

Responding to intimate partner violence and sexual violence against women: WHO guidelines and handbook

Marion Winterholler
Koordinierungsstelle S.I.G.N.A.L. e.V.



S.I.G.N.A.L. e.V.
Intervention im
Gesundheitsbereich
gegen Gewalt

S.I.G.N.A.L. e.V. and S.I.G.N.A.L. Coordination

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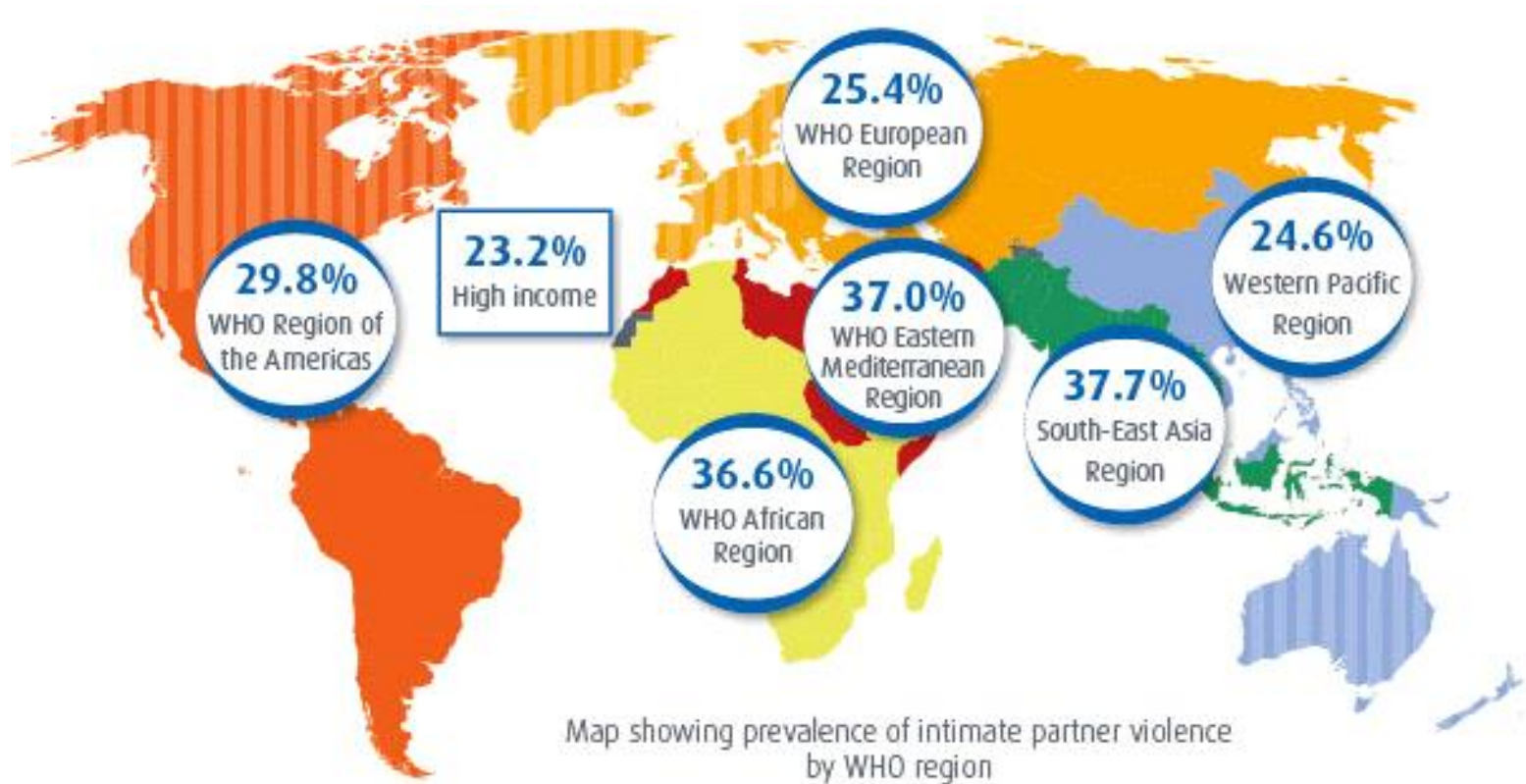
- Not-for-profit, registered NGO since 2002
- First German intervention in healthcare project (1999-2003)
- Pilot project MIGG with doctor's surgeries (2008-2010)
- EU funded projects

S.I.G.N.A.L. Coordination

- Berlin-based project, state funded since 2010
- 1,9 WTE posts (3 expert advisors)
- Aim: Promotion of intervention in health care against intimate partner and sexual violence

