

Creating a Safety Plan ⁶

Creating a safety plan helps a woman think through ways to keep safe if violence happens. Encourage the woman to develop her own ideas about what would keep her safe. If required, provide examples such as the following:

1. A woman could keep a bag packed with important documents, keys, money and a change of clothes in case she needs to leave quickly and easily. Ask your client if there are places in her house she could hide this bag or advise her to keep it at the house of a trusted relative, neighbor or friend.
2. A woman could confide in a neighbor about the violence—someone who would be willing to help if she/he heard a disturbance in the home. If the stigma of discussing violence keeps your client from discussing the issue with neighbors, ask her who she could turn to in an emergency.
3. A signal or code word could be developed with children, neighbors, relatives or friends so that they know when they should seek emergency help.
4. If a woman's partner comes home angry, she could plan to stay near the door for an easy escape and to stay away from sharp objects.
5. A woman can develop a plan for escape from home, work and other areas, identifying a safe place where she can go and not be discovered by her partner.

Sero-Discordant Couples

If a woman's test result is different than her partner's known status, this is called being "sero-discordant" and it is an additional barrier to disclosure. Much of the violence that occurs upon HIV status disclosure happens when couples are sero-discordant. Keep the following in mind:

- If a woman is HIV positive and her husband is HIV negative, he may assume that she has been unfaithful—placing her at a high risk for violence.
- If a woman is HIV negative and her husband is HIV positive, he could feel jealous of her health and become violent.
- The woman may not realize the added risk for violence if she is sero-discordant with her partner. Inform her of this fact and emphasize to the client that it is her choice to disclose—she has a right to decide when and how to disclose, and can delay disclosure until she feels safe. She can also decide not to disclose.
- If a woman is HIV positive or HIV negative in a sero-discordant partnership and fears violence enough to decide not to disclose, discuss condom negotiation techniques that she can use with her partner without disclosing her status.

Dos and Don'ts For discussing violence against women at VCT clinics

DOs

- **Do** listen to your client with respect and compassion. When you are engaged and actively listening, it fosters trust.
- **Do** emphasize that violence is not her fault and that she doesn't deserve it.
- **Do** take the danger she feels seriously.
- **Do** conduct pre-test counseling that helps a client think through the consequences of a positive result, and if appropriate, brainstorm and role play partner disclosure.
- **Do** hold pre-test counseling sessions separately if a couple is being tested together. At this time determine if the woman is exercising her freedom of choice to get tested.¹
- **Do** respect a client's choice about disclosure—she knows best about her own life.¹⁰
- **Do** discuss accompanied disclosure options:
 - A client can bring her partner back to the clinic to discuss her HIV status in the presence of the counselor. This can diffuse tensions and help keep the woman safe.
 - You can help the client identify a friend or family member who could be present when she discusses her HIV status with her partner at home.
 - Role play the accompanied disclosure event so the client is prepared for several different responses.
- **Do** make referrals to other services in the area, so that women will have others to turn to.
- **Do** know that there are quality services offered for women experiencing violence and/or HIV at the places where you refer your clients.
- **Do** offer women ongoing counseling and support options based on what is available at your clinic or in your area.

DON'Ts

- **Don't** blame a client for the violence she is experiencing.
- **Don't** discuss violence and then assume a client will find support services herself.
- **Don't** disclose or initiate disclosure of a client's HIV status to her partner without her consent. This could place her in a life-threatening situation.⁸
- **Don't** force a client to disclose her status.¹⁰
- **Don't** discuss violence against women in front of other people or the woman's partner.
- **Don't** hold the pre-test counseling session with both partners together if they are being tested together.¹
- **Don't** call or inform the police without her consent.
- **Don't** tell a client what to do—she is the expert on her situation. Rather, discuss all possible options and help her come to her own decisions.

VCT Counselor Interview Guide

The purpose of this guide is to help you **discuss violence and HIV/AIDS** with your clients, and to help you assist clients who are experiencing or feeling at risk for violence and HIV.

