Ethical and Safety Guidelines for Implementing the DHS Domestic Violence Module

The following guidelines must be followed in countries where the DHS domestic violence module is being implemented. These guidelines are aimed at ensuring the ethical implementation of the domestic violence module and at maximizing the disclosure of actual violence.

Selection of one eligible woman per household. Only one woman per household should receive the domestic violence module. The Kish grid should be used to randomly select one woman from among the eligible women in the household.

Note: In surveys where both women and men are to receive the domestic violence module, additional precautions are needed: a) households should be pre-selected for interviewing women or men with the domestic violence module, so that a woman and a man are not interviewed with the module in the same household and b) in the households selected for a man to receive the module, as in the case of women, only one man should be randomly selected for the module from among eligible men in the household.

Special training to be provided. All members of the staff should receive special training. This includes the administrative and technical personnel as well as both male and female field staff. It is important to ensure that all staff understand the purpose of the module and why special measures are being used. Field staff need to receive additional training on how to administer the module using the safety procedures established by the survey, how to deal with crisis situations, and how to prepare themselves emotionally for the work. The addendum to the DHS Training Manual "Guidelines for Training Field staff for the Implementation of the DHS Domestic Violence Module" provides guidelines to conduct the special training.

Reiteration of informed consent. The introductory sentence in the violence module should be treated as an additional informed consent procedure. The respondent should be reassured about the confidentiality of the information. If more than one woman in the household is being interviewed with the core questionnaire, the interviewer should informally explain that no one else in the household is being asked the questions that the respondent is going to be asked and that no one else will know what has been discussed.

Ensuring privacy. The need for absolute privacy when implementing the domestic violence module must be stressed with interviewers. In addition to using a range of techniques for ensuring privacy, field staff should be free to reschedule the interview to another time in order to carry out the interview in private. If any other adult comes into the room while the module is being implemented, the interviewer must change the subject immediately and even stop the interview, if necessary. As part of the training for implementing the violence module, field staff should practice how to handle situations where privacy is difficult to obtain and maintain. If, despite repeated attempts, privacy cannot be obtained, the domestic violence module should not be implemented. In each of these cases, an explanation of the circumstances for not completing the module should be provided in writing by the interviewer.

Referrals and additional information. An information sheet must be prepared for distribution in the appropriate language which lists the options and services available for women experiencing domestic violence, including if possible, any legal help and available services. At a

minimum, the sheet should contain contact information for organizations where women can get help. Countries should decide whether all women who participate will be given this information or only women who specifically request assistance. Interviewers should be given training to help them provide referral information in a manner that does not put the recipient in any further danger.

Support for field staff. Emotional support to field staff is essential, both in helping interviewers withstand the demands of the fieldwork, as well as for contributing to the quality of the data collection process. This support can take the form of regular de-briefing meetings to help interviewers 'unload'. Supervisors also need to be trained to give support to interviewers as needed, and to identify and help field staff who are experiencing emotional and other problems.

Translation. The use of translators should be avoided in collecting data on domestic violence, both because it is likely to reduce the quality of the information given, and because it violates the confidentiality of the interview, particularly when translators are from the same community.

Quality control. Quality assurance procedures need to be developed for the domestic violence module in line with those used for the rest of the survey. These include having field check tables on the proportion of violence modules not being completed (DV01 coded as '2') by each interviewer/team, and the proportion of women reporting violence by interviewer/team. The idea is to identify individuals or supervisors who are producing data which is *significantly higher or lower* than the rest of the field staff. Additional monitoring should be done to ensure that all procedures for implementing the module are being followed correctly, and the data is of the highest quality. Supervisors must identify and discipline both types of interviewers: those who are not implementing the module in privacy and those using the need for privacy to avoid implementing the module.

Collaboration with local women's groups. It is highly recommended that local women's groups be involved from the start. In some countries it may be possible to provide referrals for abused respondents to local women's groups and these groups could also help to obtain support for field staff. The involvement of women's groups will also increase ownership of the data.

Adapted from "Putting Women First: Ethical and Safety Recommendations for Research on Domestic Violence Against Women" World Health Organization, 2001.