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# The WHO Multi-country Study on Women's Health and Domestic Violence Against Women

## WHO VIOLENCE AGAINST WOMEN INSTRUMENT

This instrument consists of two sets of questions designed to capture information critical to assessing the prevalence, frequency and severity of different forms of violence against women, perpetrated both by intimate partners and others. The first set of questions focuses on violence by intimate partners only and should be used in its entirety to measure violence by intimate partners. The second set addressing violence by others, can be added onto the first set if violence against women is explored in a broader context.

### **Violence against women by intimate partners**

The first set of questions focuses on violence perpetrated against women by their intimate partners (questions 703 to 706, 709, 801, 802, 904 and 905 in the core questionnaire). These questions on partner violence explore aspects of controlling behaviours, emotional abuse, physical violence, and sexual violence (703-706) as well as physical violence during pregnancy (709) by current or former intimate partners. This section also has questions for women who have suffered physical violence by an intimate partner, that assess the degree of injury (801

and 802). Finally there are two questions that explore whether the woman herself used violence against the most recent partner who used violence against her, and whether this aggression was offensive or in self-defence (904 and 905). The instrument does not aim to document every abusive action that a woman may experience, but rather aims to assess whether the respondent is likely to be experiencing 'severe' and/or 'moderate' levels of abuse in her relationship. The questions on injury contribute to providing a crude measure of the severity of the violence. They should not be interpreted as a measure of the health effects of violence as, in practice, the health effects of violence are far more wide-ranging than immediate injury. The questions about whether the respondent was ever physically violent herself toward her partner and whether this violence was offensive or in self-defence, provide information critical to interpreting the context of the violence.

Because of the complexity of defining and measuring emotional abuse in a way that is relevant and meaningful across cultures, the questions regarding emotional violence should be considered as a starting point, rather than a comprehensive measure of all forms of emotional abuse. Researchers are encouraged to add questions referring to

locally relevant forms of abuse. Because so little is presently known about measuring emotional violence across cultures, the WHO Multi-country study does not include emotional violence when reporting the prevalence of violence by intimate partners. Instead, the study reports lifetime and 12 month prevalence of physical, sexual, and physical or sexual violence by intimate partners.

In the WHO study, this section of the instrument is applied primarily to women who have had an intimate partner with whom they have co-habitated. In countries where it is common that women have intimate partnerships without co-habiting, the instrument can be used to capture “dating” violence with only minor accommodations in language.

### **Violence against women by others than intimate partners**

The second part of the instrument includes a set of questions (questions 1001-1003 and 1201 in the core questionnaire) designed to address other types of violence that women have experienced outside of the context of an intimate partner relationship. Questions 1001-1003 enable the collection of minimal data on the prevalence of sexual abuse in childhood and on the prevalence of physical and sexual violence in adulthood by people other than intimate partners. These questions do not capture physical, emotional or other types of neglect or maltreatment in childhood. Question 1201 offers the respondent the opportunity to report childhood sexual abuse in a linked concealed way. This section of the instrument may be asked of all women, regardless of relationship status.

## **USE OF WHO STUDY PROTOCOL AND QUESTIONNAIRE**

The WHO Study questionnaire, together with the protocol and other supporting

materials such as the training manuals and data entry system, have been developed to permit the collection of standardised data, and thus facilitate cross-cultural comparisons. To this end, wide dissemination and utilisation of the questionnaire is encouraged. While recognising that some adaptation to local conditions may be necessary, these should be minimal, in order to ensure that as far as possible, comparability can be maintained. This is particularly the case for the questions that make up the Violence Against Women Instrument.

Those using the WHO Study protocol and/or questionnaire are requested to acknowledge the WHO source documents in all publications and/or documents that arise from study (as detailed below). In addition, WHO will make available to interested parties all manuals, accompanying documentation and data entry programs developed for use in the WHO Multi-country Study in exchange for a copy of the final, cleaned data set, for cross-national comparison.

Some researchers may wish to generate prevalence estimates comparable to the WHO Multi-country Study, but may not want to fully replicate the study. In order to ensure that the prevalence data obtained is comparable to the WHO study, investigators should, at a minimum, incorporate the **WHO Violence Against Women Instrument** (either the first section on partner violence alone, or also the questions on experiences of violence by others). Again, for comparison purposes, the sample should enable the disaggregation of data to obtain prevalence estimates for a representative sample of ever-partnered women 15-49.

In addition to the **WHO Violence Against Women Instrument**, researchers may choose to incorporate other questions and/or entire sections from the WHO core questionnaire. In such cases the researchers should acknowledge the WHO questionnaire in the following manner:

*“This study adheres to the WHO*



## WHO VIOLENCE AGAINST WOMEN INSTRUMENT

Incorporated in the Core Questionnaire Version 10

WHO Multi-country Study on Women's Health and Domestic Violence Against Women  
20 September 2003

### INDIVIDUAL CONSENT FORM

Hello, my name is \*. I work for \*. We are conducting a survey in STUDY LOCATION to learn about women's health and life experiences. You have been chosen by chance (as in a lottery / raffle) to participate in the study.

I want to assure you that all of your answers will be kept strictly secret. I will not keep a record of your name or address. You have the right to stop the interview at any time, or to skip any questions that you don't want to answer. There are no right or wrong answers. Some of the topics may be difficult to discuss, but many women have found it useful to have the opportunity to talk.

Your participation is completely voluntary but your experiences could be very helpful to other women in COUNTRY.

Do you have any questions?

(The interview takes approximately \* minutes to complete). Do you agree to be interviewed?

NOTE WHETHER RESPONDENT AGREES TO INTERVIEW OR NOT

DOES NOT AGREE TO BE INTERVIEWED —————> THANK PARTICIPANT FOR HER TIME AND END

AGREES TO BE INTERVIEWED



Is now a good time to talk?

It's very important that we talk in private. Is this a good place to hold the interview, or is there somewhere else that you would like to go?

---

#### TO BE COMPLETED BY INTERVIEWER

I certify that I have read the above consent procedure to the participant.

Signed: \_\_\_\_\_

*ethical guidelines for the conduct of violence against women research and uses the WHO Violence Against Women Instrument as developed for use in the WHO Multi-country Study on Women's Health and Domestic Violence Against Women. Additionally it incorporates questions/sections from the WHO study*

*questionnaire (describe which questions/section were used)."*

For copies of the various documents mentioned above, as well as further information on the study and on arrangements to replicate the study can be obtained from Dr Claudia Garcia-Moreno, Study Coordinator (garciamorenoc@who.int) or from Dr Henriette Jansen, Epidemiologist to the Study (jansenh@who.int).

**SECTION 7 RESPONDENT AND HER PARTNER**

	<b>EVER MARRIED / EVER LIVING WITH A MAN / EVER SEXUAL PARTNER</b> <input type="checkbox"/> <input type="checkbox"/> ↓	<b>NEVER MARRIED / NEVER LIVED WITH A MAN / NEVER SEXUAL PARTNER</b> <input type="checkbox"/> → → <b>S.10</b>	
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When two people marry or live together, they usually share both good and bad moments. I would now like to ask you some questions about your current and past relationships and how your husband / partner treats (treated) you. If anyone interrupts us I will change the topic of conversation. I would again like to assure you that your answers will be kept secret, and that you do not have to answer any questions that you do not want to. May I continue?