WHY talk with VCT clients about violence against women and its connection to HIV/AIDS?

- Violence against women is a serious human rights violation and a worldwide public health emergency.¹
- One in three women experience violence around the world.²
- Violence against women can be both a cause and a consequence of HIV infection.^{3,4,5}
- Women who are abused are at greater risk for contracting HIV, and women who are HIV positive are at a greater risk for experiencing violence from their partners.^{6,7}

- In sub-Saharan Africa, the majority of people living with HIV/AIDS are women. Young women are especially affected. There are an average of three HIV positive women ages 15 to 24 for every one HIV positive man of the same age.⁸
- The benefits of widespread HIV testing will be lessened if women avoid testing due to fear of potential violence upon disclosing their status.¹
- Messages about condom use and HIV prevention must be adapted to account for any violence and imbalance of power in a woman's relationship with her male partner.

WHEN should I use this interview guide?

- Use this guide when providing any VCT service to a female client.
- This guide can be used at different points in a client's visit. Use your instinct and judgment to determine when is the right time to address violence and HIV.

HOW do I use this interview guide?

- First establish rapport with friendliness, eye contact and warm greetings.
- Modify the questions and responses as needed for your clinic, clients and context.
- The questions in this interview guide are just the beginning. Follow your client's lead. The client's response to a question could lead you to ask other questions of your own.

Starting a Conversation ^{5,6}

Transition Statement

Before asking questions about violence, use a transition statement to make the client as ready and as comfortable as possible, such as:

"I always ask these routine questions, because some women are in relationships where they are afraid of their partner's reaction to their decision to test for HIV, or afraid of their partner's reaction to their test results."

Questions

Use the following questions to guide your conversation:

1. Is your partner aware that you are here to be tested for HIV?
2. If you told your partner that you tested for HIV, do you think he would react angrily or negatively?
3. Has your partner ever physically or sexually hurt you?
4. Do you know your partner's HIV status?
5. Even though you haven't tested and may be negative or positive, how do you think your partner would react if you told him your results? Are you concerned that he might physically hurt or threaten to hurt you if he does not like the result of the test?
6. Although you haven't tested yet, would you like to practice ways to disclose possible results to your partner?

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Preventing Violence Against Women and HIV

Responding to Clients' Needs

Once a woman has answered your questions, you will have a general idea of her experience of violence. At this time, you can give her information and support according to her individual situation. This document provides responses for the most common scenarios encountered by VCT counselors. Combine these ideas with your own knowledge, skills, practices and protocols.

IF a woman is experiencing violence, fears violence upon disclosure, and DOES NOT WANT TO DISCLOSE to her partner . . .

- **Reassure her.** Remind her that everyone has a right to live free of violence and that she has a right to protect herself from potential violence.^{5,6}
- **Support and respect her decisions.** Don't inform her partner yourself or pressure her to disclose.¹⁰ This could endanger her life. Respect the client's decision to withhold her results from her partner. Help her think of ways to keep her partner from finding out that she was tested and/or from finding out her results until she feels safe to disclose.
- **Suggest disclosing to others.** Discuss with her the option of disclosing her status to someone else. Although both violence and HIV are stigmatized issues, explain to her that a trusted relative or friend could offer her important support during this challenging time.
- **Help her to develop a safety plan.** A safety plan can help the woman protect herself and her children from violence.^{5,6} (See the "Creating a Safety Plan" box for details.)
- **Discuss referrals.** Discuss all options with her for referrals to women's NGOs or other counseling services in the area.^{1,5,6} Assist her with directions to different service providers and give her the contact names of people at these organizations. If there are no formal support options in the immediate area, brainstorm with her about trusted relatives or friends who could support her, maintain her confidentiality, and help her deal with these issues. By doing this, you can reduce your stress and open up a network of support for her. (See the "Making Referrals" box for more details.)
- **Inquire about her partner's status.** If a woman knows her partner's status and her test results make them a sero-discordant couple (meaning they have a different HIV status), this is an additional barrier to disclosure. (See the "Sero-Discordant Couples" box for further details.)

