

Ethical and safety recommendations for intervention research on violence against women

**Building on lessons from the WHO publication
*Putting women first: ethical and safety recommendations
for research on domestic violence against women***



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These guidelines were developed by Suneeta Krishnan and Miriam Hartmann, with the overall guidance and technical input of Claudia Garcia Moreno and Christina Pallitto of the Department of Reproductive Health and Research, WHO.

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Acronyms and Abbreviations

ACASI	Audio computer-assisted self-interviewing
CIOMS	Council for International Organizations of Medical Sciences
CP MERG	Child Protection Monitoring and Evaluation Reference Group
DSMB	Data safety and monitoring board
IPV	Intimate partner violence
PI	Principal investigator
SVRI Forum	Sexual Violence Research Initiative Forum, Bangkok, 2013
VAW	Violence against women
VCT	Voluntary HIV counselling and testing
WHO	World Health Organization

Introduction

The Need for Intervention Research Guidelines

The publication of the World Health Organization (WHO) recommendations *Putting women first: ethical and safety recommendations for research on domestic violence against women* provided researchers with a set of concrete actions and best practices for conducting survey research on violence against women (VAW) in a manner that was both ethical and safe (1). These recommendations have spawned additional publications highlighting ethical concerns in different aspects of research on VAW. Most recently, additional guidelines have been released focusing on general recommendations for conducting research on VAW (2), on primary prevention initiatives (3), on sexual violence in emergency settings (4), with perpetrators of sexual violence (5), and on violence against children (6). The recommendations and guidance have been useful for researchers and practitioners in the context of cross-sectional descriptive research.

As the evidence base on the magnitude, context and consequences of VAW has grown, research efforts and attention have begun to focus on decreasing the knowledge gap on effective responses through intervention research. Demonstrating this focus, in November 2012 the WHO Department of Reproductive Health and Research convened a group of experts to discuss health sector-based research to respond to violence against women. This global network of researchers, scientists and practitioners was brought together to enhance existing research efforts and to advocate for greater funding for research on interventions to address VAW and policies and programmes related to it.

With the increased interest in and attention of the global community of researchers, practitioners and policy-makers regarding rigorous intervention research for preventing and responding to VAW, a discussion of the ethical considerations specific to this type of research is warranted.

As highlighted by WHO over a decade ago and by many others since, the sensitive nature of research on VAW requires special ethical and safety considerations (1, 5, 7, 10). Although the broad considerations remain the same in intervention research, such as the need to protect the safety of the participant and the researcher, the implementation of intervention research also raises additional ethical and safety questions. For example, how can researchers safely approach selection, recruitment and follow-up of participants in a study to evaluate the outcomes and impacts of an intervention to prevent violence? How do researchers address randomization of participants into control or intervention arms? How do researchers monitor and manage risk of violence from participation in the intervention? And what additional protections should be put in place when the research involves populations requiring special considerations, such as pregnant women?

Intent and Content of These Guidelines

These recommendations have been developed to help answer questions specific to conducting research on health-based interventions to prevent and respond to VAW. Research on strategies that use health or health care as an entry point (regardless of the implementation setting, such as a clinic or community) is the focus. However, the discussion may be relevant to research on other kinds of VAW interventions.

The target audience for these guidelines includes stakeholders engaged in research on health-based interventions to address VAW. Such research may be conducted by multidisciplinary and cross-national or regional teams composed of researchers, programme implementers, evaluators, activists, advocates and care providers. Thus, in this document, the terms research team and researcher represent a range of stakeholders engaged in studying VAW interventions. These recommendations do not address ethical challenges and dilemmas that may arise in the context of collaborations to study VAW interventions. For example, issues related to respect and equity within research teams and across global North-South partnerships (11, 13) are not discussed, although we provide a few references on this and related topics where possible.

The focus of this document is on ethical and safety considerations for various stages and types of research on health-based interventions to address VAW, from design and development of interventions to evaluation of

Importantly, these recommendations are not designed to replace existing research ethics and safety guidelines nor are they designed to replace WHO's *Putting women first: ethical and safety recommendations for research on domestic violence against women* (1); rather, they act as a companion piece. Existing guidelines address a broad range of issues relevant to developing and testing VAW prevention interventions, including informed consent, privacy and confidentiality, and staff recruitment and training. This publication begins by highlighting additional considerations related to several recommendations in *Putting women first*, followed by a presentation of issues specific to research on health-based interventions to address VAW.

There are a few related issues that are not discussed in these guidelines. We do not address ethical and safety issues involved in working with children or adolescents in the context of VAW intervention research, and offer alternative resources on this issue. This document does not address additional protections that may be needed when working with individuals living with HIV infection. Also, it does not comprehensively consider issues that may arise in VAW interventions outside the health sector.

Finally, given the evidence suggesting that pregnancy may be an optimal time for intervention, we have included a section on ethical and safety considerations when working in the context of antenatal care to address the lack of guidance on conducting VAW research among this

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