of institutions, friends, neighbours and the media, the way the situation was managed by professionals and the judicial process, especially regarding the aggressors.

The objectives of the interview were clearly explained, and it was explicitly stated that at any moment participants could decide to end it. In addition, they were requested to sign an informed consent form to record, transcribe and use the material for academic purposes. It is important to note that all the participants completed the interview.

Subsequently, a content analysis of the interviews was conducted, identifying the emerging themes in each of them and the key ideas that the informants expressed, as well as the points of consensus and those in which they disagreed (Braun & Clarke, 2006). Moreover, and based on the transcription of the interviews, a story was elaborated for each one of the participants with the objective of facilitating its reading. These stories were published in the book, 'Stars in Heaven: Femicide and violence against women in the Ecuadorian Highlands' (Boira & Rivera, 2016).

This article focuses on the professional response offered to survivors of femicide and relatives of victims in Ecuador.

Results

The survivors and families of the victims frequently referred to the consequences suffered after the traumatic event of femicide, as well as to their new emerging needs. Throughout the stories, there are also many references to the role played by institutions and professionals involved in these cases of violence. The results of the study have been analysed on the basis of these two main issues: the consequences of femicide and the emerging needs of families and survivors, and the professional and institutional response towards the survivors of femicide and the relatives of victims.

Consequences of femicide and emerging needs of families and survivors

The tragic death of a loved one or having survived a crime of violence are both circumstances that totally change a person's life, dividing it clearly into 'before' and 'after' the tragedy, and require all available sources of support, both formal and informal. If death is not accidental, as in cases of gender-related murders, in addition to the need to cope with the acceptance of the loss of a loved one, indignation and the need for justice occupy a central place. Similarly, consequences will also be extremely traumatic for women who survive severe ongoing violence or brutal rape. In such circumstances, psychological, social, legal and economic needs must be met. These include psychological care to address shock and post-traumatic stress, psychological and social care for children, the search for financial resources, training in order to improve their chances of obtaining employment, as well as the reestablishment of social networks, counselling and support during legal processes to enable them to face long and costly trials. Addressing the need of financial resources, the father of one of the murdered female teenager expressed the following:

The State has not helped us at all to pay for expenses. We are poor and you need money for everything, even to make copies (of documents) you need money ...and little by little, it is spent. You even have to take trips to look for evidence ..., and all that is money, to move, look for it ... Since the murder of our daughter, we have spent about \$ 3,000 without counting the lawyer (expenses), plus about \$ 2,000 to bring her, and the wake ... We even organized programmes (activities) to collect funds. We had a sports night ... we asked for a dollar at the entrance, and everyone (said): 'no, no, take two, take three (dollars)...' (Interview 5, father of victim)

This father's statement reflects the dire financial needs following the murder of his daughter. In view of the authorities' lack of support, the family, who was still in

mourning, organized an activity to generate income for expenses such as the lawyer's fees, their daughter's wake and the funeral. In this case the community members' solidarity and collaboration filled the void left due to the lack of official services and support.

Surviving victims may have physical injuries such as wounds, burns or sexually transmitted diseases. On the psychological level, they present a different symptomatology, primarily post-traumatic stress disorder (PTSD). The social impact of violence is also enormous, deeply affecting the survivors, the children and other relatives of the victims, as stated by the mother of a young woman who was raped and almost killed:

It has been very hard for everyone: for me as a mother, but also for her, because that led her to the idea of committing suicide. My daughter continues psychological and psychiatric treatment, she takes a lot of medications because she has the famous post-traumatic stress, she has flashbacks and sometimes she remembers some things and, over time she remembers a little more each time. (Interview 11, mother of victim)

Furthermore, it is important to focus on the social impact following gender violence or femicide, such as the difficulties of returning to a normal life, including going back to work or school. Suffering may sometimes increase due to situations of harassment, and of having to change schools. Continuing with the previous interview, the mother whose daughter was raped explains:

When this happened I changed my daughter's school and took her to a nuns' school. But in this new school she was mocked because of what happened to her. They just showed a video of a rape and my daughter started crying, the psychologist came in and my daughter said she wanted to talk. And then she gave her testimony in front of everyone. During the first days they supported her, they helped her, but later they began to make her life impossible, not only her classmates but also the teachers, even the principal herself ... They made fun of her, pushed her aside, left her alone [...] The situation became intolerable and I decided to have her study by long-distance learning. (Interview 11, mother of victim)

This case illustrates how the psychological impact of rape can deteriorate due to social isolation and how victims and their families can be further traumatized by their peers and even by their teachers. These did not have the training or the specific skills to deal with the victim, (conscious or unconsciously) choosing to pick on her or to ignore her, and thus increasing her vulnerability. The example also serves as an indication of the

low level of professional psycho-social counselling and care in this specific educational setting.

Similarly, fear often becomes a constant emotion for victims and their families, including fear of the aggressor himself, of his family and of 'what they (other people) will say'. In an interview, which took place a few months after the rape, the survivor tells about the extreme consequences it had on his life:

My life has changed a lot because I'm afraid to go out[...] Sometimes I have felt threatened [...], I think: If these people were capable of doing this, it will be no problem for them to do something (similar) to someone in my family, to someone that I love. (Interview 12, survivor)

Hence, in addition to psychological, social and material needs, fear is always present, and is a crucial factor that both survivors and the relatives of the victims need to cope with, since it is a key issue through which the aggressors attempt to control the situation. Some narratives indicate how possible extortions and threats are made in order to buy the silence or lack of action of friends and family, as illustrated in the following two examples. In the first case, the father of one of the victims shared a conversation he had with a friend of his murdered daughter:

She told us [when referring to his daughter - the victim] that this guy had forced her into a taxi, and that he was the last person to see her. She did not want to testify at the trial because she was afraid that he would do it to her too. She did not want to testify because of fear. (Interview 6, father of the victim)

In the second case, the daughter of one of the victims was scared of the aggressor's family:

I am very afraid of these people, I am very afraid, I am afraid that something could happen to my daddy or to us. But at the same time, I gather strength and say: 'Well, in this life I have to die someday ...', but I am afraid for my family. (Interview 9, daughter of the victim)

Fear is a very powerful theme repeated throughout the different interviews. It has a strong psychological impact on the victims and their families and, therefore, often poses a barrier to the disclosure of ongoing gender violence, as well as for testifying and seeking assistance. This is further enhanced in patriarchal societies, where a woman may still be blamed for seducing the aggressor (Suarez & Gadalla, 2010).

Lastly, from a legal perspective, it is common for participants to feel that they are experiencing a great amount of obstacles. In addition to their pain and anger, they have

had to learn the rules of the game of the criminal justice system of the country, while facing numerous financial expenses, and sometimes having to proactively go and search for the evidence themselves.

Professional and institutional response towards the survivors of femicide and relatives of victims

The performance of the institutions and responses offered by professionals involved in the care process of survivors and families that have suffered femicide, such as the police, the justice system or those intervening at the psychological or social levels, were mentioned often during the research. When referring to the criminal legal process, the survivors and families of the victims expressed ambivalent feelings toward the actions of the police, the judiciary, the prosecutor's office and the lawyers, which included illegal practices such as bribery. In a significant number of cases situations depicting possible economic blackmail, the purchase of witnesses and power games were identified. Regarding these bad practices, in some of the cases love or a crime of passion are mentioned as a justification for the murder committed. In one of the interviews, the victim's mother relates to the Court Secretary's reply when she asked her why the aggressor received such a short prison sentence:

Because he accepted the death of my daughter, because he said that she was his lover. For the justice system, it was a murder due to passion, which is some way appears to justify her death. (Interview 7, mother of victim)

Another important theme appearing in different testimonies is the lack of proactivity of care professionals involved in the care of cases of violence. On many occasions, their passive attitudes did not help the victim or their family members to manage the situation, as expressed by a female survivor of intra-family violence:

Even if it (the case of violence) is known, the people in the government do nothing. The doctors, although they know of the abuses, also do nothing, they do not report or file complaints. Not even the doctor with whom I underwent a double nose surgery: he knew that my husband beat me, and did nothing. (Interview 10, survivor)

