

COUNCIL OF EUROPE



CONSEIL DE L'EUROPE



Formazione, territori, operatrici e operatori in rete per
prevenire e contrastare la violenza di genere e la violenza
assistita da minori

Lectio magistralis

Gender-based violence: all professionals concerned, committed, and working together”

Dr Marie-Claude Hofner (Switzerland)
GREVIO member- Council of Europe

Istituto Superiore di Sanità, Rome the 8 of May 2024



I am going to talk about ...

1. The importance of an **international framework**
2. **Different level of prevention** & some good practice
3. The strategic place occupied by **health professionals**
4. **Guidelines** & conditions for **efficient collaboration**

The international framework

Convention on preventing and
combating violence against women
and domestic violence



The Istanbul Convention

A common international legal instrument to fight violence against women and girls.

- Adopted by the Council of Europe in 2011
- Ratified by 39 member states including European Union
- **Italy : ratified in 2013 - in force in 2014**

[Home - Istanbul Convention Action against violence against women and domestic violence \(coe.int\)](https://www.coe.int/t/it/Convention+against+violence+against+women+and+domestic+violence+Istanbul+Convention+2011/Convention+against+violence+against+women+and+domestic+violence+Istanbul+Convention+2011.aspx)

Type of violence covered by IC



Violence domestique



Violence à l'égard des femmes



Avortement et stérilisation forcés



Harcèlement sexuel



Mutilations génitales féminines



Violence physique



Violence psychique



Violence sexuelle



Harcèlement obsessionnel



Mariages forcés



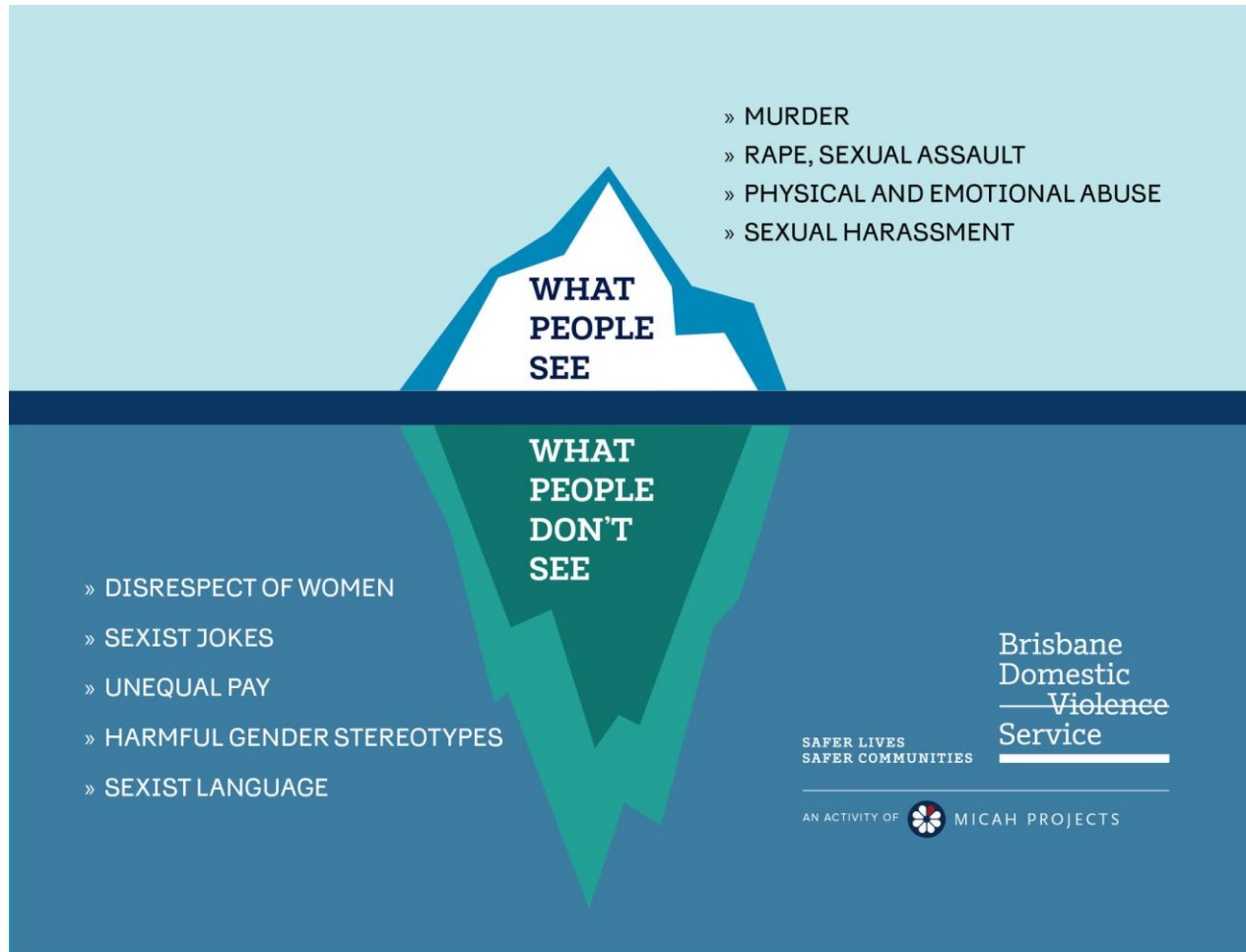
Gender-based violence

Any violence against a woman **because she is a woman**, or which affects women disproportionately.

Gender refers to the **socially constructed roles, behaviors, activities and attributions** that a society considers appropriate for women and men

« Gender-based violence is the ultimate consequence of patriarchal society »

Convention d'Istanbul Introduction CE 2011





... and the children

In **70%** of situations children are exposed to the violence of the adults , becomming victims in their own right



40-60% of perpatrators have been exposed to violence durging childhood





State parties obligation

[1680a9fdb4 \(coe.int\)](https://conventions.coe.int/Treaty/1680a9fdb4)

I QUATTRO PILASTRI DELLA CONVENZIONE DI ISTANBUL

Convenzione del Consiglio d'Europa
sulla prevenzione e la lotta contro la violenza
nei confronti delle donne e la violenza domestica



