

A Provider Self-Assessment Tool to Measure Gender Competency for Family Planning Services

Module F: Addressing Gender- Based Violence

Data for Impact

University of North Carolina at Chapel Hill
123 West Franklin Street, Suite 330
Chapel Hill, NC 27516 USA
Phone: 919-445-6949 | Fax: 919-445-9353
D4I@unc.edu
<http://www.data4impactproject.org>

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Overview

This document contains one of six modules (A–F), each of which are related to one domain of gender competency. In each module, providers respond to statements that represent knowledge, attitudes, and skills in the domain. For each statement, providers indicate if they “Strongly Agree, Agree, Disagree, or Strongly Disagree” with the statement. Select modules can be administered on their own, or as part of a holistic assessment. The background and development of the provider self-assessment tool is described in detail in the parent document.

The tool includes three sections for each module as follows:

- The first section is the **Statement and Response Form**. This is the form used by providers to document their responses to each statement. The form includes the statements that relate to the domain, and the response options (strongly agree—strongly disagree). Providers review the statement and select one response for each statement.
- The second section is the **Answer Key**, which shows the ideal response for each statement and a point value for each response. Providers write the point value for their response in the “Your Score” column of the answer key and sum their score for the module.
- The third section is a **Discussion Guide**, which provides a brief explanation about why certain responses demonstrate gender competency. It also summarizes main points about the domains and includes self-reflection and group discussion questions.

This provider self-assessment tool aligns with HRH2030 and USAID’s Office of Population and Reproductive Health’s gender-competency framework and eLearning for family planning service providers. A free, self-paced online training program can be accessed at <https://chemonics.com/resource/defining-and-advancing-gender-competent-family-planning-service-providers/>.

Statement and Response Form

Consider each statement and whether you strongly agree, agree, disagree, or strongly disagree with it. Write a check in the box next to your response in the column to the right.	
Statement	Check the box with your response here
F1. Family planning providers should know the signs and symptoms of gender-based violence.	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree
F2. I can tell when a client is experiencing physical or emotional abuse and needs support for gender-based violence.	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree
F3. To protect a client, I am able to describe contraceptive methods a client can use without her partner or other people knowing about it.	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree
F4. Some family planning choices can expose people to gender-based violence.	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree
F5. Through my counseling I can help clients make family planning choices that keep them safe from gender-based violence.	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree
F6. Providers not formally trained in gender-based violence counseling should refer clients experiencing violence to other trained counselors.	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree
F7. Providers who are not trained in gender-based violence counseling might accidentally create additional harm by counseling clients experiencing violence.	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree
F8. I know where to refer a client for services if they show signs of experiencing gender-based violence.	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree
F9. When I suspect a client is experiencing gender-based violence, I am comfortable starting a conversation with them about it.	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree
F10. I am confused by laws related to gender-based violence and how they apply to my clients.	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree
F11. Family planning counseling should explain a client's right to be treated with respect and be free from threats, violence, or coercion.	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree

F12. Talking to clients about gender-based violence should not be a responsibility of family planning providers.	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree
F13. A male partner making a woman use a contraceptive method when she does not want to is a form of violence.	<input type="checkbox"/> Strongly agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly disagree