Although this testimony refers specifically to the health providers, the same seems to occur with other professionals. It may also be related to the fact that the institutional response is often characterized by a lack of resources. There was a general consensus among the participants that the support and aid available to survivors and families are very limited. The following narrative illustrates this point:

Nobody has approached us to offer psychological support, although we were in a very bad shape, but neither a psychologist nor anyone else came to inform us about where we could go, what we could do or what our rights were. (Interview 2, mother of the victim)

Considering the aforementioned, and the fact that apart from the mental health services of the hospitals, there is no other protocol for monitoring the needs of the minor children, of other family members or relatives of the murdered women, it is not surprising that family and friends are those who must take the initiative to search for help and resources. This is illustrated by a man whose daughter was killed, and he and his wife are taking care of his orphaned granddaughter:

But let's say like (regarding) ... help, no, no one has offered it to us, nobody from the Government. Only in the place where my daughter (the victim) worked, in the store, she gave us money for the entire funeral and gave the girl 300 dollars. And the friends of the school where she went also came to see her with two teachers, they came to see her and brought her clothes, others gave her money ... Maybe it would be necessary for them (government) to support something, to give me some money for my (grand) child, at least financial support to help her in her studies, so that she can keep on going ..., a help from the Government. (Interview 4, father of the victim)

The aid offered seems to be very limited, and is mostly directed to offer support to minors – and usually only for a limited time. Thus, expenses must be paid for by the families themselves. The participants demand financial assistance to help pay the many expenses involved in starting a legal process, as well as aid for minors, and for victims of rape and intra-family violence, including different interventions that can help them in their rehabilitation process.

Conclusions and suggestions for improvement

Femicide is undoubtedly a complex social phenomenon that requires further understanding, in addition to the development of mechanisms to improve the technical and social responses to this problem (Corradi et al., 2016). Throughout this paper, a series of stories that try to explain its psychological and social consequences for families and survivors have been analysed. An important challenge is identifying which factors can improve the effectiveness of the interventions facilitated by professionals involved in the process. One of the main results has been uncovering a set of their weaknesses in dealing with gender violence and femicide, which critically affects the families of the dead women and the survivors.

Although the government of Ecuador has made great progress in reforming the regulations and developing specific plans to eradicate the problem of violence against women, investigations on femicide in Latin America (e.g. Sagot, 2010), as well as the participants' testimonies in this study, indicate that there is still a long way to go.

It is evident that violence never occurs in a vacuum, but in a symbolic and cultural scenario with specific socio-economic characteristics, where the victim and aggressor, as well as their family members, friends and neighbours all interact, and in which the professional and institutional response have an important role to play. Likewise, as shown in the interviews, the type of professional response available can be mediated by factors such as the socio-economic level or the status of the family. Thus, it is necessary to look at the 'intersectionality' (Sokoloff & Dupont, 2005), and incorporate variables such as living in the countryside, in the city, the cultural universe of belonging, the social status of the family, the level of education and the economic resources available, in order to better understand and deal with femicide. Although it takes place in both urban and rural areas, in the countryside there are particular circumstances that intensify some risk factors (Friederic, 2013).

All these issues are fundamental for understanding violence against women and femicide in a broader context, and not only limited to the victim and the aggressor.

From an ecological perspective (Bronfenbrenner, 1986; Edleson & Tolman, 1992; WHO, 2002; Boira et al., 2017), the relations of violence between the victim and the aggressor cannot be understood in a vacuum. Their impact and degree of violence are related to how the different spheres in which men and women participate, such as the family, the neighbourhood or the care professionals, react towards violence. In this context, the professional and institutional responses are essential for prevention, and can increase or decrease the risk of femicide in specific cases. As stated in the Results section of this article, and in line with Boira et al. (2017), different barriers which render the professional and institutional response ineffective to cope with femicide have been identified. On this basis, some ways to improve professional practices are suggested.