703	I am now going to ask you about some situations that are true for many women. Thinking about your ( <u>current or most recent</u> ) husband / partner, would you say it is generally true that he:				
			YES	NO	DK
	a) Tries to keep you from seeing your friends?	a) SEEING FRIENDS	1	2	8
	b) Tries to restrict contact with your family of birth?	b) CONTACT FAMILY	1	2	8
	c) Insists on knowing where you are at all times?	c) WANTS TO KNOW	1	2	8
	d) Ignores you and treats you indifferently?	d) IGNORES YOU	1	2	8
	e) Gets angry if you speak with another man?	e) GETS ANGRY	1	2	8
	f) Is often suspicious that you are unfaithful?	f) SUSPICIOUS	1	2	8
	g) Expects you to ask his permission before seeking health care for yourself?	g) HEALTH CENTRE	1	2	8

704	The next questions are about things that happen to many women, and that your current partner, or any other partner may have done to you.  Has your <u>current</u> husband / partner, or <u>any other partner</u> ever....	<b>A)</b> <b>(If YES continue with B. If NO skip to next item)</b>	<b>B)</b> Has this happened <u>in the past 12 months</u> ? <b>(If YES ask C only. If NO ask D only)</b>	<b>C)</b> <u>In the past 12 months</u> would you say that this has happened once, a few times or many times? <b>(after answering C, go to next item)</b>	<b>D)</b> <u>Before the past 12 months</u> would you say that this has happened once, a few times or many times?
		YES NO	YES NO	One Few Many	One Few Many
	a) Insulted you or made you feel bad about yourself?	1 2	1 2	1 2 3	1 2 3
	b) Belittled or humiliated you in front of other people?	1 2	1 2	1 2 3	1 2 3
	c) Done things to scare or intimidate you on purpose (e.g. by the way he looked at you, by yelling and smashing things)?	1 2	1 2	1 2 3	1 2 3
	d) Threatened to hurt you or someone you care about?	1 2	1 2	1 2 3	1 2 3

705	Has <u>he</u> or any other partner ever....	A) (If <b>YES</b> continue with B. If <b>NO</b> skip to next item)	B) Has this happened <u>in the past 12 months</u> ? (If <b>YES</b> ask C only. If <b>NO</b> ask D only)	C) <u>In the past 12 months</u> would you say that this has happened once, a few times or many times? (after answering C, go to next item)	D) <u>Before the past 12 months</u> would you say that this has happened once, a few times or many times?	
		YES NO	YES NO	One Few Many	One Few Many	
		a) Slapped you or thrown something at you that could hurt you?	1 2	1 2	1 2 3	1 2 3
		b) Pushed you or shoved you or pulled your hair?	1 2	1 2	1 2 3	1 2 3
		c) Hit you with his fist or with something else that could hurt you?	1 2	1 2	1 2 3	1 2 3
		d) Kicked you, dragged you or beat you up?	1 2	1 2	1 2 3	1 2 3
		e) Choked or burnt you on purpose? f) Threatened to use or actually used a gun, knife or other weapon against you?	1 2 1 2	1 2 1 2	1 2 3 1 2 3	1 2 3 1 2 3
706		A) (If <b>YES</b> continue with B. If <b>NO</b> skip to next item)	B) Has this happened <u>in the past 12 months</u> ? (If <b>YES</b> ask C only. If <b>NO</b> ask D only)	C) <u>In the past 12 months</u> would you say that this has happened once, a few times or many times? (after answering C, go to next item)	D) <u>Before the past 12 months</u> would you say that this has happened once, a few times or many times?	
		YES NO	YES NO	One Few Many	One Few Many	
		a) Did your <u>current husband/partner or any other partner</u> ever physically force you to have sexual intercourse when you did not want to?	1 2	1 2	1 2 3	1 2 3
		b) Did you ever have sexual intercourse you did not want to because you were afraid of what your partner or any other partner might do? c) Did your partner or any other partner ever forced you to do something sexual that you found degrading or humiliating?	1 2 1 2	1 2 1 2	1 2 3 1 2 3	1 2 3 1 2 3
707	VERIFY WHETHER ANSWERED YES TO ANY QUESTION ON PHYSICAL VIOLENCE, SEE QUESTION 705	YES, PHYSICAL VIOLENCE ..... 1 NO PHYSICAL VIOLENCE ..... 2				
708	VERIFY WHETHER ANSWERED YES TO ANY QUESTION ON SEXUAL VIOLENCE, SEE QUESTION 706	YES, SEXUAL VIOLENCE ..... 1 NO SEXUAL VIOLENCE ..... 2				

	<p><b>EVER BEEN PREGNANT</b> [ ]</p> <p>↓</p> <p><b>NUMBER OF PREGNANCIES</b> [ ][ ]</p>	<p><b>NEVER PREGNANT</b> [ ] →</p> <p>→ S. 8</p>
709	You said that you have been pregnant TOTAL times. Was there ever a time when you were slapped, hit or beaten by (any of) your partner(s) whilst you were pregnant?	<p>YES ..... 1</p> <p>NO ..... 2</p> <p>DON'T KNOW/DON'T REMEMBER ..... 8</p> <p>REFUSED/NO ANSWER ..... 9</p>

**SECTION 8 INJURIES**

		<b>WOMAN EXPERIENCED PHYSICAL OR SEXUAL VIOLENCE</b> [ ] ↓	<b>WOMAN HAS NOT EXPERIENCED PHYSICAL OR SEXUAL VIOLENCE</b> [ ] → → <b>S.10</b>
<p>I would now like to learn more about the injuries that you experienced from (any of) your partner's acts that we have talked about (MAY NEED TO REFER TO SPECIFIC ACTS RESPONDENT MENTIONED IN SECTION 7). By injury, I mean any form of physical harm, including cuts, sprains, burns, broken bones or broken teeth, or other things like this.</p>			
801	Have you <u>ever</u> been injured as a result of these acts by (any of) your husband / partner(s). Please think of the acts that we talked about before.	YES ..... 1 NO ..... 2 DON'T KNOW / DON'T REMEMBER ..... 8 REFUSED / NO ANSWER ..... 9	→ <b>S.9</b>
802 a)	<u>In your life</u> , how many times were you injured by (any of) your husband/partner(s)? Would you say once or twice, several times or many times?	ONCE/TWICE ..... 1 SEVERAL (3-5) TIMES ..... 2 MANY (MORE THAN 5) TIMES ..... 3 DON'T KNOW / DON'T REMEMBER ..... 8 REFUSED / NO ANSWER ..... 9	
802 b)	Has this happened <u>in the past 12 months</u> ?	YES ..... 1 NO ..... 2 DON'T KNOW / DON'T REMEMBER ..... 8 REFUSED / NO ANSWER ..... 9	

**SECTION 9 IMPACT AND COPING**

I would now like to ask you some questions about what effects your husband /partner's acts has had on you . With acts I mean... (REFER TO SPECIFIC ACTS THE RESPONDENT HAS MENTIONED IN SECTION 7).

IF REPORTED MORE THAN ONE PARTNER VIOLENCE, ADD: I would like you to answer these questions in relation to the most recent / last partner who was physically or sexually violent toward you..

		<b>WOMAN EXPERIENCED PHYSICAL VIOLENCE</b> [ ] ↓	<b>WOMAN HAS EXPERIENCED SEXUAL VIOLENCE ONLY</b> [ ] → → <b>S.10</b>
904	During the times that you were hit, did you ever fight back physically or to defend yourself? IF YES: How often? Would you say once or twice, several times or most of the time?	NEVER ..... 1 ONCE OR TWICE ..... 2 SEVERAL TIMES ..... 3 MANY TIMES/MOST OF THE TIME ..... 4 DON'T KNOW / DON'T REMEMBER ..... 8 REFUSED / NO ANSWER ..... 9	→ <b>905</b>
905	Have you ever hit or physically mistreated your husband/partner when he was not hitting or physically mistreating you? IF YES: How often? Would you say once or twice, several times or many times?	NEVER ..... 1 ONCE OR TWICE ..... 2 SEVERAL TIMES ..... 3 MANY TIMES ..... 4 DON'T KNOW / DON'T REMEMBER ..... 8 REFUSED / NO ANSWER ..... 9	

