

Welcome!

Day 3



LEARNING OBJECTIVE



Demonstrate knowledge of how to access resources and support for patients and for oneself

Competencies

- Know community resources
- Know legal and policy context including providers' legal obligations
- Collaborate with referral partners to help survivors obtain services

CONTINUATION OF ACTIVITY IN EACH OTHER'S SHOES

EXERCISE: THE WEB OF REFERRALS

- **Learning objective for this exercise:**
Appreciate how uncoordinated systems and too much specialization can make referrals burdensome for the survivor



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

Session 7: Know your setting: identify referral networks and understand the legal and policy context

EXERCISE: THE WEB OF REFERRALS

- In this role play we will follow “Rose” as she seeks help for intimate partner violence
- We need 10 volunteers. Will one please volunteer to play “Rose”? The others will play people she visits and who refer her to others.
- Rose will ask each person she visits to take hold of the string that she carries



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

Session 7: Know your setting: identify referral networks and understand the legal and policy context

PRINCIPLES FOR REFERRAL PATHWAYS

Used to safely connect survivors with life-saving and supportive multi-sectoral services, including

- Health
- Psychosocial
- Protection
- Legal
- Socio-economic

They tell you **where, when** and **how** services can be reached

Always following the **GBV Guiding Principles** and using a **Survivor-Centered Approach**

Referral pathways should:

- respect **self-determination**
- **minimize points of care** and retelling of the story
- maintain **safety** of the woman and **confidentiality** of her information

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

Session 7: Know your setting: identify referral networks and understand the legal and policy context

ESTABLISHING REFERRAL PATHWAYS

Make referral agreements with known resources

- Identify and map available **community services**
 - police/law enforcement
 - justice/legal services
 - social services
 - economic/livelihood support
 - child protection
- Make a **referral directory** (GBV Referral Pathways)
- **Agreements** can be formal or informal
- Specify how you will learn **whether the woman reaches** the referral resource
- **Monitor** referrals and coordination mechanisms

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

Session 7: Know your setting: identify referral networks and understand the legal and policy context

WHAT DOES IT MEAN TO “KNOW” A RESOURCE?

- **Know at least one person** at that service
 - Be able to refer to these people by name
- **Know what services are provided**, so that you can tell patients
- **Maintain relationships** through
 - hosting cross-trainings
 - sharing information

PROVIDE “WARM REFERRALS”

Warm referral practices help women reach further care

1. Ask: “What would **help most** if we could do it now?”
2. Help her **identify and consider** referral and social support options
3. Explain how the referral service can **meet her need**
4. Give her **contact details** – location, how to get there, names

— continued —

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

Session 7: Know your setting: identify referral networks and understand the legal and policy context

PROVIDE “WARM REFERRALS”

– continued –

5. Offer to help **make an appointment**, if it helps
 - Offer to call on her behalf OR
 - Offer to make a call with her OR
 - Offer a private place where she can call
6. Help her **solve any practical problems** that might interfere – for example, no transportation, no childcare

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

Session 7: Know your setting: identify referral networks and understand the legal and policy context

GBV REFERRAL PATHWAY SYSTEM IN BELIZE

- You can access the GBV Referral Pathway on the website
- GBV Pocket Guide for non-GBV Specialists
- From what you see,
 - Does it make sense to you in your district?
 - What could be improved?
 - Is this tool useful for you?

KNOW THE LEGAL & POLICY CONTEXT

Know the law & policy that affects the care you give (content to be developed by country)

- Laws that cover:
 - **sexual violence**, including rape, sexual harassment, child sexual abuse
 - **intimate partner violence**

– continued –

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

Session 7: Know your setting: identify referral networks and understand the legal and policy context

KNOW THE LEGAL & POLICY CONTEXT

— continued —

What laws & policies say about:

- **abortion** services for survivors of violence
- **limits to access** to abortion, emergency contraception
- age of **sexual consent**
- age of **parental consent** for adolescents' care

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

— continued —

Session 7: Know your setting: identify referral networks and understand the legal and policy context

KNOW THE LEGAL & POLICY CONTEXT

— continued —

What are the legal or policy **obligations**

— requiring **health care** for survivors

— mandatory **reporting** to police

— who is authorized to perform **forensic exams** and testify in court?

— **confidentiality** of information and data sharing

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

Session 7: Know your setting: identify referral networks and understand the legal and policy context



KEY MESSAGES

- Active and up-to-date **referral networks** and **warm referral practices** help women reach care
- Make referral agreements with **known resources**
- Referral pathways should:
 - respect **self-determination**
 - **minimize points of care** and retelling the story
 - maintain **confidentiality and safety**
- Know the relevant **laws & policies**

Break



Mental Health



MENTAL HEALTH

- Offer first-line support (**LIVES**)
- Help strengthen her **positive coping methods**
- Explore the availability of **social support**
- Teach and demonstrate **stress reduction exercises**
- Make regular **follow-up appointments**
- Some women will suffer more than others



MENTAL HEALTH

- Take **small, simple steps**
- Build on her **strengths and abilities**
- Connect with family and friends (help her to identify people that she likes and trusts)
- Continue **usual activities**
- Engage in **relaxing activities**, stress-reduction **exercises**
- Keep a **regular sleep** schedule
- Engage in regular **physical activity**
- **AVOID** self-prescribed medications, alcohol or drugs
- **Return** if you have thoughts of self-harm or suicide
- **Return** if these suggestions are not helping
- It is okay to not share what happened – it is okay for her to distract herself



SELF-CARE STRATEGIES

- Cognitive: mental activities that influence our perceptions
 - Ex. **Self talk**
- Physical: physical and sensory activities
 - Ex. **Music, exercise, driving, going on vacation**
- Spiritual and/or Philosophical: faith or value systems that provide an outlook on life or guidance on living
 - Ex. **Time for reflection, prayer, religious services**
- Social and/or Recreational: all forms of creative expression or recreational diversion
 - Ex. **Spending time with friends, volunteer work, shopping**
- Verbal: using language to identify and express feelings or stress
 - Ex. **Talking, writing, naming the problem or feeling**



SELF-CARE

- Remember – you cannot care for survivors without first caring for yourself.
 - Vicarious trauma/burn out's impact on practice:
 - Cynicism, view alterations, harsh treatment of patients
 - Diminishing empathy and listening skills
 - Guilt or decreased confidence in ability to help
- This is especially important with regards to work with survivors of sexual violence – this is an especially challenging and sensitive topic, one that you might have your own experience with



Catch up with trainers





Practice our training skills:

- LIVES scenarios: groups 2, 4 and 5
- Training plans: are you ready to present on your plans?

Recap and Closing





End of Day Evaluation