## EFFECTIVE MULTIAGENCY COOPERATION

between healthcare providers and women's specialist support services in response to disclosure of domestic violence

This story is inspired by examples shared in the regional assessment "Cooperation between women's NGOs and healthcare providers: a comparative study in the Western Balkans and Turkey" as part of UN Women's regional programme on ending violence against women, "Implementing Norms, Changing Minds".

Sarah's doctor asks if anything has changed in Sarah's life in the last months that could be causing her pain. Sarah explains that her partner has had work-related stress, which means he is more irritated and easily gets angry at home.



While Sarah talks, the doctor takes detailed notes of Sarah's situation and uses a standardised form to document any injuries she has, for any future referrals that need to be made.





Before Sarah leaves, her doctor schedules a follow-up appointment to check-up on Sarah's injuries and see if she requires any further resources. Sarah has been suffering from migraines and intense backpains for the last couple of months, and she therefore decides to go to her primary healthcare physician to see if her doctor can help treat her undiagnosed pains.



Her doctor asks
Sarah what happens
when her partner gets angry,
and Sarah responds that he
will often shout at her, and
on occasion has even gotten
physically violent. The doctor
makes sure not to interrupt
Sarah and validates her
experience.



While Sarah does not wish to file a report, her doctor explains that she has a legal obligation to report the abuse to the police, and can provide Sarah with a medical certificate free of charge, in case she ever decides to take legal action.



Sarah is unsure, so her doctor calls up a women's centre which is situated near the practice, and after explaining Sarah's situation, the centre schedules an appointment with Sarah to see if and what sort of short- and long-term support they can offer Sarah.



Even if healthcare practitioners have limited time with each patient, they can still play a crucial part in supporting women who disclose domestic violence and other forms of abuse.

Primary physicians should at least ensure they **note down all the patient's injuries and any immediate risks** to her safety.

If there is not sufficient time to refer the survivor to a specialist service, a **follow-up appointment** is recommended, as well as providing the patient with **information on women's services nearby** she can contact for further support.







