

An Expanded Role for RH Providers **Improving Health Sector Response to Violence Against Women**

A pilot program launched by the PRIME II Project in 2002 is expanding the role of the reproductive health (RH) sector in helping Armenian women overcome violence. PRIME is demonstrating a model for RH providers to effectively screen, educate and refer women who experience violence. The program also aims to influence national health policy to recognize violence against women (VAW) as a public health concern and help providers collaborate with others working at the community level against VAW.

A Widespread Public Health Concern

Violence against women (VAW) includes the physical, sexual, psychological and economic abuse of women and girls. VAW by intimate partners is a widespread public health concern with severe consequences on the health status of women. Studies worldwide reveal that one out of every three or four women has experienced violence from an intimate partner at some point in their lives. In Armenia, recent national research indicates that both men and women have attitudes of tolerance toward “wife-beating,” while smaller qualitative studies uncover alarming levels of VAW. Furthermore, research suggests that most incidents of VAW are never reported to legal authorities. Armenian law punishes physical assault but has no legal provisions that specifically proscribe other forms of VAW.

Counseling, Screening and Outreach

At the women’s department of Polyclinic 8 in Yerevan, PRIME has developed screening, treatment and referral tools and health education materials; trained clinic staff in using the tools; supported other quality improvement initiatives, and linked the facility to existing community referral agencies. The training program involved modular sessions over a six-month period and included clinic staff as well as representatives of governmental social service agencies and nongovernmental organizations (NGOs) working in VAW. Training topics included family planning and gender sensitivity, counseling, confidentiality and screening, community outreach, and legal and policy issues. Together with government and NGO counterparts, PRIME developed a package of educational materials including a brochure, posters, a referral card and a directory of agencies working in VAW to strengthen referral linkages and coordination.



Educational materials on display at Polyclinic 8



Providers at Polyclinic 8

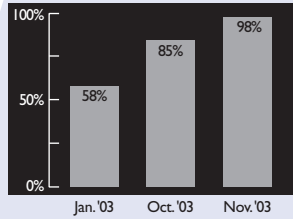
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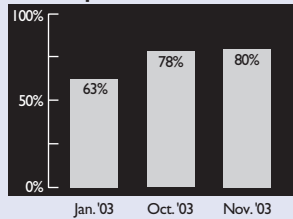
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Polyclinic 8 physicians' attitudes (index scores) at three points in time

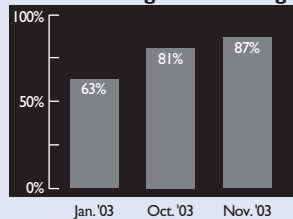
Victim not to blame*



Men responsible for actions*



Providers as agents of change*



* There was significant difference (0.05) between baseline and post-training for all three indices.

Encouraging Results

While the pilot program remains under way until May 2004, positive results have already been achieved. The Government of Armenia included language against VAW in recently passed legislation on RH and the Ministry of Health incorporated VAW programs and policies in a new ten-year strategy document on maternal and child health. Data suggest that the pilot program in Yerevan has positively influenced providers' knowledge of and attitudes toward VAW. Service statistics collected at the clinic since screening for VAW began indicate that providers are able to screen a large majority of reproductive health clients and that 36% of these clients, mostly women coming for gynecological care, have experienced some form of violence. A majority of those cases have been women experiencing psychological violence; 22% accepted referrals either to an in-house psychologist hired by the clinic as part of the program or to community organizations offering counseling and support for women experiencing violence. As Dr. Efrosia Nahapetyan, the head of the ob-gyn department at Polyclinic 8, sums up: "Women have a positive attitude toward this program. They consider it important for their health and have been sharing with providers their experiences with violence."



PRIME II

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