PREVENIRE



PROTEGGERE



PERSEGUIRE



**POLITICHE
INTEGRATE**

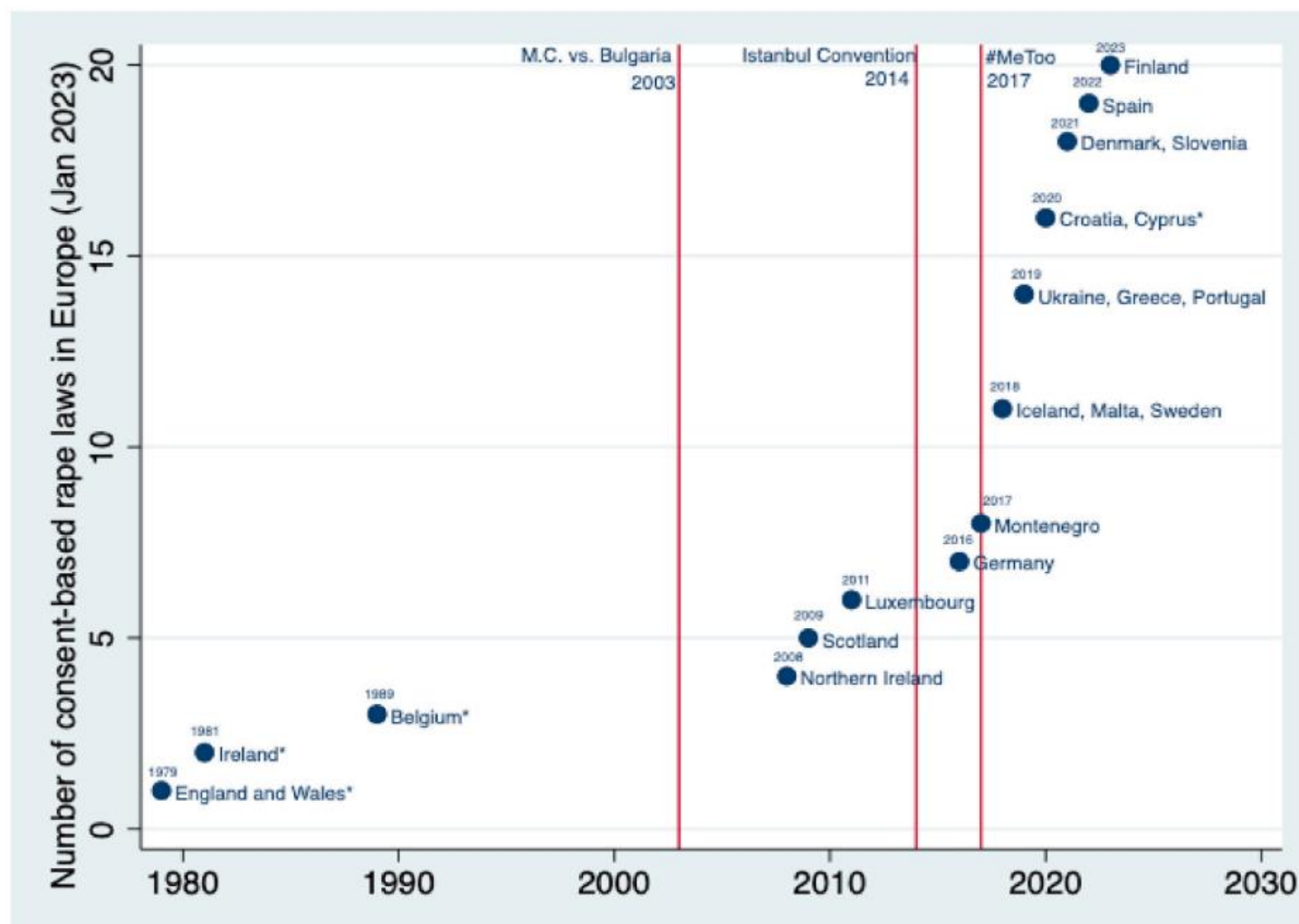


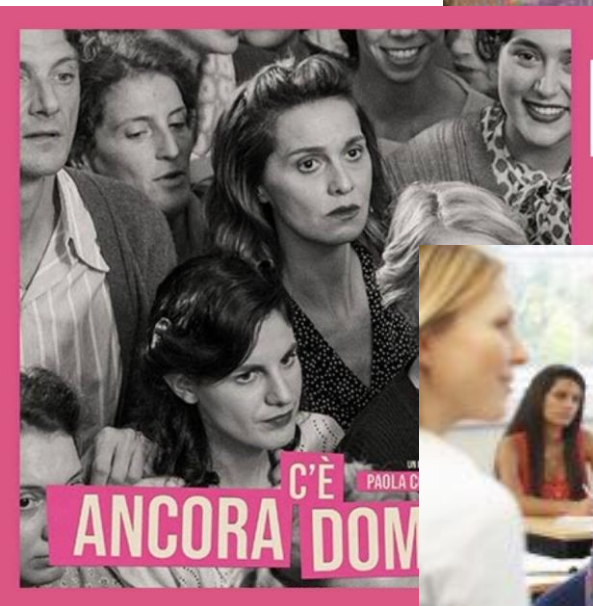
Fig. 2. Timeline of the development of consent-based rape laws in Europe. Notes: a. England and Wales, Ireland, and Belgium have made substantial amendments since then. b. Consent was mentioned in the Cypriot Criminal Code as early as 1959, under British rule.