**SECTION 10 OTHER EXPERIENCES**

<p>In their lives, many women experience different forms of violence from relatives, other people that they know, and/or from strangers. If you don't mind, I would like to briefly ask you about some of these situations. Everything that you say will be kept private. May I continue?</p>																																
<p>1001 a)</p>	<p>Since the age of 15, has anyone (FOR WOMEN WITH CURRENT OR PAST PARTNER: other than your partner/husband) ever beaten or physically mistreated you in any way?</p> <p>IF YES: Who did this to you?</p> <p>PROBE: How about a relative? How about someone at school or work? How about a friend or neighbour? A stranger or anyone else?</p>	<p>NO ONE ..... A</p> <p>FATHER ..... B STEP FATHER..... C OTHER MALE FAMILY MEMBER .....D FEMALE FAMILY MEMBER: ..... E</p> <p>TEACHER .....F POLICE/ SOLDIER .....G MALE FRIEND OF FAMILY .....H FEMALE FRIEND OF FAMILY .....I</p> <p>BOYFRIEND ..... J STRANGER..... K SOMEONE AT WORK .....L PRIEST/RELIGIOUS LEADER ..... M</p> <p>OTHER (specify): ..... X</p>																														
		<p>→ <b>1002</b></p> <p>b) ASK ONLY FOR THOSE MARKED. How many times did this happen? Once or twice, a few times, or many times</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 33%;">Once or twice</th> <th style="width: 33%;">A few times</th> <th style="width: 33%;">Many times</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> </tr> </tbody> </table>	Once or twice	A few times	Many times	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3
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<p>1002 a)</p>	<p>Since the age of 15, has anyone (FOR WOMEN WITH CURRENT OR PAST PARTNER: other than your partner/husband) ever forced you to have sex or to perform a sexual act when you did not want to?</p> <p>IF YES: Who did this to you?</p> <p>PROBE: How about a relative? How about someone at school or work? How about a friend or neighbour? A stranger or anyone else?</p>	<p>NO ONE ..... A</p> <p>FATHER ..... B STEP FATHER..... C OTHER MALE FAMILY MEMBER .....D FEMALE FAMILY MEMBER: ..... E</p> <p>TEACHER .....F POLICE/ SOLDIER .....G MALE FRIEND OF FAMILY .....H FEMALE FRIEND OF FAMILY .....I</p> <p>BOYFRIEND ..... J STRANGER..... K SOMEONE AT WORK .....L PRIEST/RELIGIOUS LEADER ..... M</p> <p>OTHER (specify): ..... X</p>																														
		<p>→ <b>1003</b></p> <p>b) ASK ONLY FOR THOSE MARKED. How many times did this happen? Once or twice, a few times, or many times</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 33%;">Once or twice</th> <th style="width: 33%;">A few times</th> <th style="width: 33%;">Many times</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> </tr> </tbody> </table>	Once or twice	A few times	Many times	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3
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1003	a) Before the age of 15, do you remember if any one in your family ever touched you sexually, or made you do something sexual that you didn't want to?	NO ONE..... A	<b>1004</b>				
			ASK ONLY FOR THOSE MARKED IN 1003a				
			b) How old were you when it happened with this person for the first time? (more or less)	c) How old was this person?  PROBE: roughly (more or less).	d) How many times did this happen?		
IF YES: Who did this to you?				Once/twice	Few times	Many times	
IF YES OR NO CONTINUE: How about someone at school? How about a friend or neighbour? Has anyone else done this to you?	FATHER ..... B	[ ] [ ] [ ]	[ ] [ ] [ ]	1	2	3	
	STEP FATHER ..... C	[ ] [ ] [ ]	[ ] [ ] [ ]	1	2	3	
	OTHER MALE FAMILY MEMBER / (BROTHER, ETC) ..... D	[ ] [ ] [ ]	[ ] [ ] [ ]	1	2	3	
	FEMALE FAMILY MEMBER: ..... E	[ ] [ ] [ ]	[ ] [ ] [ ]	1	2	3	
	TEACHER ..... F	[ ] [ ] [ ]	[ ] [ ] [ ]	1	2	3	
	POLICE/ SOLDIER ..... G	[ ] [ ] [ ]	[ ] [ ] [ ]	1	2	3	
	MALE FRIEND OF FAMILY ..... H	[ ] [ ] [ ]	[ ] [ ] [ ]	1	2	3	
	FEMALE FRIEND OF FAMILY ..... I	[ ] [ ] [ ]	[ ] [ ] [ ]	1	2	3	
IF YES: Who did this to you?	BOYFRIEND..... J	[ ] [ ] [ ]	[ ] [ ] [ ]	1	2	3	
	STRANGER ..... K	[ ] [ ] [ ]	[ ] [ ] [ ]	1	2	3	
	SOMEONE AT WORK ..... L	[ ] [ ] [ ]	[ ] [ ] [ ]	1	2	3	
	PRIEST/RELIGIOUS LEADER..... M	[ ] [ ] [ ]	[ ] [ ] [ ]	1	2	3	
	OTHER (specify): ..... X	[ ] [ ] [ ]	[ ] [ ] [ ]	1	2	3	
				DK = 98			

## SECTION 12 COMPLETION OF INTERVIEW

1201	<p>I would now like to give you a card. On this card are two pictures. No other information is written on the card. The first picture is of a sad face, the second is of a happy face.</p> <p>No matter what you have already told me, I would like you to put a mark below the sad picture if, someone has ever touched you sexually, or made you do something sexual that you didn't want to, before you were 15 years old.</p> <p>Please put a mark below the happy face if this has never happened to you.</p> <p>Once you have marked the card, please fold it over and put it in this envelope. This will ensure that I do not know your answer.</p> <p>GIVE RESPONDENT CARD AND PEN. MAKE SURE THAT THE RESPONDENT FOLDS THE CARD; PUTS IT IN THE ENVELOPE; AND SEALS THE ENVELOPE BEFORE GIVING IT BACK TO YOU. ON LEAVING THE INTERVIEW SECURELY ATTACH THE ENVELOPE TO THE QUESTIONNAIRE (OR WRITE THE QUESTIONNAIRE CODE ON THE ENVELOPE).</p>	<p>CARD GIVEN FOR COMPLETION..... 1</p> <p>CARD NOT GIVEN FOR COMPLETION..... 2</p>	
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SAMPLE OF CARD



# Exercises for Sensitizing Interviewers on Violence

## ACTIVITY 1: WHAT IS GENDER-BASED VIOLENCE? (30 MINUTES)

**Goal: To encourage participants to think about different kinds of acts that can constitute violence, and to recognize that violence can be physical, verbal, emotional, sexual, and economic.**

**Step 1** Ask the participants to mention all the different kinds of violence that are common in their community and write up the answers on the flipchart or blackboard. An alternative is to hand out cards for participants to write down their answers and then stick them up on the wall.

**Step 2** Ask the group “Are all these acts of violence the same?” “What kinds of differences are there between them?” “What kinds of violence are more likely to happen to women and girls than to men and boys?” “What do you think are the effects on the health of women and girls of this kind of violence?” If cards are used, they can be grouped together, according to the types of violence (emotional, verbal, economic, sexual, or physical), or according to which types of violence are suffered primarily by women and girls, which are mostly

experienced by men and boys, and which are suffered equally by men and women.

**Step 3** Present overheads and distribute handouts on the definitions and characteristics of gender-based violence, wife abuse and sexual coercion.

## ACTIVITY 2: MYTHS AND TRUTHS ABOUT VIOLENCE (30 MINUTES)

**Goal: To challenge existing beliefs about violence and to identify areas of consensus and disagreement within the group.**

**Step 1** Place three signs up around the room with the words “I AGREE,” “I DISAGREE,” and “I DON’T KNOW.”

**Step 2** Read out loud the following statements and ask participants to move to the sign that represents their opinion about the statement. Ask a few participants on each side to explain their opinion. The facilitator may ask questions to stimulate discussion, but it is not necessary to provide “correct” answers, as these will be discussed in greater depth later on. On a flipchart the facilitator can write down the number of people agreeing and disagreeing with each statement.



- Men are violent by nature.
- Violence is usually due to alcohol.
- Sometimes violence is a way of showing affection.
- Boys who witness their father's violence towards their mothers are more likely to be violent when they grow up.
- A woman should put up with violence in order to keep her family together.
- Some women like to be beaten.
- Violence against women exists in every society in the world.
- Violence is never justified.
- Girls who are sexually abused in childhood are more likely to drink and use drugs when they are older.
- Nobody deserves to be beaten. Violence is always the responsibility of the person who uses it.

### ACTIVITY 3: WHAT CAUSES VIOLENCE AGAINST WOMEN? (1 HOUR)

**Goal: To identify the issues at the level of both an individual and society that perpetuate violence against women, and to examine the consequences of violence, not only for victims, but also for families and communities.**

**Step 1** Place a circle or square at the center of a blackboard or large sheet of paper, with the words “violence against women” in the middle. Ask participants to brainstorm possible causes of violence. These can be immediate causes (for example “alcohol” or “economic problems” or larger problems such as “cultural attitudes,” “machismo,” “unemployment,” “educational system,” etc. Either write the answers on the board or ask each participant to write the causes on cards and place them on the board with tape. All the problems considered as “causes of violence” should be placed on one side of the center circle, either above or to the side.

**Step 2** For each problem identified, ask the group if it is related (either as a cause or a result) to any other problem already listed. If so, draw an arrow between the two boxes, indicating the direction(s) of the relationship.

**Step 3** After completing this side of the web, ask the group to name important effects or consequences of violence. These can be any kind of problem, health, economic, or social — resulting from violence. It is a good idea to try to discuss effects on individual women first, and then on families, communities, and society as a whole next. Again, for each problem, ask the groups to examine possible relationships between different problems and to draw arrows between these issues, indicating the direction(s) of the relationship.