Violence against Women: Prevalence (WHO 2013)

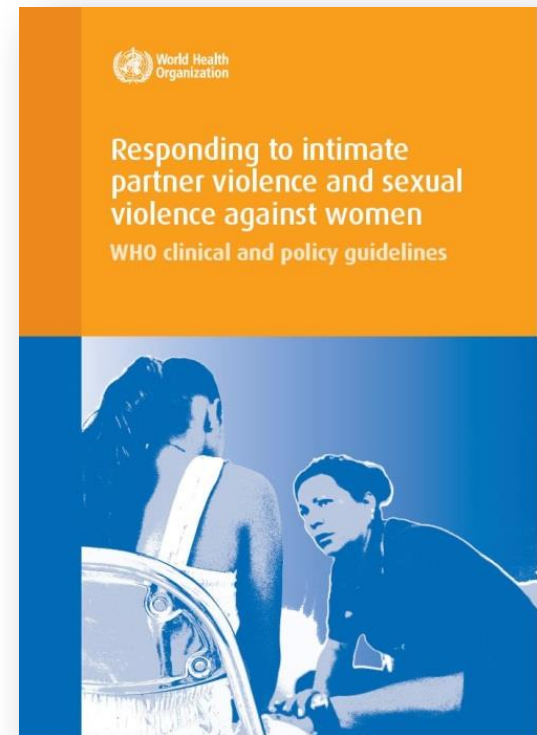
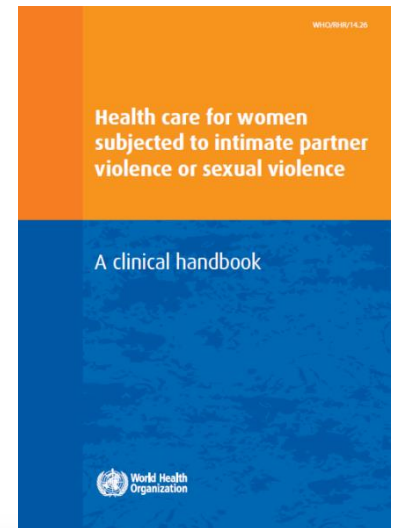
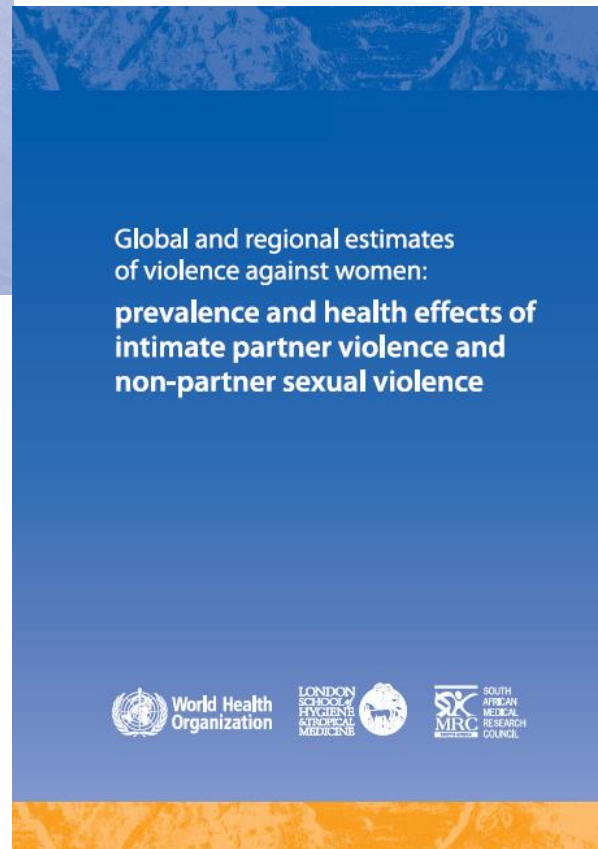
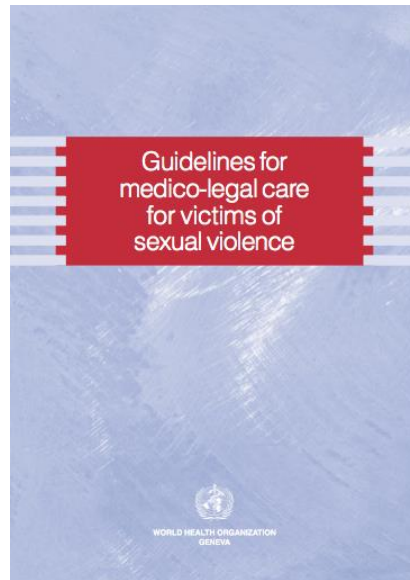
– 1 in 3 Women –