www.sciencedirect.com/science/article/pii/S175606162400020X?via%3Dihub

The 3 level of prevention & some good practices



Act upstream to prevent



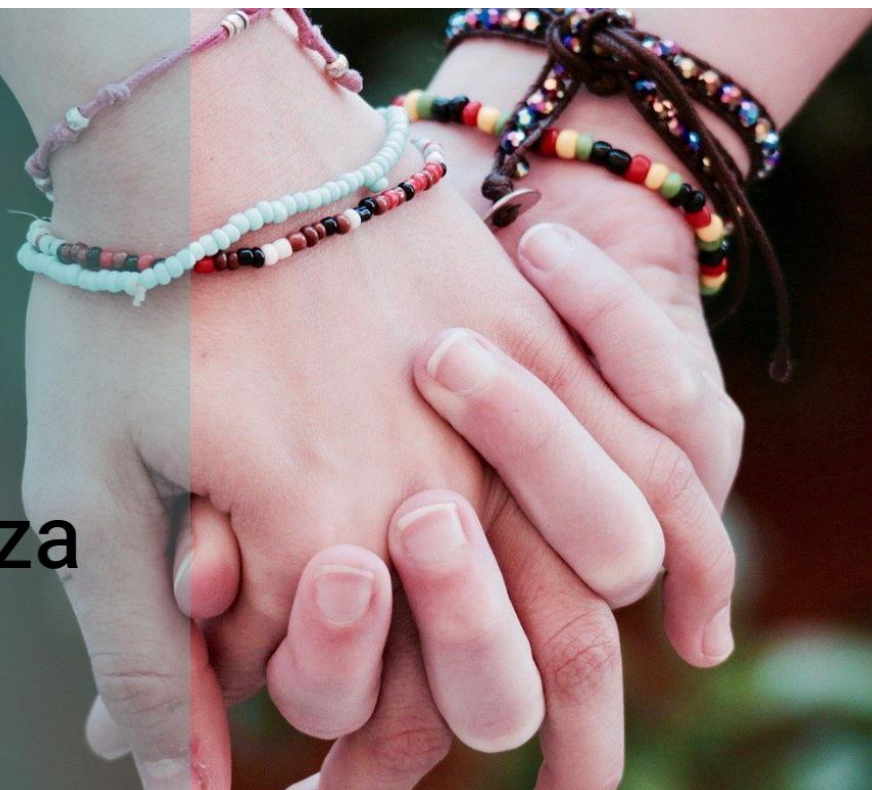


Act upstream: good practice

Offerta

Batticuore - amicizia, amore e sessualità senza violenza

Programma nazionale per la
promozione delle competenze
relazionali.



[Batticuore](https://www.batticuore.ch/) | [Fondation suisse pour la santé \(radix.ch\)](https://www.fondation-radix.ch/)



Early detection





Early detection: good practice

Online teaching for the pharmacists



ETAPE 2 DE LA FORMATION

Acquérir les outils pour intervenir selon le protocole DOTIP

Détecter les violences en officine est nécessaire pour deux raisons :



Les signaux d'alarmes sont nombreux et non spécifiques

Les victimes ne parlent pas spontanément des violences subies

Le module enseigne les bonnes questions qu'il faut oser poser pour détecter des violences subies.

Problèmes psychosomatiques

la grossesse est une période de vigilance

Troubles émotionnels



Blessures répétées

Abus médicaments

Adhésion médicaments insuffisante

Honte, culpabilité, Répli sur :

VIOLENCES DANS LE COUPLE

Formation en ligne destinée au personnel des pharmacies

Prévention des violences dans le couple :
Détection et orientation des victimes



Formation développée (parcours gamifié) par Take off Concept sous mandat et en collaboration avec le Bureau de l'égalité entre les femmes et les hommes du canton de Vaud (BEFH) et le Département de la santé et de l'action sociale du canton de Vaud (DSAS)



Spezialised care





Specialized care: good practice



Centre Universitaire Romand
de Médecine Légale
Professeur Patrice Mangin
Directeur
Unité de Médecine des Violences
Pr Patrice Mangin, responsable
Dr Nathalie Romain-Glassey, responsable de la consultation
Dr Marie-Claude Hofner, responsable Recherche et Formation



N/Ref.: 123456/1080123456/ASD-NR-chb

CONSTAT MEDICAL

Je soussignée, A.-S. DELL'ÉVA, certifie avoir examiné le 10 novembre 200_ à 08h45, à la consultation de l'Unité de Médecine des Violences, une personne déclarant se nommer C. L., disant être née le __.1988.

