

Strengthening the capacity of
health systems
to prevent and respond to



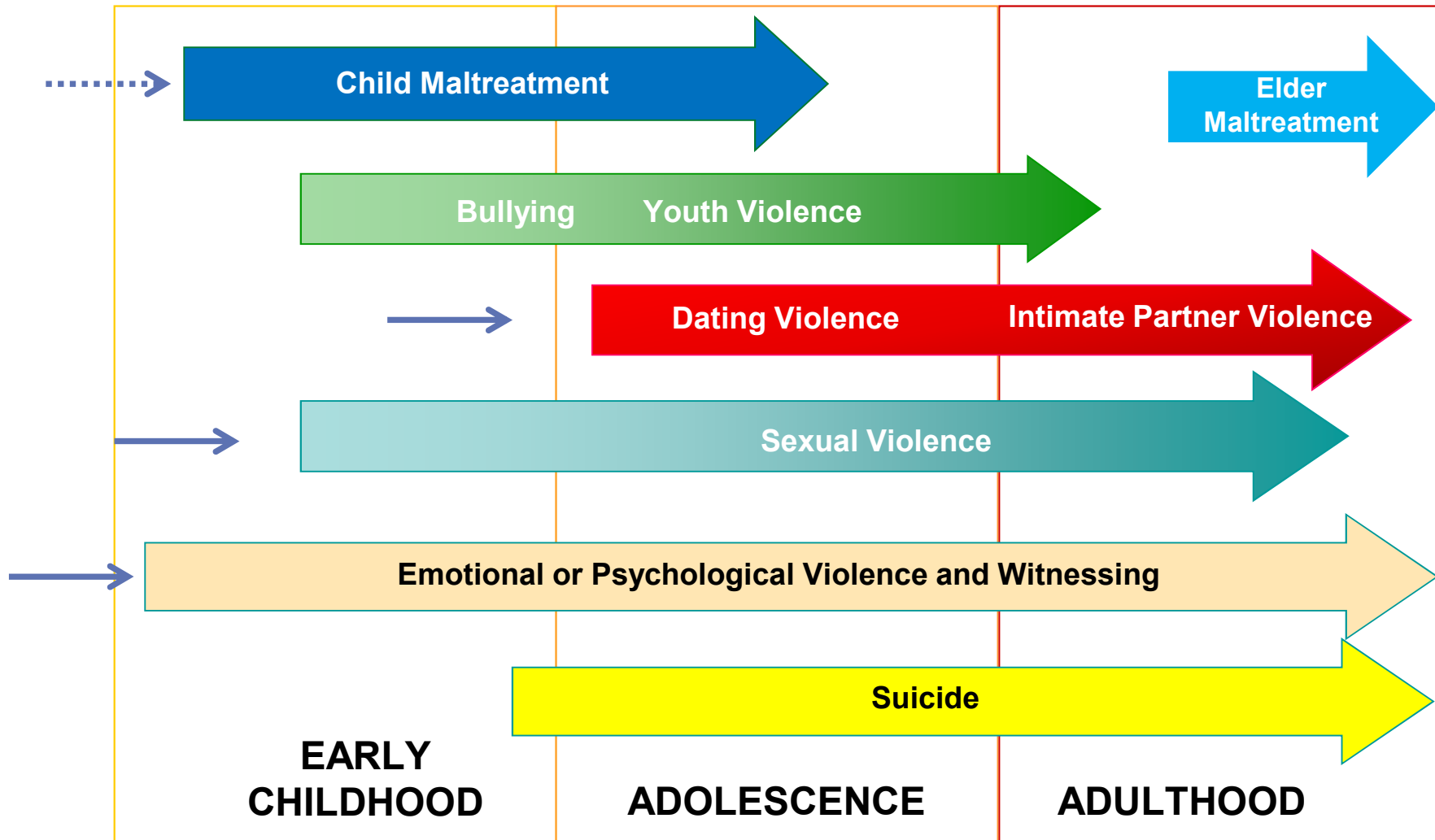
Violence Against Women

Setting the
Context:

- ✓ Global and regional mandates
- ✓ Objectives of the workshop



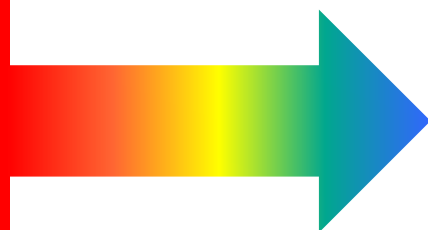
Violence Across the Life Course



Violence is on the development map...