IF a woman WANTS TO DISCLOSE her status but thinks she is at risk for violence . . .

- **Remind her of her options.** Explain to her that she can consider not disclosing or deferring until she feels that her safety is assured. If she still wants to disclose, talk her through the options, such as accompanied disclosure or bringing her partner back to get tested and pretending that it is her first visit as well. Provide her the information, support and time to decide which option will most likely keep her safe and free from harm. (See the "Accompanied Disclosure" box for more details.)
- **Build her skills through role playing.** One important way to help a woman disclose safely is to counsel her through role-playing exercises. (See the "Role Playing" box for more details.) After role playing, suggest disclosing to relatives or friends first to prepare for the disclosure event.
- **Inquire about her partner's status.** If a woman knows her partner's status and her test results make them a sero-discordant couple, make sure she understands how this is an additional barrier to disclosure. Give her time to consider her decision. (See the "Sero-Discordant Couples" box for further details.)
- **Help her to develop a safety plan.** A safety plan can help the woman protect herself and her children from violence.^{5,6} (See the "Creating a Safety Plan" box.)
- **Discuss referrals.** Refer the client to other community services for women living with violence and/or HIV. Assist her with directions to the different service providers and give her the contact names of people at these organizations. If there are no formal support options in the immediate area, brainstorm with her about trusted relatives or friends who could support her and maintain her confidentiality.
- **Discuss prevention.** Ensure she understands how to continue preventing HIV if she is HIV negative. Explain the importance of using condoms even if her partner thinks condoms are not necessary, since she tested negative. (See the "Condom Negotiation" box for details.)

IF a woman decides to disclose her status and DOES NOT FEEL AT RISK FOR VIOLENCE . . .

- Support her in disclosing her HIV status to her partner.
- Support her if she needs time and assistance to prepare for a disclosure. Don't push for immediate disclosure if she is not ready.
- Discuss ongoing follow-up care and ensure that all her concerns are addressed.
- If a woman has not reported violence and says that she will disclose, but you suspect that she is experiencing violence, do the following:
 - Assure her that she has the right to live free of violence.
 - Ask her if she would like to be referred to women's NGOs or counseling services that could offer further support.

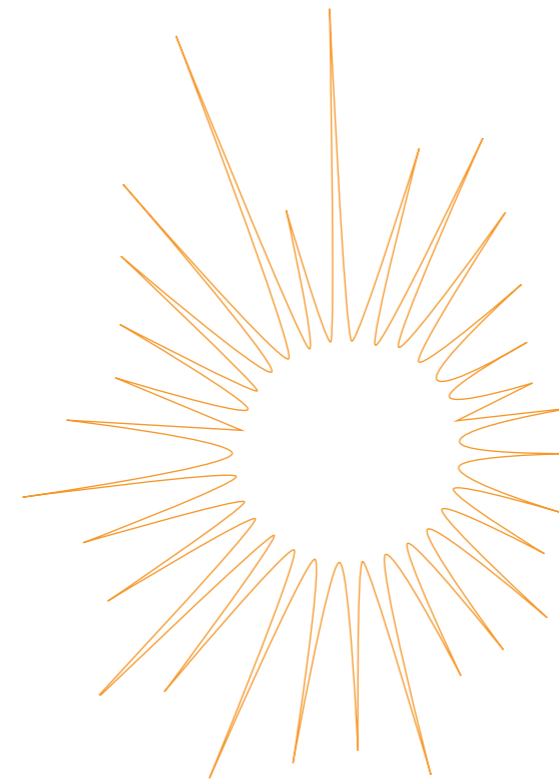
IF a woman is pregnant or breast-feeding . . .

Be aware that violence can limit women's adherence to drug regimens preventing mother-to-child transmission of HIV.

