Caring for women subjected to violence: A WHO curriculum for training health-care providers





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# **Facilitator's Guide**



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# **Purpose and overview**

Violence against women, including intimate partner violence and sexual violence, is pervasive globally and leads to significant physical and mental health problems. Thus, it is a public health issue that demands a concerted response from health-care providers and health systems worldwide. The World Health Organization (WHO) has developed guidelines for the health-care sector: Responding to intimate partner violence and sexual violence against women: WHO clinical and policy guidelines (2013) and an accompanying clinical handbook Health care for women *subjected to intimate partner violence or sexual violence:* clinical handbook (2014). This in-service curriculum, based on these documents, aims to provide healthcare providers with the knowledge and basic skills to implement the WHO recommendations in their clinical practice. Training providers is key to improving the health system's response to violence against women.

### **First-line support**

- L Listen,
- I Inquire
- **V** Validate
- **E** Enhance safety
- **S** Support

This curriculum is designed to provide health-care providers, particularly in low- and middle-income countries, with a foundation for responding to domestic/intimate partner violence and sexual violence

against women. The curriculum seeks to build skills and to address providers' attitudes towards survivors of violence. Participants will learn how to provide women-centred clinical care, including identifying women experiencing violence, providing first-line support though the LIVES approach (Listen, Inquire, Validate, Enhance safety and Support), providing essential clinical care for survivors, and identifying local support resources. They will learn to reflect on their own attitudes and understand survivors' experience. The curriculum emphasizes compassionate, empathic provider–patient communication.

This curriculum is based on WHO's clinical handbook. Participants and facilitators are advised to keep the handbook handy for reference throughout the training.

Training is an important component of an overarching health system response to violence against women. Health services managers and health policy-makers

also have responsibility for strengthening planning, coordination and human resource management; establishing policies and protocols; and monitoring and evaluating the provision of care to survivors of violence. Managers and policy-makers are advised to consult *Strengthening health systems to respond to women subjected to intimate partner violence or sexual violence: a manual for health managers* (WHO, 2017) for comprehensive guidance on improving health system readiness.

The clinical guidelines on which this training is based do not specifically address children, adolescent girls (under age 18) or men. Nonetheless, actions described may also be valuable for these population. They also apply to domestic violence more broadly – that is, violence by family members other than an intimate partner. Facilitators are encouraged to review *Responding to children and adolescents who have been sexually abused: WHO clinical guidelines* (WHO, 2017) for recommendations for a child- and adolescent-centred response.

## Who is this training for?

This training curriculum is primarily designed for practising health-care providers, particularly doctors, nurses and midwives. Parts of it may also be useful to other cadres of health-care providers, including psychologists, social workers, nurse assistants, community health workers and lay counsellors.

#### **Participant-centred learning**

This curriculum uses a participant-centred approach to learning – an active, collaborative, inquiry-based approach to teaching and training. Also known as learner-centred education, participant-centred learning emphasizes that the trainee is an active participant. Participant-centred learning actively engages the trainee wherever possible, rather than relying only on facilitators. Learners actively participate in knowledge and skills development through case studies, guided discussions, participatory reflection exercises, videos and readings. This process supports critical reflection, emotional engagement, skills development and the ability to put knowledge into practice.

#### Aim of this training

To foster understanding of and develop the basic skills to implement the recommendations of the WHO clinical and policy guidelines and clinical handbook on responding to intimate partner violence and sexual violence against women.

### **Competency-based training**

This competency-based curriculum enables development of the knowledge and skills to provide comprehensive, high-quality care to women who are subjected to intimate partner violence or sexual violence. Each session supports one of four objectives (see box) while fostering unique competencies. Table 1 presents the titles and competencies of the training sessions. The objectives and capacities for this training were defined through an expert review process.

### The four objectives of the training

- Demonstrate general knowledge of violence against women as a public health problem.
- 2. Demonstrate behaviours and understand values contributing to **safe and supportive services for survivors**.
- 3. Demonstrate **clinical skills** appropriate to one's profession and specialty to respond to violence against women.
- Demonstrate knowledge of how to access resources and support for patients and for oneself.

**Table 1. Sessions, objectives and competencies** 

No.	Session, objective, competencies
1	Understanding violence against women as a public health problem
	Objective 1. Demonstrate general knowledge of violence against women as a public health problem
	Competencies:
	Know the epidemiology of the different forms of violence against women at global and local levels.
	Know the health consequences of violence against women.
	Understand the role and limitations of health-care providers in responding to violence against women.
	Know about the WHO clinical and policy guidelines and clinical handbook on responding to intimate partner violence and sexual violence against women.
2	Understanding the survivor's experience and how providers' values and beliefs affect the care they give
	Objective 2. Demonstrate behaviours and understand values contributing to safe and supportive services
	Competencies:
	Demonstrate self-awareness of one's beliefs, assumptions, potential biases and emotional responses that can affect interactions with survivors of violence against women.
	Understand the circumstances and the barriers that women experiencing violence face when seeking support.
	Recognize the importance of having empathy with survivors.
3	Guiding principles and overview of the health response to violence against women
	Objective 2: Demonstrate behaviours and understand values contributing to safe and supportive services
	Competencies:
	Know the guiding principles of providing woman-centred care in a culturally appropriate way.
	Understand how to apply the guiding principles for women-centred care in your practice.

No.	Session, objective, competencies
4	Provider–survivor communication skills
	Objective 2: Demonstrate behaviours and understand values contributing to safe and supportive services
	Competency:
	Communicate empathically and effectively with patients/survivors.
5	When and how to identify intimate partner violence
	Objective 3: Demonstrate clinical skills appropriate to one's profession and specialty to respond to violence against women
	Competencies:
	<ul> <li>Understand the minimum standards that need to be met to enquire about and respond appropriately to violence against women.</li> </ul>
	Recognize the signs and symptoms that suggest intimate partner violence.
	Understand when and how to ask about intimate partner violence.
	Demonstrate appropriate ways to ask about intimate partner violence.
6	First-line support using LIV(ES), part 1: <u>L</u> isten, <u>I</u> nquire, <u>V</u> alidate
	Objective 3: Demonstrate clinical skills appropriate to one's profession and specialty to respond to violence against women
	Competencies:
	Know the content of first-line support (LIVES).
	Demonstrate skills in offering the first three elements (listening, inquiring and validating) of first-line support to survivors who disclose abuse.
7	Know your setting: identify referral networks and understand the legal and policy context
	Objective 4: Demonstrate knowledge of how to access resources and support for patients and for oneself
	Competencies:
	Understand the role of other services in caring for survivors of violence against women.
	Know what resources are available in the community.
	Know the legal and policy context, including health-care providers' legal obligations, with regards to the local and national response to violence against women.
8	First-line support using (LIV)ES, part 2: Enhancing safety and providing Support
	Objective 3: Demonstrate clinical skills appropriate to one's profession and specialty to respond to violence against women

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