Millennium Development Goals

**No
Millennium
Development
Goals
targets or
indicators
relate to
violence**



Sustainable Development Goals

5. GENDER EQUALITY

SDG Target 5.2

Eliminate all forms of violence against women and girls

SDG Target 5.3

Eliminate all harmful practices, such as child, early and forced marriage, and female genital mutilation

16. PEACE, JUSTICE

SDG Target 16.1

Significantly reduce all forms of violence and related death rates everywhere

SDG Target 16.2

End abuse, exploitation, trafficking and all forms of violence against children



Pan American
Health
Organization



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Americas

Mandates on violence

United Nations

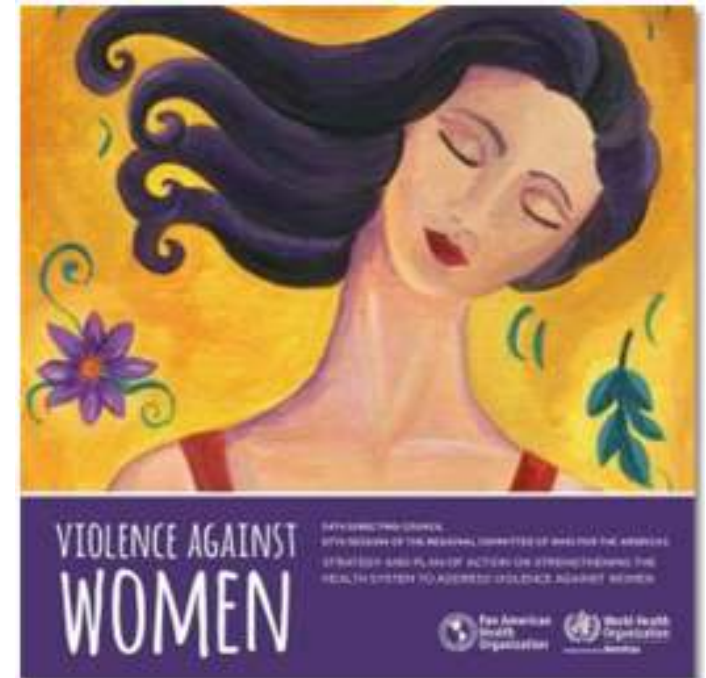
- Convention on the Rights of the Child (Article 19) (1989)
- Convention on the Elimination of all Forms of Discrimination against Women (1981)
- Declaration on the Elimination of Violence against Women (1993)
- Sustainable Development Goals

Organization of American States

- Inter-American Convention on the Prevention, Punishment, and Eradication of Violence against Women (“Belém do Pará”) (1994)

WHO and PAHO

- **WHA resolution 67.15** *Strengthening the role of the health system in addressing violence, in particular against women and girls, and against children* (2014)
- **CD54/9, Rev. 2** *Strategy and Plan of Action on strengthening the health system to address violence against women* (2015)
- **WHA 2016** *Global plan to strengthen the role of the health systems to address interpersonal violence, in particular against women and girls, and against children*



Recent mandates agreed by Health Ministries

PAHO Directing Council 2015:

Strategy and Plan of Action on strengthening the health system to address violence against women

World Health Assembly 2016:

Global Plan of Action to strengthen the role of the health system to address interpersonal violence, in particular against women and girls, and against children



Key lines of action:

Strengthen the **availability and use of evidence**

Strengthen **health system leadership and governance** (political and financial commitment)

Strengthen the **capacity** of health systems to provide **effective care and support**