### ACTIVITY 4: WHY DOESN'T SHE JUST LEAVE? (45 MINUTES)

**Goal: To understand some of the reasons that women stay in abusive relationships and the barriers that they face in seeking help.**

**Step 1** Show the group a small bird cage and ask them to imagine that inside is a woman living with violence. The bars on the cage represent the different barriers that women confront when trying to overcome abuse. Ask, “What are some of the different reasons that keep women in abusive relationships?” Write the different answers on the flipchart.

**Step 2** Have participants read the story *Candies in Hell* in small groups of three to four and discuss the following questions:

- Is Ana Cristina's story familiar to you? Has something like this ever happened to any one you know?
- Why do you think that Ana Cristina stayed in the marriage after her husband began to beat her?
- What do you think about the reactions of Ana Cristina's family and the police?
- What do you think that the expression "Candies in Hell" means?"
- What advice would you give Ana Cristina if she were your friend?

**Step 3** Have participants discuss in the larger group what they have learned and summarize their discussion. Present overheads on women's experiences of violence and the stages of violent relationships.

## CANDIES IN HELL: THE STORY OF ANA CRISTINA

*Ana Cristina was married at the age of 15 to a man in his late 30's. Her husband was a soldier and that quickly earned him the respect and approval of Ana Cristina's mother. Shortly after the marriage, he began to beat Ana Cristina savagely and continued to do so regularly throughout the subsequent five years. She learned to listen for him at night and be ready to escape with the children if necessary.*

*... I had to sleep in other people's houses to avoid getting beaten when he came home. I would have to climb over the back wall with my daughters when he arrived, and he would shoot at me. I escaped many times from his bullets. I don't know why I'm still alive...*

*... When I didn't want to have sex with my husband he simply took me by force... When he came home drunk he would beat me, and do what he wanted with me. Then I fought with him, but what could I do against a man who was stronger than me? I couldn't do anything, so I had to put up with it and suffer...*

*...He used to tell me, "You're an animal, an idiot, you are worthless." That made me feel even more stupid. I couldn't raise my head. I think I still have scars from this, and I have always been insecure ...I would think, could it be that I really am stupid? I accepted it, because after a point ... he had destroyed me by blows and psychologically... ... When he beat me, my daughters would get involved in the fight. Then he would throw them around in his fury and this hurt me, it hurt me more than when he beat me...*

*...Once, when I was recovering, because he had beaten me and he had left my eyes swollen and black, my daughter came up to me and said, "Mommy, you look like a monster" and she began to cry... It hurt me so much. It wasn't so much the blows I had, but what really hurt me were her sobbing and the bitterness that she was feeling.*

*...He was so jealous, my grandmother used to say, "If you stay with him he's going to put blinders on you like the horses that pull carriages." I couldn't look at anyone on the street, nor have either men or women friends, nor greet anyone. And if a man looked at me, he would smack me right there on the street.*

*...My mother would say to me, "Do you think you're the only one to live through this?" She told me not to leave, and my mother-in-law also told me that I should put up with it, ..." You have to maintain your marriage, remember that you are his wife and he is the father of your children."*

*...Once I went to the police for help, but since he was in the military they let him go right away and gave him a ride back to my house. That time he kicked down my door...*

*... After that, I didn't know what to do. I felt trapped, a prisoner and I couldn't escape...*

*...After the blows he always came back to court me, bought me clothes and afterwards he always said, "forgive me, I won't do it*

*again,” but then he always did the same afterwards. And then my grandmother would say to me “Child, what are you going to do with candies in hell?”*

**Alternative exercise:**

After reading the story and discussing it in groups, ask participants to write a letter or a poem to Ana Cristina. This is a very good exercise for identifying stereotypical reactions on the part of participants and for encouraging empathy for survivors of violence. Following is a letter written to Ana Cristina by a field worker in Peru during her training:

*Ana Cristina – you have the right to live with dignity and to be happy  
Dear Ana Cristina,  
My name is Rosalia Amada. I am a social worker. I am grateful for the*

*chance to get to know you and accompany you on your journey to rebuild yourself. You are a very brave woman. I know it must have been difficult to share your story and remind yourself of old wounds that must still hurt so much.*

*You have taken the first step, by recognizing the violence against you. You are like so many women in Peru who decided to live. Ana Cristina, you are beautiful because you are freeing yourself daily from resignation, fear, and manipulation. No one has the right to destroy our dreams, don't ever forget that.*

*You are the star of your own journey to freedom.*

*Good luck!  
Rosalia Amada*

TRAINING PLAN FOR FIELD WORKERS FOR A POPULATION-BASED SURVEY					
	Monday	Tuesday	Wednesday	Thursday	Friday
1st week	Gender and violence exercises		Overview of study objectives and interviewing techniques/safety measures	Question by question review of the instrument	
2nd week	Debriefing from interviews Practice in groups of three with case studies	Review of practice Practice with survivors	Practice household selection, first contact	Field practice	Debriefing
3rd week	Pilot testing	Pilot testing	Debriefing	Pilot again if necessary	Debrief again
			Start data entry with pilot data and debug data entry system Final questionnaire printed		
4th week	Field work begins		For data typists: Start data entry with survey data and debug and finalize data entry system; familiarize them with all data management procedures		



# GBV Resources Section

*The following resource materials have been compiled to facilitate access to information and organizations working on gender-based violence.*

## OVERVIEWS

***Costs of Intimate Partner Violence at the Household and Community Levels: An Operational Framework for Developing Countries.* Duvvury N, Grown C, Redner J. Washington, DC, ICRW, 2004.**

This publication summarizes studies that have estimated economic costs of intimate partner violence against women and lays out a framework to measure the costs of intimate partner violence in developing countries, factoring in prevention, response, and opportunity costs. [http://www.icrw.org/docs/2004\\_paper\\_costingviolence.pdf](http://www.icrw.org/docs/2004_paper_costingviolence.pdf)

***Advancing the Federal Research Agenda on Violence Against Women.* National Research Council Steering Committee for the Workshop in Issues in Research on Violence Against Women. Committee on Law and Justice, Division of Behavioral and Social Sciences and Education. Washington, DC, The National Academies Press, 2004.**

This publication describes the efforts of the National Research Council since 1998 and provides detailed information

about the interventions research launched in the past few years (virtually all in the United States). It also includes discussion of methodological issues, challenges, gaps, and findings.

***The Economic Dimensions of Interpersonal Violence.* World Health Organization, 2004.**

This publication demonstrates that the consequences of interpersonal violence are extremely costly, prevention studies show evidence of cost effectiveness, and for most of the developing world and many developed countries, there is not even descriptive information about the direct costs of treating the consequences of interpersonal violence.

[http://www.who.int/violence\\_injury\\_prevention/publications/violence/economic\\_dimensions/en/](http://www.who.int/violence_injury_prevention/publications/violence/economic_dimensions/en/)

***How to make the Law Work? Budgetary Implications of Domestic Violence Policies in Latin America.* ICRW, 2003.**

The document analyzes national domestic violence laws and policies in seven Latin American countries. One key finding of the report was that none of the countries in the study had passed laws with actual budgetary appropriations, which greatly limited the implementation of the programs and services.

<http://www.icrw.org>



**Intimate partner violence: causes and prevention. Jewkes R (2002). *The Lancet* 359:1423-1429.**

This article presents a concise review of available research on risk factors for intimate partner violence and the implications of those findings for prevention.

***Domestic Violence against Women and Girls. Innocenti Digest 6 United Nations Children's Fund (UNICEF), 2000.***

This study on domestic violence describes the powerlessness of women in situations of violence and notes that up to half of the world's female population may be victimized by those closest to them at some time in their lives.

<http://www.unicef-icdc.org/publications/pdf/digest6e.pdf>

**Ending violence against women. Heise L, Ellsberg M, Gottemoeller M (1999). *Population Reports* 27(4).**

This article describes an in-depth study by the Johns Hopkins School of Public Health and the Center for Health and Gender Equity. Based on over 50 population-based surveys and more than 500 studies of domestic violence, the report finds that by far the greatest risk of violence comes not from strangers, but from male family members, including husbands.