Globally intimate partner violence (IPV) is the most common form of violence experienced by women (almost one third of women affected)

7 % of women are sexually assaulted by someone other than a partner

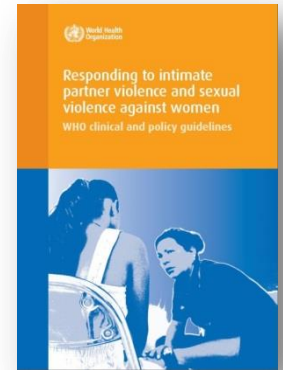
WHO Documents



Responding to intimate partner violence and sexual violence against women – WHO clinical and policy guidelines

Based on:

- Research/evidence reviews
- Human rights perspective
- Best practice



Comprehensive and detailed foundation for health care providers and policy makers (standards)

Content:

- 38 recommendations for appropriate care, policy decisions and training of health care workers
- Information on implementation and monitoring

Women-centred care

strong recommendation (WHO)

Offer *immediate* support

- First-line support - as a minimum - includes:
 - Being non-judgemental, supportive and validating
 - Practical care and support
 - Asking her about her history of violence (without pressure)
 - Help to access information about resources
 - Assistance to increase her and her children's safety
 - Providing/mobilising social support
- Consultation conducted in private
- Confidentiality

AND: Documentation of injuries

Identification of intimate partner violence

strong recommendation (WHO)

Routine enquiry is NOT recommended, but:

Asking about IPV when assessing or treating conditions that may be caused/complicated by IPV.

Examples of clinical conditions are listed!

ed in the context of HIV testing
selling, although further research
te this is needed.

l care is an opportunity to
outinely about intimate partner
because of the dual vulnerability
ncy. There is some limited
from high-income settings to
that advocacy and empowerment
ions (e.g. multiple sessions
ured counselling) following
tion through routine enquiry in
care, may result in improved
tcomes for women, and there
e possibility for follow-up during
care. However certain things
be in place before this can be
e Minimum requirements).

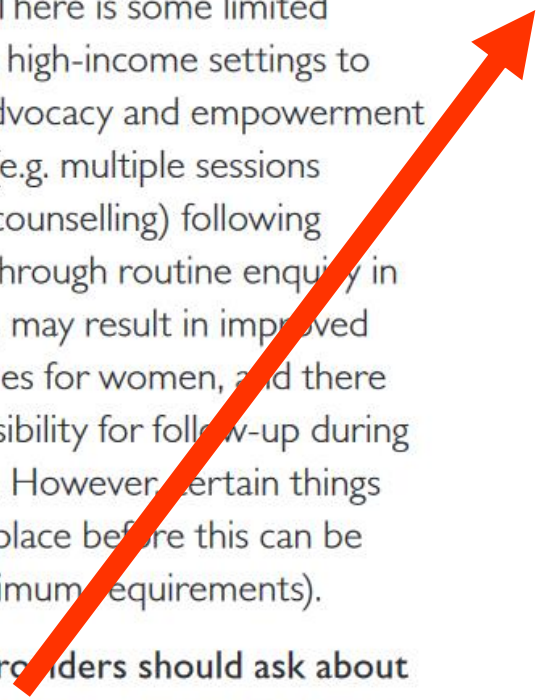
are providers should ask about
e to intimate partner violence
essing conditions that may

respond to women who disclose violence
(see Minimum requirements). This should at
least include first-line support for intimate
partner violence (see recommendation 1).

**Minimum requirements
for asking about partner violence**

- A protocol/standard operating procedure
- Training on how to ask, minimum response or beyond
- Private setting
- Confidentiality ensured
- System for referral in place

- (b) Providers need to be aware and knowledgeable about resources available to refer women to when asking about intimate partner violence.
- 4 Written information on intimate partner violence should be available in health-care settings in the form of posters, and pamphlets or leaflets made available in



Clinical care for survivors of sexual assault

strong recommendation (WHO)

During first five days after the assault

Offer of first-line support (as above), including:

- Practical care and support responding to her concerns
- Listening without pressure
- Offering comfort and help to alleviate/reduce anxiety
- Offering information, helping to connect to services and social supports
- Take a complete history of events and document (WHO 2003 guidelines)
- Head-to-toe physical examination
- Offer emergency contraception
- Offer HIV prophylaxis and STI prophylaxis, Hepatitis B vaccination
- Psychological/mental health intervention

Further care after sexual assault

strong recommendation (WHO)

Up to 3 months post-trauma

Continue to offer first-line support

,watchful waiting‘

If needed, arrange for CBT or EMDR

If needed, provide care for other mental health problems

From 3 months post-trauma

Assess for mental health problems:

PTSD:

CBT or EMDR

Other mental health problems:

provide treatment

Training of health-care professionals

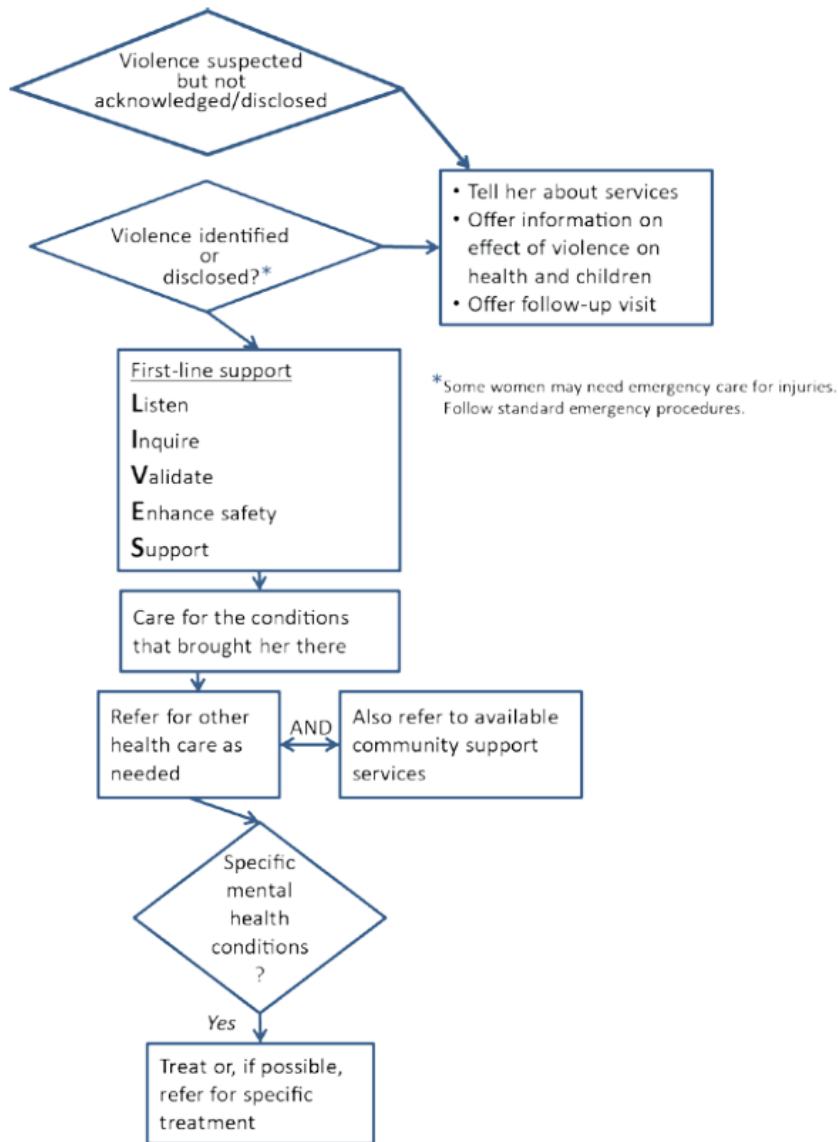
strong recommendation (WHO)

- Training at pre-qualification level: first-line support
- In-service training: appropriate skills, best way to respond, forensic evidence collection
 - Basic knowledge about violence, laws
 - Knowledge of existing services
 - Inappropriate attitudes and own experiences

Health-care policy and provision

- Care for women experiencing IPV/sexual assault should be integrated into existing health services
- Multiple models of care for different levels of the health system are required (in each country)
- 24/7 availability of a trained health care provider (gender sensitive sexual assault care and examination) per district/area level
- WHO guidelines state minimum requirements for all countries
 - Implementation, monitoring
 - More research...

Pathway for care for violence by intimate partner



Planning

Where to go	If you need to leave your home in a hurry, where could you go?
Who to take	Would you go alone or take your children with you?
How to get there	How will you get there?
What to take	Do you need to take any documents, keys, money, clothes, or other things with you when you leave? What is essential?
Where to leave things	Can you put together items in a safe place or leave them with someone, just in case?
How to get money	Do you have access to money if you need to leave? Where is it kept? Can you get it in an emergency?
Who to call	Is there a neighbour you can tell about the violence who can call the police or come with assistance for you if they hear sounds of violence coming from your home?

Koordinierungsstelle S.I.G.N.A.L. e.V.
Marion Winterholler

winterholler@signal-intervention.de

Tel: (030) 275 95 353
www.signal-intervention.de



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