New needs as a consequence of femicide

The new realities forced upon a woman survivor after a failed femicide, or upon the family of a femicide victim, pose psychological, social, legal and financial needs that must be addressed, while paying special attention to the children who remain orphans. Confronted with such situations, social workers and other care professionals can play a crucial role in strengthening support networks for survivors, or for family members of victims, in order to enable them to better cope with the consequences in the aftermath of their tragedy. They can be the primary referral professionals coordinating the actions of others in the different areas mentioned. Thus, they can help facilitate the access to justice for victims who decide to report their situation of violence by accompanying them, helping with bureaucratic processes and by increasing the awareness and sensitivity of other professionals towards their cases.

Support and networks

The network of technical and financial support and benefits offered by the State in Ecuador is very limited, and when they are offered they seem to be narrowly focused and are not consistent or continued over time. Considering this chronic situation of lack of resources, social workers could develop some way of optimizing them. Hence, they should be well informed of all the available resources, as well as of the procedures to follow in order to file a complaint, including the basics of the judicial process regarding the aggressors' trials.

In the analysis of support and assistance for the victims, it is important to distinguish between what could be helpful, including immediate, medium and long-range assistance, which can provide sustained support over time. Regarding the first, such help should begin with a protocol of the recommended ways to communicate the bad news, the first-aid psychological and social care to be offered to address the delicate situation of the children, while also considering other different procedures that must be carried out. As for the long-term interventions they should be specified, such as treatments for post-traumatic stress, for social rehabilitation and for financial issues.

Psycho-social professionals should also be qualified to develop support networks, while coordinating between the different organizations which address violence against women, such as the public administration, social services, women's

associations and community leaders. Likewise, their role can be essential to guide community processes focusing on violence prevention in the field, while at the same time accompanying the victims and their families, and helping them to access justice and the social resources available. Finally, it is also very important that beyond direct psycho-social care, social action professionals, including social workers, should participate in the planning, management and evaluation of public policies on these specific issues. As suggested by Essayag (2013), permanent public policies must be developed to integrate all public and social organizations by providing them with sufficient and sustainable funds.

The importance of empathy and other skills among professionals caring for survivors of femicide and relatives of victims

The management of emotions and of the grief process is another essential issue to be considered. Care professionals are expected to have communication skills and abilities, since these determine the type of connection to be established between the professional and the person who needs their care. In addition, the input of such skills and abilities is needed at different levels, including the definition of the context of the intervention, the management of the relationship or for the professional's own reflexivity (Carbajosa, Boira, & Tomas-Aragonés, 2013). Although from a therapeutic point of view this approach belongs to psychology, in the specific context of Ecuador other care professionals, and especially social workers, must also develop the particular set of skills necessary in the context of crisis intervention. In fact, the social worker as a frontline professional should be the focus person in the care process, accompanying and supporting the victim or her family. Regarding femicide, social workers must face very demanding situations. These are often traumatic, painful and conflictive, and require the development of specific skills such as empathy, mediation or active listening, which are crucial in caring for the victim or her family in a culture-sensitive and meaningful way (Nudelman et al., 2017). Many participants reported the passiveness, lack of sensitivity and empathy when relating to the care received by care professionals. Considering that the professional response is also mediated by different bureaucratic procedures, the lack of empathy is often linked to the lack of specialized training to better understand the socio-cultural context of the process of gender violence, including how it plays out, and what the consequences will be for the victim. It is important to realize that the traumatic consequences of femicide - including living

in fear - together with insufficient knowledge of what needs to be done following femicide, may lead to the passiveness or lack of action of the families or victims, in addition to the acceptance of a situation in which their rights may be seriously violated. Thus, the response of psycho-social professionals can also be ambivalent, sometimes reflecting bad practices based on their own internalized patriarchal culture. Therefore, it is essential that all professionals (both male and female) involved in a process of dealing with victims acquire a gender perspective, and personally reflect on the consequences of patriarchal culture in Ecuadorian society.

To conclude, we want to emphasize that an effective care for survivors of femicide and the relatives of victims must involve all the professionals and institutions dealing with them. Likewise, it is necessary to address the emergent needs of survivors and family members resulting from their traumatic experiences in a comprehensive way. This may be achieved by reinforcing the different support systems available, and by enhancing the skills and response of the professionals taking care of them and their interventions at all levels.

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