In English:

<http://www.infoforhealth.org/pr/l11edsum.shtml>

Download pdf: <http://www.infoforhealth.org/pr/online.shtml#l11edsum>

In Spanish:

<http://www.infoforhealth.org/pr/prs/sl11edsum.shtml>

***Bringing Rights to Bear: An Analysis of the Work of the UN Treaty Monitoring Bodies on Reproductive and Sexual Right. Center for Reproductive Law and Policy, 2002.***

This report charts the collective work of six United Nations committees as they work to translate international human rights standards into state responsibility on a broad spectrum of reproductive rights issues, including violence against women.

[http://www.reproductiverights.org/pub\\_bo\\_tmb.html](http://www.reproductiverights.org/pub_bo_tmb.html)

***Gender-Based Violence: A Human Rights Issue. [Mujer y Desarrollo Series #16.] Economic Comisión for Latin America and the Caribbean, 1996.***

The study explores the various forms of gender-based violence (GBV) and how growing awareness of the phenomenon in recent years has led to the establishment of new institutions and the adoption of legislative amendments, which in turn have served as a focal point for collective action by women.

<http://www.eclac.cl/publicaciones/UnidadMujer/7/lcl957/lcl957i.pdf>

## **FEMALE GENITAL MUTILATION (FGM)**

***Abandoning Female Genital Mutilation/Cutting: Information From Around the World. Population Reference Bureau, 2005.***

This CD-ROM contains an extensive compilation in English and French of articles and documents on FGM.

<http://www.prb.org>

***Female Genital Mutilation: The Prevention and the Management of the Health Complications. Policy Guidelines for Nurses and Midwives. World Health Organization, 2001.***

The purpose of these policy guidelines is to promote and strengthen the case against the medicalization of FGM to support and protect nurses, midwives, and other health personnel in adhering



to WHO guidelines regarding the management of FGM related complications.  
[http://www.who.int/entity/gender/other\\_health/en/guidelinesnursesmid.pdf](http://www.who.int/entity/gender/other_health/en/guidelinesnursesmid.pdf)

**Female Genital Mutilation - A joint WHO/UNICEF/UNFPA statement. World Health Organization, 1997.**

This joint statement by the World Health Organization, the United Nations Children's Fund, and the United Nations Population Fund confirms the universally unacceptable harm caused by female genital mutilation, or female circumcision, and issues an unqualified call for the elimination of this practice in all its forms.  
[http://www.who.int/reproductive-health/publications/fgm/fgm\\_statement.html](http://www.who.int/reproductive-health/publications/fgm/fgm_statement.html)

## **GBV AND HEALTH**

***WHO Multi-country Study on Women's Health and Domestic Violence Against Women: Initial Results on Prevalence, Health Outcomes and Women's Responses. WHO. Geneva, Switzerland, 2005.***

This report presents the results of a multi-country study of 10 countries and 16 sites—findings on prevalence, health outcomes, and women's responses to a variety of types of sexual and physical violence perpetrated by intimate partners as well as non-partners.  
<http://www.who.int/gender/violence/en/>

***Reproductive Health and Rights: Reaching the Hardly Reached. PATH, 2002.***

This publication is a compendium of articles that highlight the negative impact that marginal status has on the health and well-being of vulnerable groups. Various aspects of gender-based violence are presented in several articles.  
<http://www.path.org/publications/pub.php?id=503>

**Violence against women: effects on reproductive health. Shane B, Ellsberg M (2002). *Outlook* 20(1): 1-8.**

This issue presents an overview of violence from a public health perspective. It provides examples from research and successful programs and explores how the health sector can take an active role in the prevention and treatment of violence against women.  
[http://www.path.org/files/EOL20\\_1.pdf](http://www.path.org/files/EOL20_1.pdf)

***World Report on Violence and Health. World Health Organization, 2002.***

This publication provides a comprehensive and global review of evidence related to violence. Most relevant are the chapter devoted to violence by intimate partners (Chapter 4) and the chapter devoted to sexual violence (Chapter 6). Both chapters include a review of evidence on interventions to prevent violence and care for survivors worldwide.  
[http://www5.who.int/violence\\_injury\\_prevention/main.cfm?p=0000000682](http://www5.who.int/violence_injury_prevention/main.cfm?p=0000000682)  
[www.who.int/violence\\_injury\\_prevention/violence/world\\_report/wrvh1/en/](http://www.who.int/violence_injury_prevention/violence/world_report/wrvh1/en/)  
In French and Spanish: [www.who.int/violence\\_injury\\_prevention/violence/world\\_report/en/Summary\\_Spanish.pdf](http://www.who.int/violence_injury_prevention/violence/world_report/en/Summary_Spanish.pdf)

***Symposium 2001 Final Report: Gender-Based Violence, Health, and Rights in the Americas. Pan American Health Organization, 2001.***

This symposium brought together representatives from the ministries of health, women's nongovernmental organizations (NGOs), civil society, and U.N. agencies from 30 countries of the Latin American and Caribbean region as well as international donor agencies to identify priorities and formulate strategies for strengthening the response of the health sector to GBV. This report summarizes many of the key recommendations and lessons learned from those reports, and



provides an overview of organizations working to improve policies in the region.

<http://www.paho.org/English/HDP/HDW/Symposium2001FinalReport.htm>

***Annotated Bibliography on Violence against Women: A Health and Human Rights Concern.* World Health Organization, 1999.**

This bibliography was commissioned by the Global Commission on Women's Health and prepared by Rights and Humanity in collaboration with the WHO Women's Health and Development Unit and the Global Commission on Women's Health.

<http://www.who.int/gender/documents/Annotated%20Bibliography%20green%20A4.pdf>

**Gender and Public Health Series**

This series published by PAHO contains the following GBV-related topics:

Nº1 *Battered Women: A Working Guide for Crisis Intervention*, 1999

Nº7 *Helping Ourselves to Help Others: Self-Care Guide for Those Who Work in the Field of Family Violence*, 1999.

<http://www.paho.org/English/HDP/HDW/gphseries.htm>

***The Intimate Enemy: Gender Violence and Reproductive Health.* The Panos Institute, 1998.**

The report shows how local communities around the world are providing medical, legal, and counseling services for victims of gender violence and lobbying for changes in laws and customs to address the problem head-on.

<http://www.panos.org.uk/PDF/reports/IntimateEnemy.pdf>

## GBV AND HIV

***Dying of Sadness: Sexual Violence and the HIV Epidemic.* United Nations Development Program (UNDP), 2000.**

This preliminary overview of available literature suggests that, within the context of gender and the HIV epidemic, sexual violence is a complex phenomenon with multiple determinants, consequences, and manifestations.

<http://www.undp.org/hiv/publications/gender/violence.htm>

**The intersections of HIV and violence: Directions for future research and interventions.** Maman S, Campbell J, Sweat MD, Gielen AC, (2000). *Social Science and Medicine* 50(4):459-478.

This article provides a comprehensive overview of current research on gender-based violence and HIV/AIDS.

## REFUGEES/CONFLICT

***Interagency Manual on Reproductive Health in Refugee Situations: Sexual and Gender-Based Violence.* UNFPA, 2001.**

Chapter 4 of this publication focuses on sexual violence against women. Most reported cases of sexual violence among refugees involve female victims and male perpetrators. It is acknowledged that men and young boys may also be vulnerable to sexual violence.

<http://www.unfpa.org/emergencies/manual/>

**Gender-based violence in refugee settings.** Ward J, Vann B (2002). *The Lancet Supplement*, Vol. 360: (Supplement 1) s13-s14.

<http://www.rhrc.org/pdf/lancet1.pdf>

***Gender-Based Violence: Emerging Issues in Programs Serving Displaced Populations.*** Vann B. Arlington, VA, Reproductive Health Response in Conflict Consortium, 2002.

[http://www.rhrc.org/pdf/gbv\\_vann.pdf](http://www.rhrc.org/pdf/gbv_vann.pdf)

***If Not Now, When? Addressing Gender-Based Violence in Refugee, Internally Displaced and Post-Conflict Settings: A Global Overview.*** Ward J. New York, Reproductive Health Response in Conflict Consortium, 2002.

<http://www.rhrc.org/resources/gbv/ifnotnow.html>

***Gender-based Violence Tools Manual for Assessment & Program Design, Monitoring and Evaluation in Conflict-affected Settings.*** Reproductive Health Response in Conflict Consortium, 2004.