- **If a woman wants to disclose her status but fears possible violence,** discuss the benefits and risks of her disclosing her status and treatment regimen to her partner. If she is fearful of her safety, discuss delaying disclosure until her safety can be assured.
- **If the woman decides not to disclose her results, because she fears violence from her partner,** help her think of ways to adhere to the treatment regimen without her

partner finding out. This could include storing the ARV's at the house of a trusted relative, neighbor or friend.

- **If the woman is not reporting violence, but you suspect she is experiencing violence,** ensure she is informed and aware of how violence can put her and her baby at risk. Invite her to come back for another visit if she would like to discuss this further.



Is your clinic ready? ⁵

Can you ensure:

Client Confidentiality

Confidentiality, and any limits to it that might exist in your country (e.g., mandatory reporting, etc.) must be discussed with clients at the beginning of the consultation.

Secure Records

Clinics must provide a secure storage area for records and a policy about who can look at those records.

A Well-Trained, Sensitive Staff

Clinic staff must be trained in and have explored their own attitudes and experiences about violence against women.

Client-Centered Services

Clinical services must be in the best interest of the client and uphold client's rights.

An Effective Referral System

Clinics must keep a list of appropriate and up-to-date referrals for women experiencing violence and/or HIV.

Making Referrals

1. Make sure that quality services are offered at the places you are referring clients.
2. Provide details on the services you are recommending to help a woman decide which services meet her needs. Details could include: location, type of organization, costs, hours, services offered, and availability of staff. Keep this information easily accessible to everybody at your clinic.
3. If your clinic doesn't have a written list of referral services, ask other clinics in the area to use theirs as a starting point for creating your own.
4. If you give any written referral information to a woman, counsel her to hide it. If it is found, it could increase her risk for violence.
5. Make sure she gives informed consent for any referrals you make and any information you disclose to other services.

Accompanied Disclosure

An accompanied disclosure means that someone else is present during a disclosure to diffuse tensions and help ensure safety. A client may choose to have a trusted relative or friend be present when she discloses at home, or she may decide to have you present during a disclosure at the clinic. In the case of accompanied disclosure at the clinic, consider the following:

- Create a safe space by setting ground rules for the disclosure, including no voices raised and no interruptions.
- Allow both parties to share their emotions and make sure that neither person is dominating the conversation.
- Diffuse tensions by discussing implications of test results calmly and allow each party to share feelings and concerns.
- Emphasize that although this is a difficult time, violence is never acceptable and will only make the situation more difficult.
- Brainstorm trusted relatives or friends who could provide support.

Condom Negotiation ¹¹

Emphasize to your clients that condoms protect against STIs, HIV and pregnancy. However, asking a partner to wear a condom can put a woman at risk for violence. If a woman is ready to take this step, support her in developing skills for condom negotiation. Here is a sample dialogue to use and adapt with clients. Encourage a client to think of more arguments that her partner may use and then support her in thinking of a strong response for each.

If her partner says:

"I don't like using condoms"

"Using condoms isn't enjoyable"

"You don't trust me!"

She can say:

"If I'm more relaxed, we can both enjoy it more."

"HIV, STIs, and pregnancy are much less enjoyable!"

"It's not about trust. Some STIs and HIV can have no symptoms at first. Let's be safe."

Role Playing

Role playing can help build a client's communications skills and confidence for talking with her partner or others about HIV testing, disclosing her HIV status, using condoms, etc. Role playing with clients follows these basic steps:

1. Ensure that it is the client's choice to follow through with the difficult discussion. Ensure that she is prioritizing her safety and wellness in this decision.
2. Clarify the difficult conversation that is in the client's future. Discuss when and where she could safely have this conversation.
3. Ask the client to identify different scenarios she thinks might occur.
4. Play the role of the person the woman will be talking to (e.g., her partner) and act out possible scenarios with her, allowing her an opportunity to practice what she would say and do.
5. After each scenario discuss other possible responses she could have.
6. Discuss options for ensuring safety— for example: safe locations, best times of day (e.g., not after her partner has been drinking), and whether other friends or family should be present.