Selon les déclarations de Mme C, le vendredi 7 novembre 200_ vers 12h00 à son domicile à Lausanne, elle a été victime d'une agression de la part de son ex-mari. Durant la matinée, son ex-mari est venu plusieurs fois sonner et frapper à la porte du domicile de Mme...

Actuellement, Mme se plaint de douleurs ...

A l'évocation des faits, elle pleure et dit que « les pires blessures c'est celles qu'on ne voit pas ». Depuis les faits, Mme a très peu dormi et n'a pas d'appétit. Elle craint de croiser son ex-mari dans la rue.

A l'examen physique, nous avons constaté la présence des lésions suivantes :

- a) au niveau de la tête :
 - un hématome jaune bleu violacé « en lunette », plus marqué à gauche [photos 9,10,11];
 - ...

Etabli le 10 novembre 200_ à la demande de l'intéressée.

A.-S. DELL'ÉVA
Infirmière

Dr N. ROMAIN-GLASSEY
Médecin associée

Annexes : photographies UMV_000123
N.B. : une copie du présent document et des photographies sont conservées à notre consultation où elles restent à la disposition de l'intéressée.

Rue du Bugnon 44, 1011 Lausanne, Suisse, Tél.: +41 (0)21 314 14 14, Fax: +41 (0)21 314 14 08

Dr N. Romain Glassey, Unité de médecine des violences du CHUV, CURML, Lausanne

Health professionals
at the focal point
& means of collaboration

A huge prevention potential

- # 1/5 women victim of violence in Europe
- # 70% of European women in close contact at least once a year with a health professional
- # ED, gynaecologist, general practitioner main gateway for women victims to access support and orientation
- # Women trust health professional to respond to their needs in case of violence



What are the barriers

“It is not a medical problem ?” Frequency of violence and impact on health are both largely underestimated by medical doctors

“Not my patients” False representation about profile of victims is predominant as well as stereotypes

“I don’t want to offend my patient” whereas women are willing to be asked about violence and trust their GP

“But I don’t know what to do “ Guidelines are essential to overcome medical inaction

Short and simple protocol

D

Detect and welcome

O

Offer a clear message of support

T

Treat and report

I

Inform on right and resources

P

Protect and prevent recurrences

The DOTIP protocol* is recognized as a model of good practice

*[BEFH DOTIP actu2019 web PS.pdf \(vd.ch\)](#)



Everyone
can do it
....but



Same DOTIP (5 steps protocol)
adapted to each frontline profession

Same program fundamentals

- Taking account of the **beliefs and values** of each profession is the only way to change professional culture
- The problem is **complex**. Neither a unique discipline, nor a unique profession can address it alone. So, the program must be **interdisciplinary and interprofessional**
- A new problematic should not automatically lead to the creation of a new structure, **lets use efficiently the existing experienced resources**

... and practical tools

- Interactive Dbase: **updated** local resources inventory with an indicator system
- Annual network day: each institution (state or NGO) briefly present the services offered and its expectations towards the other institutions. **Personal meeting** of partners.
- Joint continuing **training**: from one hour to a year !
- **Micro exchange placement**: police officers spend a day with emergency room nurses, social workers spend a night with ambulance drivers, doctors spend a night with the policemen on duty, etc.



Act to resist



www.epfweb.org/node/551



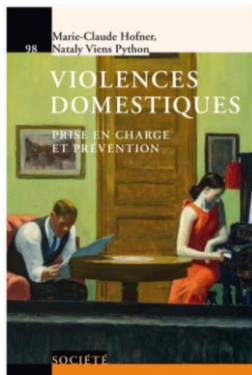
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<https://www.epflpress.org/produit/679/9782889150526/violences-domestiques>