[http://www.rhrc.org/resources/gbv/gbv\\_tools/manual\\_toc.html](http://www.rhrc.org/resources/gbv/gbv_tools/manual_toc.html)

## TRAFFICKING

***WHO Ethical and Safety Recommendations for Interviewing Trafficked Women.*** World Health Organization, 2003.

<http://www.who.int/gender/documents/en/final%20recommendations%2023%20oct.pdf>

***The health risks and consequences of trafficking in women and adolescents: Findings from a European study.*** Zimmerman C, et al. London, London School of Hygiene & Tropical Medicine (LSHTM), 2003.

<http://www.lshtm.ac.uk/hpu/docs/traffickingfinal.pdf>

## RESEARCH METHODOLOGIES

The following texts provide excellent overviews on methods for both quantitative and qualitative research.

### Quantitative

***Basic Epidemiology.*** Beaglehole R, et al. Geneva, WHO, 1993.

***Research Design: Qualitative and Quantitative Approaches.*** Creswell J W. Thousand Oaks, CA, Sage Publications, 1994.

***Epidemiology for Public Health.*** Persson L-A, Wall, S. Umeå, Sweden, Umeå International School of Public Health, 2003.

### Qualitative

***Developing Focus Group Research: Politics, Theory and Practice.*** Barbour R, Kitzinger J, eds. London, Sage Publications, 1995.

***Doing Qualitative Research.*** Crabtree B, Miller W. Newbury Park, CA, Sage Publications, 1992.

***Qualitative Inquiry and Research Design: Choosing Among Five Traditions.*** Creswell J W. Thousand Oaks, CA, Sage Publications, 1998.

***Qualitative Methodology for International Public Health.*** Dahlgren L, et al. Umeå, Sweden, Umeå University, 2003.

***Qualitative Data Analysis: An Expanded Sourcebook. Second Edition.*** Miles M, Huberman A M. Thousand Oaks, CA, Sage Publications, 1994.



*Qualitative Evaluation and Research Methods* 2nd ed. Patton M. Newbury Park, CA, Sage Publications, 1990.

*Qualitative Methods: A Field Guide for Applied Research in Sexual and Reproductive Health.* Ulin P, et al. Research Triangle Park, NC, Family Health International, 2002.

**Embracing Participation in Development: Wisdom From the Field.** Shah M K, Kambou S D, Monahan B, eds. Atlanta, CARE, 1999.

[http://www.careinternational.org.uk/resource\\_centre/civilsociety/embracing-participation\\_in\\_development.pdf](http://www.careinternational.org.uk/resource_centre/civilsociety/embracing-participation_in_development.pdf)

## ETHICS

*Putting Women First: Ethical and Safety Recommendations for Research on Domestic Violence against Women.* World Health Organization, 1999.

Research on violence against women raises important ethical and methodological challenges. Researching abuse is not like other areas of investigation—the nature of the topic means that issues of safety, confidentiality, and interviewer skills and training are even more important than in other forms of research.

<http://www.who.int/gender/violence/womenfirtseng.pdf>

**Bearing witness: ethics in domestic violence research.** Ellsberg M, Heise L (2002). *The Lancet* 359:1599-1604.

<http://www.thelancet.com/journals/lancet/article/PIIS0140673602085215/fulltext>

## CONVENTIONS/LAWS

**1950** Convention for the Suppression of the Traffic in Persons and of the Exploitation of the Prostitution of Others  
<http://www.unhchr.ch/html/menu3/b/33.htm>

**1974** Declaration on the Protection of Women and Children in Emergency and Armed Conflict  
<http://heiwwww.unige.ch/humanrts/instree/e3dpwcea.htm>

**1979** Convention on the Elimination of All Forms of Discrimination against Women <http://www.un.org/womenwatch/daw/cedaw/>

**1989** Convention on the Rights of the Child  
<http://www.unicef.org/crc/crc.htm>

**1993** World Conference on Human Rights  
<http://www.unhchr.ch/html/menu5/wchr.htm>

**1993** Declaration on the Elimination of Violence against Women  
[http://www.unhchr.ch/huridocda/huridoca.nsf/\(Symbol\)/A.RES.48.104.En?Opendocument](http://www.unhchr.ch/huridocda/huridoca.nsf/(Symbol)/A.RES.48.104.En?Opendocument)

**1994** Inter-American Convention on the Prevention, Punishment, and Eradication of Violence against Women (Convention of Belém do Pará)  
<http://www.undp.org/rblac/gender/osavio.htm>

**1994** International Conference on Population and Development  
<http://www.un.org/popin/icpd2.htm>

**1995** Fourth World Conference on Women (Beijing) <http://www.un.org/womenwatch/daw/beijing/platform/>

**2000** Protocol to Prevent, Suppress, and Punish Trafficking in Persons, Especially Women and Children, Supplementing the United Nations Convention against Transnational Organized Crime  
[http://www.uncjin.org/Documents/Conventions/dcatoc/final\\_documents/2/convention\\_%20traff\\_eng.pdf](http://www.uncjin.org/Documents/Conventions/dcatoc/final_documents/2/convention_%20traff_eng.pdf)

**2000** United Nations' Security Council Resolution 1325 on Women, Peace, and Security  
[http://www.un.org/events/res\\_1325e.pdf](http://www.un.org/events/res_1325e.pdf)

## INTERVENTIONS

### Community-based

***Addressing Gender-Based Violence in the Latin American and Caribbean Region: A Critical Review of Interventions.*** Morrison A, Ellsberg M, Bott S. Washington, DC, World Bank. Policy Research Working Paper 3438, 2004.

This paper examines good practice approaches to addressing gender-based violence in the Latin American and Caribbean regions justice, health, and education sectors, as well as multisectoral approaches.

<http://web.worldbank.org/WBSITE/EXTERNAL/TOPICS/EXTGENDER/0,,contentMDK:20262193~pagePK:148956~piPK:216618~theSitePK:336868,00.html>

***Preventing and Responding to Gender-Based Violence in Middle and Low-income Countries: A Global Review and Analysis.*** Bott S, Morrison A, Ellsberg M. Washington, DC, World Bank. Policy Research Working Paper 3618, 2004.

This paper provides a global review of promising approaches to addressing gender-based violence in the justice, health, and education sectors, as well as

multisectoral approaches. The paper reviews existing evidence on successful interventions and offers a framework for assessing good practices.

<http://web.worldbank.org/WBSITE/EXTERNAL/TOPICS/EXTGENDER/0,,contentMDK:20262193~pagePK:148956~piPK:216618~theSitePK:336868,00.html>

***Not a Minute More: Ending Violence Against Women.*** UNIFEM, 2003.

In 1996, the UNIFEM Trust Fund began funding projects to address gender-based violence through advocacy, awareness raising, public education, legal advocacy, and youth projects. This publication describes these projects and documents their achievements, limitations, lessons learned, and future challenges. They provide examples of good practices as well as of strategies that did not meet expectations.

[http://www.unifem.org/resources/item\\_detail.php?ProductID=7](http://www.unifem.org/resources/item_detail.php?ProductID=7)

***With an End in Sight: Strategies from the UNIFEM Trust Fund to Eliminate Violence Against Women.*** Spindel C, Levy E, Connor M. New York, UNIFEM, 2000.

This publication documents seven important programs dedicated to ending violence against women in Bosnia and Herzegovina, Cambodia, Honduras, India, Kenya, Nigeria, and the West Bank and Gaza.

[http://www.unifem.org/index.php?page\\_pid=71](http://www.unifem.org/index.php?page_pid=71)

***Mobilizing Communities to Prevent Domestic Violence: A Resource Guide for Organizations in East and Southern Africa.*** Michau L, Naker D. Nairobi, Raising Voices, 2003.

This document is a resource guide outlining a five-phase approach to producing social change within a community.



This project uses a variety of strategies, including gathering baseline information about local attitudes and beliefs, raising awareness about domestic violence among the whole community and among key selected groups, building networks, and transforming institutions. <http://www.raisingvoices.org/resourceguide.shtml>

***Beyond Victims and Villains: Addressing Sexual Violence in the Education Sector.* Panos Institute, 2003.**

This is an excellent and extensive review of the literature on sexual violence in educational settings, including interventions and strategies that have been used in developing countries to address all forms of sexual violence in schools and universities.

<http://www.panos.org.uk/PDF/reports/Beyond%20Victims.pdf>

***Justice, Change, and Human Rights: International Research and Responses to Domestic Violence.* Center for Development and Population Activities, 2000.**

This paper employs both a human rights and a development framework to identify the limitations and strengths of each approach for understanding and responding to domestic violence, as well as to clarify the links that need to be made between the frameworks.