Answer Key

Step 1: Use your responses from the “statement and response form” to match your response choice with a point value. Then write your point value for the statement in the “your score” column.		
Statement	Points	Your score
F1. Family planning providers should know the signs and symptoms of gender-based violence.	<input type="checkbox"/> Strongly agree = 4 <input type="checkbox"/> Agree = 3 <input type="checkbox"/> Disagree = 2 <input type="checkbox"/> Strongly disagree = 1	
F2. I can tell when a client is experiencing physical or emotional abuse and needs support for gender-based violence.	<input type="checkbox"/> Strongly agree = 4 <input type="checkbox"/> Agree = 3 <input type="checkbox"/> Disagree = 2 <input type="checkbox"/> Strongly disagree = 1	
F3. To protect a client, I am able to describe contraceptive methods a client can use without her partner or other people knowing about it.	<input type="checkbox"/> Strongly agree = 4 <input type="checkbox"/> Agree = 3 <input type="checkbox"/> Disagree = 2 <input type="checkbox"/> Strongly disagree = 1	
F4. Some family planning choices can expose people to gender-based violence.	<input type="checkbox"/> Strongly agree = 4 <input type="checkbox"/> Agree = 3 <input type="checkbox"/> Disagree = 2 <input type="checkbox"/> Strongly disagree = 1	
F5. Through my counseling I can help clients make family planning choices that keep them safe from gender-based violence.	<input type="checkbox"/> Strongly agree = 4 <input type="checkbox"/> Agree = 3 <input type="checkbox"/> Disagree = 2 <input type="checkbox"/> Strongly disagree = 1	
F6. Providers not formally trained in gender-based violence counseling should refer clients experiencing violence to other trained counselors.	<input type="checkbox"/> Strongly agree = 4 <input type="checkbox"/> Agree = 3 <input type="checkbox"/> Disagree = 2 <input type="checkbox"/> Strongly disagree = 1	
F7. Providers who are not trained in gender-based violence counseling might accidentally create additional harm by counseling clients experiencing violence.	<input type="checkbox"/> Strongly agree = 4 <input type="checkbox"/> Agree = 3 <input type="checkbox"/> Disagree = 2 <input type="checkbox"/> Strongly disagree = 1	
F8. I know where to refer a client for services if they show signs of experiencing gender-based violence.	<input type="checkbox"/> Strongly agree = 4 <input type="checkbox"/> Agree = 3 <input type="checkbox"/> Disagree = 2 <input type="checkbox"/> Strongly disagree = 1	
F9. When I suspect a client is experiencing gender-based violence, I am comfortable starting a conversation with them about it.	<input type="checkbox"/> Strongly agree = 4 <input type="checkbox"/> Agree = 3 <input type="checkbox"/> Disagree = 2 <input type="checkbox"/> Strongly disagree = 1	
F10. I am confused by laws related to gender-based violence and how they apply to my clients.	<input type="checkbox"/> Strongly agree = 1 <input type="checkbox"/> Agree = 2 <input type="checkbox"/> Disagree = 3 <input type="checkbox"/> Strongly disagree = 4	
F11. Family planning counseling should explain a client's right to be treated with respect and be free from threats, violence, or coercion.	<input type="checkbox"/> Strongly agree = 4 <input type="checkbox"/> Agree = 3 <input type="checkbox"/> Disagree = 2 <input type="checkbox"/> Strongly disagree = 1	

F12. Talking to clients about gender-based violence should not be a responsibility of family planning providers.	<input type="checkbox"/> Strongly agree = 1 <input type="checkbox"/> Agree = 2 <input type="checkbox"/> Disagree = 3 <input type="checkbox"/> Strongly disagree = 4	
F13. A male partner making a woman use a contraceptive method when she does not want to is a form of violence.	<input type="checkbox"/> Strongly agree = 4 <input type="checkbox"/> Agree = 3 <input type="checkbox"/> Disagree = 2 <input type="checkbox"/> Strongly disagree = 1	
Total score		
<p>Step 2: Add the values for each statement to find your total score (sum value from statements 1–13). Be sure to note that for the statements highlighted in blue, the point values are higher for “disagree” and “strongly disagree” (3 and 4 respectively). For all other statements, the highest point values are for “strongly agree” and “agree.”</p> <p>Step 3: Compare your total score to the values in the table below to see if you have high, medium, or low gender competency in this domain.</p> <p>Step 4: Review the discussion guide which explains the ideal response for each statement. To strengthen competency in this area, complete the eLearning course https://chemonics.com/resource/defining-and-advancing-gender-competent-family-planning-service-providers/</p>		

Module	Maximum possible score	High gender competency	Medium gender competency	Low gender competency
F. Addressing Gender-Based Violence	52	47–52	42–46	Equal to or less than 41

Discussion Guide

This guide will help you reflect on your experience answering statements about addressing gender-based violence. First, please consider the following personal reflection questions.

- What statements were confusing to you? Why?
- What statements did you answer and then second-guess your response? Why?
- What statements touched on practices that you already do when providing family planning services?