Strengthen the role of the health system in **prevention**

Alignment of mandates and action

Global Plan of Action 2016 – 2030 (EB 138.R3)	Regional Strategy and PoA 2015-2025 (CD54/9, Rev. 2)	Examples of PAHO efforts
Strengthen information collection and evidence	Strengthen the availability and use of evidence about violence against women and violence against children	<ul style="list-style-type: none"> ✓ Updated epidemiological profile of VAW and VAC in LAC ✓ Review of national policies and protocols for VAW and VAC
Strengthen health system leadership and governance	Strengthen political and financial commitment to addressing violence against women and violence against children within health systems	<ul style="list-style-type: none"> ✓ Co-host events with World Bank (innovation in prevention) and IDB (improving health system response) ✓ Support development of campaign “Every Hour Matters”
Strengthen health service delivery and health workers’/providers’ capacity to respond	Strengthen the capacity of health systems to provide effective care and support to women and children who have experienced violence	<ul style="list-style-type: none"> ✓ Organize capacity building workshops like this one! ✓ Support countries’ efforts to revise policies / protocols ✓ Develop / adapt / pilot tools
Strengthen programming to prevent violence against women and girls	Strengthen the role of the health system in preventing violence against women and violence against children	<ul style="list-style-type: none"> ✓ Organize capacity building workshop like this one! ✓ Develop tools, such as “INSPIRE: 7 strategies to end violence against children”

Addressing VAW on the global public health agenda

**69th World Health Assembly,
May 2016**

The Ministries of Health of the 193 Member States of WHO, endorse the global plan of action on strengthening the health system's response to violence against women and girls and against children



What actions can health sector take?



1. **Publicly commit to address and condemn** all forms of violence against women and girls
2. **Allocate budgets/resources** to prevent and respond to violence against women and girls
3. **Integrate violence against women prevention and response** in health policies, plans, programmes and budgets
4. **Advocate to adopt or reform laws and policies** promoting sexual and reproductive health and rights and gender equality
5. **Designate a unit or focal point in ministries** of health to address violence against women
6. **Improve coordination** within health and with other sectors

What actions can health sector take?

2.



YOU CAN

Strengthen health service delivery and health providers' capacity to respond to violence against women and girls

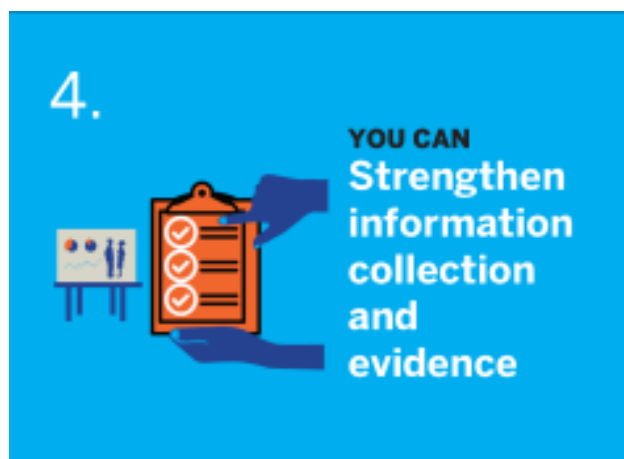
1. **Implement protocols for providing quality care**, using WHO guidelines/tools
2. **Provide comprehensive health care services to all women** and girls who have experienced violence, including in humanitarian settings
3. **Improve access to services by integrating care for women** experiencing violence into existing programmes and services
4. **Provide quality care to survivors** which is woman-centered and gender-sensitive
5. **Eliminate mistreatment and abuse of women** in health care settings
6. **Train health care providers and integrate training** on violence against women and girls in pre- and in-service curriculum for all health professionals

What actions can health sector take?



1. **Address the needs of children** witnessing intimate partner violence in their homes
2. **Promote messages about consent and respect** in intimate and sexual relationships in schools and in health education and promotion activities
3. **Support prevention programmes that challenge norms** that perpetuate male dominance or female subordination, stigmatize survivors or normalize violence
4. **Address harmful alcohol and substance use and maternal depression** as risk factors and consequences of intimate partner violence
5. **Inform policies and programmes in other sectors about evidence-based prevention interventions**, including comprehensive sexuality education and economic livelihood programmes for women

What actions can health sector take?