<http://www.cedpa.org/publications/pdf/violenceprowid.pdf>

***La ruta crítica que siguen las mujeres afectadas por la violencia intrafamiliar.* Pan American Health Organization, 2000.**

Translated into English as: *Domestic Violence: Women's Way Out.*

This research protocol addresses violence against women and aims to improve the services available for women affected by it.

Spanish:

<http://www.paho.org/Spanish/HDP/HDW/rutacritica.htm>

English:

<http://www.paho.org/English/HDP/HDW/womenswayout.htm>

## Communications

***Picturing a Life Free of Violence: Media and Communication Strategies to End Violence against Women.* United Nations Development Fund for Women (UNIFEM), 2001.**

This report showcases a variety of media and communications strategies to be used to end violence against women. The report is a collaboration between UNIFEM and the Media Materials Clearinghouse of the Johns Hopkins University Center for Communications Programs.

[http://www.unifem.org/resources/item\\_detail.php?ProductID=8](http://www.unifem.org/resources/item_detail.php?ProductID=8)

***Making a Difference: Strategic Communications to End Violence Against Women.* United Nations Development Fund for Women (UNIFEM), 2003.**

"Making a Difference" is an indispensable tool for planning strategic communications to raise awareness about and combat gender-based violence.

[http://www.unifem.org/resources/item\\_detail.php?ProductID=6](http://www.unifem.org/resources/item_detail.php?ProductID=6)

***Communication/Behaviour Change Tools: Entertainment-Education.* UNFPA. Programme Briefs No. 1, 2002.**

This issue of Programme Briefs reviews the lessons learned from "entertainment-education" programs throughout the world, many of which address the issue of violence against women. The issue profiles programs such as Sexto Sentido in Nicaragua and Soul City in South

Africa, and provides a summary of the state of knowledge about these efforts. [www.unfpa.org/upload/lib\\_pub\\_file/160\\_filename\\_bccprogbrief1.pdf](http://www.unfpa.org/upload/lib_pub_file/160_filename_bccprogbrief1.pdf)

## Health Sector Response

***Addressing Gender Based Violence from the Reproductive Health/HIV Sector: A Literature Review and Analysis.* Guedes A. Washington, DC, Poptech, 2004.**

This is an extensive review of existing interventions to address gender-based violence in developing countries. The review is divided into six broad categories: 1) behavior change communication programs (2) community mobilization programs (3) service delivery programs (4) policy programs (5) youth programs and (6) programs working with refugees and displaced populations. The review includes a discussion of broad lessons learned as well as profiles of “promising” interventions in each area. The profiles include details about evaluation as well as program design. [http://www.poptechproject.com/pdf/04\\_164\\_020.pdf](http://www.poptechproject.com/pdf/04_164_020.pdf)

***Improving the Health Sector Response to Gender-Based Violence: a Resource Manual for Health Care Managers in Developing Countries.* Bott S, Guedes A, Claramunt C, Guezmes A. New York, IPPF/WHO, 2004.**

IPPF/WHO coordinated a multi-site initiative to improve the health sector response to gender-based violence within four associations, Profamilia (Dominican Republic), INPPARES (Peru), and Plafam (Venezuela), with some participation from BEMFAM (Brazil). This publication is a compilation of all the lessons learned, tools, and recommendations that emerged from that collective effort. It was published in English and

Spanish, and although the lessons learned reflect the situation in selected sites in Latin America and the Caribbean, the publication is designed to address the specific needs of health care managers in any resource-poor setting, particularly those working in nongovernmental organizations. [http://www.ippfwhr.org/publications/publication\\_detail\\_e.asp?PubID=63](http://www.ippfwhr.org/publications/publication_detail_e.asp?PubID=63)

***A Practical Approach to Gender-Based Violence: A Program Guide for Health Care Providers and Managers.* United Nations Population Fund, 2001.**

This publication contains practical steps needed to integrate gender-based violence programming into reproductive health facilities. It is also meant to help a wider range of readers understand the interrelationships between reproductive and sexual health and violence. <http://www.unfpa.org/publications/detail.cfm?ID=69&filterListType=3>

***Diagnostic and Treatment Guidelines on Family Violence.* American Medical Association, 1999.**

This publication presents separate modules establishing guidelines on the following seven aspects of violence: child physical abuse and neglect and child sexual abuse, domestic violence, elder abuse and neglect strategies for the treatment and prevention of sexual assault, mental health effects of family violence, physician guide to media violence, and a physician firearms safety guide. <http://www.ama-assn.org/ama/pub/category/3548.html>

***National Consensus Guidelines: On Identifying and Responding to Domestic Violence Victimization.* Family Violence Prevention Fund, 1999.**

This is a multi-specialty, comprehensive routine screening document on domestic



violence. In addition to specific guidelines for primary care, obstetrics and gynecologic, family planning, urgent care, mental health, and in-patient settings, it includes an extensive bibliography, documentation forms, and other useful materials.

<http://endabuse.org/programs/healthcare/files/Consensus.pdf>

***Promoting Early and Effective Intervention to Save Women's Lives.***

**Family Violence Prevention Fund, 1999.**

This kit contains a series of information packets for health care providers interested in developing a comprehensive health care response to domestic violence. Packets include: General Information on the Health Care Response to Domestic Violence, The Emergency Department Response to Domestic Violence, Screening Patients for Domestic Violence, Mandatory Reporting of Domestic Violence by Health Care Providers, and Violence against People with Disabilities.

<http://endabuse.org/programs/display.php3?DocID=55>

***Building Data Systems for Monitoring and Responding to Violence against Women.*** CDC, 1998.

This report provides recommendations regarding public health surveillance and research on violence against women developed during a workshop held by CDC on 29–30 October 1998.

<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr4911a1.htm>

***Improving the Health Care Response to Domestic Violence: A Resource Manual for Health Care Providers.***

**Family Violence Prevention Fund, 1996, revised 1998.**

This manual includes information to educate practitioners on screening,

identification, assessment, and interventions with victims of domestic violence and their batterers. It offers practical tools including a model hospital intervention packet outlining effective protocols and sample forms for screening, domestic violence/abuse assessment, documentation, safety planning, and discharge. Finally, it provides ideas to help develop and implement response strategies and programs within a variety of health care practices and settings.

<http://endabuse.org/programs/display.php3?DocID=238>

***Intimate Partner Violence and Sexual Assault: A Guide to Training Materials and Programs for Health Care Providers.*** CDC, 1998.

This guide was developed to help individuals and organizations find appropriate materials for group or self-training.

<http://www.cdc.gov/ncipc/pub-res/ipvasa.htm>

***Intimate Partner Violence during Pregnancy: A Guide for Clinicians.*** American College of Obstetricians and Gynecologists, 1998.

This guide was designed as a training tool for clinicians to increase understanding of the role they can play in identifying, preventing, and reducing intimate partner violence. It includes a situation report and potential areas of action for clinical staff.

<http://www.cdc.gov/reproductivehealth/violence/IntimatePartnerViolence/>

***Violence Against Women: The Health Sector Responds.*** Velzeboer M, Ellsberg M, Clavel Arcas C, Garcia Moreno C, Washington, DC, Pan American Health Organization, PATH, 2003.

This book describes PAHO's efforts to address gender-based violence (GBV) in seven countries of Central America. It



includes the results of a participatory review that identifies the lessons learned from activities conducted at the clinic level, the community, and the broader local and national policy arena.

<http://www.paho.org/English/DPM/GPP/GH/VAWhealthsector.htm>

***Compendium of Indicators for Evaluating Reproductive Health Programs.* Bertrand JT, Escudero G. MEASURE Evaluation Manual Series, No. 6. Washington DC, Measure Evaluation, 2002.**

This manual contains a concise subsection on methodological issues related to evaluating interventions that address violence against women, including those interventions carried out in developing countries. It is written from the perspective of the health sector and primarily from the perspective of local rather than national initiatives.

<http://www.eldis.org/static/DOC13086.htm>

**Dilemmas and opportunities for an appropriate health-service response to violence against women. Garcia Moreno C, (2002). *The Lancet* 359:1509-1514.**

This article reviews what is known about the evidence from developing countries on the effectiveness and limitations of programs that train providers to identify and care for women who have experienced intimate partner violence. The article raises significant concerns about introducing routine screening programs in organizations that have not succeeded in transforming the attitudes and beliefs of providers.