The statements in this module assess a provider's ability to recognize and appropriately address a client's experience with gender-based violence. This includes the provider's ability to incorporate principles of "do no harm" into family planning services, provide appropriate referrals, and reinforce the client's right to be treated with respect and live free of violence.

Three Key Takeaways from this Module are:

1. It is important for a gender-competent provider to be able to understand and identify risk factors for gender-based violence (GBV), as well as signs and symptoms that a client is experiencing GBV. Each country will have their own protocol for common signs and symptoms of GBV. The World Health Organization identifies many risk factors including:
 - a. Having multiple partners,
 - b. Being suspected by their partners of infidelity,
 - c. Attitudes that condone violence,
 - d. Community norms that give higher status to males and lower status to females, and
 - e. Beliefs of male sexual entitlement.
2. A gender-competent provider will be able to spot these signs and symptoms among their clients and follow appropriate protocols. A gender-competent provider has multiple roles to play related to GBV, but one key overarching principle is to "do no harm." "Do no harm" means taking all measures necessary to avoid exposing people to further harm or danger as a result of their actions. To "do no harm," when they suspect a client may be experiencing GBV, a provider must consider potential unintended consequences that could harm the clients and communities they seek to support and empower.
3. If a provider is not trained in GBV interventions, they can still support clients experiencing GBV throughout their family planning counseling session by:
 - a. Continuing to reinforce to their clients their right to be free from violence, especially when it comes to family planning choices;
 - b. Emphasizing respect and addressing harmful gender norms and abuse of power; and
 - c. Being aware of their facility's GBV services, as well as where and how to make referrals when more expertise is needed.

As a provider, you can recognize the signs and symptoms of GBV among your clients and connect them with appropriate referral services.

Below are the answers and an explanation for the statements in this module. The explanations are meant to assist with your understanding of the statements.

F1. Family planning providers should know the signs and symptoms of gender-based violence.

Good answers for this statement include “strongly agree” and “agree.”

Strongly agree	Agree	Disagree	Strongly Disagree
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Each country has its own protocol for recognizing the signs and symptoms of GBV. The World Health Organization recognizes some basic signs risk factors for GBV (listed above). A gender-competent provider has a duty to know what the signs and symptoms of GBV are so that they can better support the client to access the family planning method that is best for their situation and refer them to appropriate services.

F2. I can tell when a client is experiencing physical or emotional abuse and needs support for gender-based violence.

Good answers for this statement include “strongly agree” and “agree.”

Strongly agree	Agree	Disagree	Strongly Disagree
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Physical and emotional abuse are both forms of GBV. A gender-competent provider will be able to identify the various signs and symptoms of physical and emotional abuse and be able to provide appropriate referrals or counseling.

F3. To protect a client, I can explain contraceptive methods a client can use without her partner or other people knowing about it.

Good answers for this statement include “strongly agree” and “agree.”

Strongly agree	Agree	Disagree	Strongly Disagree
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Certain family planning methods can be used more discreetly than others. As a gender-competent provider, it is important to counsel on all contraceptive methods, including those that clients can use with less chances of contraceptive use being detected. These methods offer clients experiencing gender-based violence the ability to use contraception without further endangering them for doing so.

F4. Some family planning choices can expose people to gender-based violence.

Good answers for this statement include “strongly agree” and “agree.”

Strongly agree	Agree	Disagree	Strongly disagree
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Some contraceptive methods have characteristics that may expose people to gender-based violence. For example, the outlines of an implant on a woman’s arm might expose her to the anger of a male partner that did not want her to use contraception. Gender-competent providers can prevent these risks by asking questions like, “Do you feel safe using this method?”

F5. Through my counseling I can help clients make family planning choices that keep them safe from gender-based violence.

Good answers for this statement are “strongly agree” and “agree.”

Strongly agree	Agree	Disagree	Strongly disagree
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Keeping your client’s health information confidential is one way to protect them from gender-based violence. As a provider, it is important not to share any personal information about a client regardless of who asks. Providers should only discuss a client’s information with the client to respect their privacy. They should also be able to inform the client on which contraceptive methods can be used covertly with less chance of being detected.