1. **Strengthen routine reporting of violence against women and girls statistics** by including indicators and collection of data in health information and surveillance systems
2. **Establish baselines for prevalence through population-based surveys** and integrate violence against women and girls modules in recurring population-based surveys
3. **Conduct or support analysis** and use of disaggregated data on violence against women and girls
4. **Conduct research to develop, evaluate and scale up health systems** interventions to prevent or reduce violence against women and girls
5. **Facilitate efforts by others to research** violence against women and girls knowledge gaps and evaluate interventions

Monitoring your efforts



How will we know we've brought the vision to life?

By the number of countries that:

1. **include health care services to address intimate partner violence and comprehensive post-rape care** in line, with WHO guidelines, in national health or sexual and reproductive health plans or policies.
2. **develop or update their national guidelines or protocols for the health system response to women experiencing violence**, consistent with international human rights standards and WHO guidelines.
3. **provide comprehensive post-rape care in a medical facility** in every territorial and/or administrative unit, consistent with WHO guidelines.
4. **have a national multisectoral plan** which includes the health system and which proposes at least one strategy to prevent violence against women and girls.
5. **have carried out a population-based, nationally representative study/survey on VAW** or that have included a module on violence against women in other population-based demographic or health surveys within the past five years, disaggregated by age, ethnicity, socioeconomic status, other.

Why are we here?

Objectives of this workshop

1. To share the latest evidence available on the prevalence and health consequences of violence against women
2. To enable Caribbean countries to exchange experiences and lessons learned in preventing and responding to violence against women, particularly within health systems
3. To introduce participants to evidence-based recommendations from WHO/PAHO on how to respond to women subjected to intimate partner or sexual violence
4. To identify actions that countries can take in order to strengthen their health systems' capacity to address to violence against women

Can we agree to follow these rules?

- ✓ **Timeliness:**
 - Show up on time and be prepared
- ✓ **Let's learn together:**
 - Stay mentally and physically present
 - Contribute to meeting objectives
- ✓ **Let's respect each other:**
 - Listen with an open mind
 - Let everyone participate
 - Stay on point and on time
 - Attack the problem, not the person
- ✓ **Let's work together:**
 - Record outcomes and follow up
- ✓ **It's a democracy:**
 - If you have a suggestion to improve workshop, let us know!
 - Do you wish to add any other meeting rules?



Objective 1.1: Increase the collection and availability of epidemiological and service-related data on violence against women

Indicators



1.1.1 – Number of countries that have carried out national studies on violence against women within the past 5 years

1.1.2 – Number of countries whose studies include an analysis of violence against women across different ethnic/racial groups

1.1.3 – Number of countries whose homicide data is disaggregated by age, sex, and relationship of victim to perpetrator

Objective 2.1: Strengthen national and subnational policies and plans to address violence against women within the health system



Indicators

2.1.1 – Number of countries that included violence against women in national health plans and policies

2.1.2 – Number of countries whose national health budget has one or more dedicated budget lines to support violence against women

2.1.3 – Number of countries that have a unit or focal point within health ministry responsible for violence against women

Objective 2.2: Increase the health system's participation in multisectoral plans, policies and coalitions to address violence against women



Indicators

2.2.1 – Number of countries that have a national or multisectoral plan addressing violence against women that includes the health system

Objective 3.1: Strengthen national standard operating procedures (protocols, guidelines) for providing safe and effective care and support for women experiencing intimate partner and/or sexual violence



Indicators

3.1.1 – Number of countries that have a national standard operating procedures for the health system response to intimate partner violence, consistent with WHO guidelines

3.1.2 – Number of countries that provide comprehensive post-rape care in emergency services, consistent with WHO guidelines

Objective 3.2: Increase the capacity of health professionals to respond to violence against women



Indicators

3.2.1 – Number of countries that have included violence against women in their continuing education processes for health professionals



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Objective 4.1: Strengthen the participation and commitment of the health system in efforts to prevent violence again



Indicators

4.1.1 – Number of countries that have a coalition/task force in place for coordinating prevention of violence against women that includes participation from the Ministry of Health

4.1.2 – Number of countries that have a national violence against women plan that proposes at least one strategy to prevent violence against women