<http://www.thelancet.com/journals/lancet/article/PIIS0140673602084179/fulltext>

**International conference on the role of health professionals in addressing violence against women, 15th October 2000, Naples, Italy, International**

**Journal of Gynecology & Obstetrics Supplement. [Garcia-Moreno C, Benegiano G, Guerra R (2002).]**

This journal issue contains a collection of papers from an international conference devoted to the role of health professionals in addressing violence against women. The collection includes descriptions of programs and evaluation data (when available) from developing countries such as Bangladesh, Brazil, China, Russia, South Africa and Thailand. In addition, it includes articles that present the ongoing efforts of international organizations.

## OTHER RESOURCES

### Material Collections

**End Violence against Women, Johns Hopkins University, Center for Communications Programs**

This site features an online collection of materials and resources on preventing violence against women. It is part of an ongoing effort to share information with health professionals who seek information and resources on this subject.

<http://www.endvaw.org/>

**A Life Free of Violence: It's Our Right (United Nations Inter-Agency Campaign on Women's Human Rights in Latin America and the Caribbean)**

This site is part of the UNDP's contribution to the U.N. Inter-Agency Campaign on Women's Human Rights and provides a compilation of materials provided by all partner agencies.

<http://www.undp.org/rblac/gender/>

**Minnesota Center against Violence and Abuse (MINCAVA)**

The MINCAVA Electronic Clearinghouse strives to provide a quick and easy access point to the ever-growing number of



resources available online on the topic of violence and abuse. One focus of the Clearinghouse is to assist faculty and staff in developing higher education curricula on violence and abuse. The Clearinghouse shares in electronic form curricula and syllabi used in violence education programs at institutions of higher education across the United States. <http://www.mincava.umn.edu>

### **National Sexual Violence**

#### **Resource Center**

This clearinghouse provides information, resources, and research related to all aspects of sexual violence. Activities include collecting, reviewing, cataloguing, and disseminating information related to sexual violence; coordinating efforts with other organizations and projects; providing technical assistance and customized information packets on specific topics; and maintaining a website with up-to-date information. <http://www.nsvrc.org>

#### **Reproductive Health Outlook (RHO)**

PATH's RHO website provides links to numerous sites of organizations addressing violence against women and includes sections on gender and men and reproductive health. <http://www.rho.org/>

### **Networks/Coalitions/Consortiums**

#### **GBV Prevention Network**

This network is a virtual community for the 100+ member organizations in the Horn, East, and Southern Africa working to prevent gender-based violence. A resource for activists and practitioners in Africa and beyond, it provides a rich database of regional program approaches, communication materials, publications, reports, tools, and resources. There are also international documents,

resources, and links relevant to GBV prevention and opportunities to dialogue, contribute, and share experiences. [www.preventgbv africa.org](http://www.preventgbv africa.org)

#### **Coalition against Trafficking in Women**

The Coalition is composed of regional networks and affiliated individuals and groups and serves as an umbrella that coordinates and takes direction from its regional organizations and networks in its work against sexual exploitation and in support of women's human rights. <http://www.catwinternational.org/>

#### **Intercambios**

Intercambios is an alliance of international and national organizations based in Latin America that aims to strengthen the capacity of the public and private health sectors to address gender-based violence through a public health and human rights approach. Intercambios carries out activities on GBV in the fields of research, advocacy, training and communication. <http://www.alianzaintercombios.org>  
[info@alianzaintercombios.org](mailto:info@alianzaintercombios.org)

#### **National Violence against Women**

##### **Prevention Research Center (NVAWPRC)**

The Center serves as a clearinghouse for prevention strategies by keeping researchers and practitioners aware of training opportunities, policy decisions, and recent research findings. <http://www.vawprevention.org>

##### **Nursing Network on Violence against Women (NNVAW)**

The NNVAW was formed to encourage the development of a nursing practice that focuses on health issues related to the effects of violence on women's lives. <http://www.nnvawi.org/>

### **Reproductive Health for Refugees Consortium (RHRC)**

This Consortium is a partnership of seven organizations dedicated to increasing access to a range of high-quality, voluntary reproductive health services for refugees and displaced persons around the world. Gender-based violence is one of the four essential and complementary technical areas of reproductive health on which RHRC focuses its work. The website also features several links to reports and guides on addressing gender-based violence in refugee settings.

<http://www.rhrc.org/resources/gbv/index.html>

### **Violence Against Women Electronic Network (VAWnet)**

This network provides support for the development, implementation, and maintenance of effective violence against women intervention and prevention efforts at the national, state, and local levels through electronic communication and information dissemination. VAWnet participants, including state domestic violence and sexual assault coalitions, allied organizations, and individuals, have access to online database resources. <http://www.vawnet.org>

## **Organizations**

### **Center for Women's Global Leadership**

The 16 Days Campaign of Activism Against Gender Violence is an international campaign originating in 1991. This 16-day period starts on November 25, the International Day Against Violence Against Women, and ends on December 10, International Human Rights Day. The 16 Days Campaign has been used as an organizing strategy by individuals and groups around the world to call for the elimination of all

forms of violence against women by raising awareness about gender-based violence as a human rights issue at the local, national, regional, and international levels. Since 1991, the 16 Days Campaign has included the participation of over 1,700 organizations in approximately 130 countries.

<http://www.cwgl.rutgers.edu/>

### **Centre for Research on Violence Against Women and Children**

The Centre is one of an alliance of five research centers in Canada whose purpose is to promote the development of community-centered action research on violence against women and children and to facilitate individuals, groups, and institutions representing the diversity of the community to pursue research issues and training opportunities related to the understanding and prevention of abuse.

<http://www.uwo.ca/violence/index.html>

### **Family Violence Prevention Fund**

The Family Violence Prevention Fund, through the National Health Initiative on Domestic Violence (NHIDV), addresses the health care response to domestic violence through public policy reform and health education and prevention efforts. The NHIDV develops educational resources, training materials, and model protocols on domestic violence and screening to help health care providers better serve abused women.

<http://endabuse.org/>

### **International Planned Parenthood Federation (IPPF), Western Hemisphere Region (WHR)**

The IPPF/WHR website contains information on its GBV projects in Latin America and the Caribbean. IPPF/WHR publishes a quarterly newsletter called ¡BASTA!, which can be accessed and downloaded from its website. ¡BASTA!



reports on the efforts of IPPF affiliates in Latin America and the Caribbean to address GBV within the framework of sexual and reproductive health and offers practical information and tools to service providers who wish to work in this area.

<http://www.ippfwhr.org/>

### **Isis Internacional**

Together with the Isis affiliate offices in Manila and Kampala, Isis in Chile oversees the Program on Violence against Women, an information and communications initiative that provides informational materials and resources to organizations worldwide. (Information in Spanish only)

<http://www.isis.cl/>

### **World Health Organization/Pan American Health Organization (WHO/PAHO)**

The World Health Organization has several initiatives that deal with gender-based violence. The Department of Gender, Women and Health coordinated the WHO Multi-country Study on Women's Health and Domestic Violence against Women, and it has several publications on the effects of GBV on women's health.

<http://www.who.int/gender/en/>

WHO is also the coordinator of the Sexual Violence Research Initiative (SVRI), a project that aims to strengthen the health-sector response to sexual violence.

<http://www.who.int/svri/en/>

The Gender, Ethnicity and Health Unit of the Pan American Health Organization (PAHO) has numerous publications and fact sheets about GBV and health.

<http://www.paho.org/english/ad/ge/home.htm>

### **PATH**

PATH is an international, nonprofit organization that creates sustainable, culturally relevant solutions, enabling communities worldwide to break long-standing cycles of poor health. PATH promotes gender equity in health and the prevention of GBV using a systems approach to link communities, institutions, and policies. PATH works with local and international partners to carry out evidence-based advocacy and to strengthen health systems and communities to address GBV from a human rights and public health perspective.

<http://www.path.org>

### **United Nations Development Fund for Women (UNIFEM)**

UNIFEM provides financial and technical assistance to innovative programs and strategies that promote women's human rights, political participation, and economic security. The website features information about international resolutions concerning violence against women, UNIFEM's work, available resources, and the application process. The UN Internet Gateway on the Advancement and Empowerment of Women (WomenWatch) facilitates internet searching through UN organizations for materials on GBV.

<http://www.unifem.org/>

<http://www.un.org/womenwatch/asp/user/list.asp?ParentID=3004>