

## Integration of an Intimate Partner Violence intervention into HIV Testing and Counselling and community settings: a quasi-experimental study.

**Investigators:** Erick Sakwa<sup>1</sup>, Robinson Karuga<sup>1</sup>, Dr. Lina Digolo<sup>1</sup>, Jane Thiomi<sup>1</sup>, Nduku Kilonzo<sup>2</sup>, Kelvin Storey<sup>1</sup>

**Collaborating Institutions:** <sup>1</sup>LVCT Health, <sup>2</sup>National AIDS Control Council

### BACKGROUND

There is unequivocal evidence - locally and internationally -that intimate partner violence (IPV) is strongly associated with poor reproductive, maternal and mental health outcomes among women. Despite these well known facts, there is a lack of sufficient evidence to support the design and scale up of interventions against IPV. At the same time, there are inadequate interventions to prevent IPV in Kenya. Findings from LVCT Health's research in 2013 revealed high prevalence of IPV among women in HIV Testing and Counselling (HTC) settings (46.9%). The most common forms of IPV were psychological, sexual and physical assaults by partners. Screening for IPV was established to be feasible and acceptable in HTC settings. The same study revealed the urgent need for interventions to address IPV in the community settings. The identified gaps in this dire situation are: (a) inadequate community and health facility based (primary and secondary)prevention & mitigation interventions (b) poor referral and linkage to support and care for IPV survivors (c) Low knowledge skills level among health providers on IPV and care for survivors, and (d) low levels of awareness on IPV in the community.

LVCT Health proposes to conduct a quasi-experimental study that will document the effect of integrating IPV screening, referral and linkage to care and support in HTC settings. A formative cross-sectional study to assess the knowledge, attitudes and practices around IPV will be nested into this study. Findings from the formative study will inform the design of a combined facility-community primary intervention in a subsequent study.

### AIM

This study aims to develop and implement enhanced secondary IPV interventions for women experiencing IPV in HTC settings. The specific objectives are to:

- a) Implement and test the appropriateness of an enhanced IPV screening tool in identifying those at risk of IPV and the severity & chronicity of IPV, among those who are screened positive for IPV
- b) Define and test an appropriate IPV counselling intervention to prevent occurrence and recurrence of IPV among those at risk and those experiencing IPV, respectively.
- c) Test the effect of the intervention on retention to psychosocial support services
- d) Test the efficacy of the enhanced IPV reduction intervention among women attending HTC services

### METHODS

This quasi-experimental study design will have two (2) arms- intervention and comparison arms; with 280 participants. It will be implemented in 4 LVCT Health facilities in Nairobi and Kisumu Counties. The cross sectional formative study will apply mixed methods to assess the knowledge, attitudes and practices around IPV. The enhanced IPV intervention in this study encompasses; referral and linkage to IPV care and support networks, enhanced HTC process and utilization of theme based support groups.

### EXPECTED OUTCOMES

The following are the expected outcomes after 12 months of going through IPV interventions:

(a) retention to counselling and support groups, (b) reduction in HIV risk behaviours, (c) reduction in IPV risk behaviours, (d) reduction in severity and chronicity of IPV and, (e) enhanced health provider skills in

IPV screening and care. The study will also inform the scaling up of program interventions to prevent primary occurrence of IPV in the community.