F6. Providers not formally trained in gender-based violence counseling should refer clients experiencing violence to other trained counselors.

Good answers for this statement are “strongly agree” and “agree.”

Strongly agree	Agree	Disagree	Strongly disagree
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Providers should know where to refer a patient if they are not trained in gender-based counseling, which is different from FP counseling. It is important that a client experiencing GBV be referred to someone who can appropriately treat and counsel them. People trained in gender-based violence have expert knowledge in how to help clients without causing more risk of violence in the client’s current situation.

F7. Providers who are not trained in gender-based violence counseling might accidentally create additional harm by counseling clients experiencing violence.

Good answers for this statement are “strongly agree” and “agree.”

Strongly agree	Agree	Disagree	Strongly Disagree
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Clients have the right to live a life free from violence, retribution, or fear, so it is important to know when and to whom to refer a patient when they are experiencing gender-based violence. If a provider is not formally trained on how to counsel individuals experiencing gender-based

violence, then they may end up traumatizing the patient more. Without appropriate training, they might also accidentally make recommendations that place the client at increased risk for more violence. Those who are formally trained in GBV counseling know how to approach clients experiencing gender-based violence and mitigate any further damage.

F8. I know where to refer a client for services if they show signs of experiencing gender-based violence.

Good answers for this statement include “strongly agree” and “agree.”

Strongly agree	Agree	Disagree	Strongly Disagree
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Referrals are for directing someone to another service or specialty. A FP provider should not counsel on gender-based violence if they are not explicitly trained to do so. The provider should be aware of other services or specialists who are trained in gender-based violence that they can refer to.

F9. When I suspect a client is experiencing gender-based violence, I am comfortable starting a conversation with them about it.

Good answers for this statement include “strongly agree” and “agree.”

Strongly agree	Agree	Disagree	Strongly Disagree
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A gender-competent provider should be aware of the signs and symptoms of gender-based violence. If a provider suspects that a client is experiencing gender-based violence, they should feel comfortable starting a conversation about their experiences and referring them to an appropriately trained GBV resource.

F10. I am confused by laws related to gender-based violence and how they apply to my clients.

Good answers for this statement are “strongly disagree” and “disagree.”

Strongly Agree	Agree	Disagree	Strongly Disagree
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Each country has its own laws related to gender-based violence. As a gender-competent provider, it is vital to be aware of the country’s laws and the policies related to gender-based violence. This will guide your approach to recognizing the signs and symptoms of gender-based violence and help you make appropriate referrals to keep your clients safe and healthy.

F11. Family planning counseling should explain a client’s right to be treated with respect and free from threats, violence, or coercion.

Good answers for this statement include “strongly agree” and “agree.”

Strongly agree	Agree	Disagree	Strongly Disagree
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All people have the right to be treated with respect and live their lives without fear of threats, violence, or coercion. This is especially important for women and men who are engaged with reproductive health decisions. A gender-competent provider should continue to reinforce these rights to clients and maintain an open counseling environment. Providers can incorporate this into counseling conversations with simple statements such as: “You have the right to live without violence.” Inquiring about the client’s existing support network and referring them to other appropriately trained resources (e.g., religious, or community-based) may also be helpful.

F12. Talking to clients about gender-based violence should not be a responsibility of family planning providers.

Good answers for this statement are “strongly disagree” and “disagree.”

Strongly agree	Agree	Disagree	Strongly Disagree
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The World Health Organization estimates that one in three women will experience physical and/or sexual violence in their lifetime. Providers are uniquely situated to identify and address the signs and symptoms of gender-based violence. Providers should continue to learn about gender-based violence and seek out any additional training necessary to appropriately address their client’s needs during a sensitive time in their lives.

F13. A male partner making a woman use a contraceptive method when she does not want to is a form of violence.

Good answers for this statement include “strongly agree” and “agree.”

Strongly agree	Agree	Disagree	Strongly Disagree
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In some cases, male partners control and influence the woman’s choice of whether to use contraceptives. This is a form of GBV that interferes with a woman’s ability to fulfill her contraceptive goals. Gender-competent providers are aware of signs of reproductive coercion and can describe the methods that women can use without another person’s knowledge. They can also help women to stop using contraceptive methods if they were coerced into using them.

Group Discussion/Reflection:

After reviewing the statements on gender-based violence, it is important to reflect on and plan for how best to support clients experiencing gender-based violence within your family planning practice. Below are some questions to discuss as a group regarding referrals.

- Where can you refer clients experiencing gender-based violence to?
- If you are not aware of where to refer clients, what organizations and/or individuals could you contact to help you find out this information?
- What plan can you make to ensure that information about gender-based violence and referrals is accessible to your colleagues?

The sixth module of the online Gender Competencies for Family Planning Providers eLearning Course is dedicated to addressing gender-based violence. The following learning objectives are addressed in this module:

- Define addressing gender-based violence;
- Explain the importance of addressing gender-based violence;
- Identify the competencies of the “Addressing Gender-Based Violence” domain; and
- Apply the competencies to your work.

Taking this online training will help you develop your understanding of how to address gender-based violence as a gender-competent provider and provide more insights into the statements asked in this tool.

Data for Impact

University of North Carolina at Chapel Hill

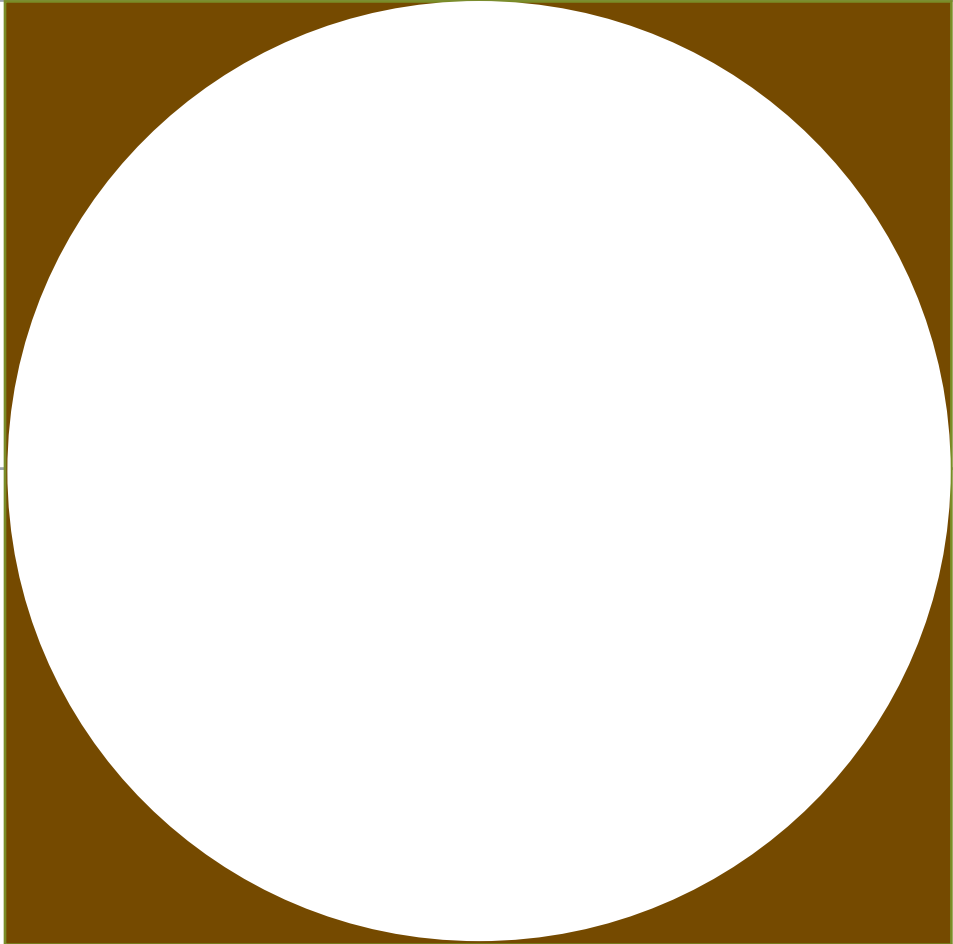
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