



**FIRST LINE SUPPORT
AND LIVES**

2. FIRST LINE SUPPORT AND LIVES

PREPARATION AND MATERIALS

OBJECTIVES

- Know the content of first-line support (LIVES)
- Demonstrate skills in offering the first three elements of first-line support – Listen, Inquire, Validate

AVAILABLE TRAINING RESOURCES



Presentation

2. First line support and LIVES presentation



Facilitator guide

2. First line support and LIVES Facilitator guide



Activities

- 2.1 Step by step guide to providing care and support
- 2.2 Active listening
- 2.3 Validating statements
- 2.4 Listening, inquiring and validating (LIV) role play



Participant handouts

- 2.1 Care pathway
- 2.2 LIVES
- 2.3 Communication skills and pathways
- 2.4 Active listening principles
- 2.5 Inquiring about needs and validating
- 2.6 Helping survivors cope with negative feelings

**REQUIRED SUPPLIES
& MATERIALS**

- Projector
- Laptop
- Pen and blank paper workbook for each participant
- Tape, 15 pieces of paper, Markers
- Sufficient space for groups of three to spread out
- Print outs of activities – depending on which activities you choose

KEY MESSAGES

- Actively listen to the survivor verbally and non-verbally, without distractions.
- Inquire about the survivor's needs and concerns, focus on what the survivor wants
- Validate the survivor, show that they are not at fault or to be blamed, that you are there to listen and support them

**FURTHER RESOURCES
FOR FACILITATORS
(OPTIONAL)**

- WHO (2014) Health care for women subjected to intimate partner violence or sexual violence: A Clinical handbook, First-line support for sexual assault and intimate partner violence pg 13-37
- WHO, UNFPA, UNHCR (2019) Clinical management of rape and intimate partner violence survivors: developing protocols for use in humanitarian settings. Geneva: WHO, Part 2: Providing first-line support pg 10-14
- NCA (2020) Integrating Therapeutic interventions into Gender-based Violence Case Management

FIRST LINE SUPPORT AND LIVES FACILITATOR GUIDE



SLIDES 1-3 INTRODUCE FIRST LINE SUPPORT AND LIVES

Slide 3 notes

Explain that first line support is the first steps in first-line support – after ensuring that urgent lifesaving care needs are addressed.



Activity 2.1 Step by step guide to providing care and support
Place **'First line support, Listen, enquire and validate'** on the wall.



SLIDES 4-7 INTRODUCE FIRST LINE SUPPORT AND LIVES

Slide 4 notes

- **First-line support** is the most important care that you can provide for a survivor of violence. It may be the only support you provide.
- First-line support responds to emotional, physical, safety and support needs. It involves responding to someone who discloses violence in a way that is supportive, helps to meet their needs, and prioritizes their continued safety without intruding on their privacy.
- First-line support is based on psychological first aid. It has helped people who have been through various upsetting or stressful events, including being subjected to violence.

Slide 5 notes

- Listen, ask questions, give information and support survivors to make decisions.
- We should not give advice, give orders or decide for them. Respect her wishes and respond to her needs, don't assume that you know what is best for her.
- Advice can be influenced by personal beliefs and culture, and can be subjective. However information is objective.

Slide 7 notes

- **First line support** and **LIVES** can be powerful healing tools.
- Sexual violence and intimate partner violence takes away the autonomy and self-determination of survivors.
- They often feel powerless and often silenced.
- Active, supportive listening helps survivors to feel heard – an important step towards **healing**.
- Asking survivors about their needs can give them back a sense of control, agency, autonomy and self-determination



Activity 2.2 Active listening



SLIDES 9-18 LISTENING, INQUIRING ABOUT NEEDS AND VALIDATING

Slide 9 notes

- **Good active listening** is important to support survivors to speak and share, to show understanding, communicate, empathy, help survivors to feel supported and start healing.
- We hear and listen all the time, but we do not pay attention to how we listen, or listen actively, intentionally, mindfully or consciously. Good listening skills can be practised.

Slide 10 notes

- **Listening is:**
 - 1 Giving her the chance to say what she wants to a caring person who wants to help and in a safe and private space
 - 2 Critical for healing and recovery
 - 3 Most important part of good communication
 - 4 Being aware of the feelings behind her words
 - 5 Hearing both what she says and what she does not say
 - 6 Paying attention to her body language
 - 7 Sitting or standing at the same level and close enough
 - 8 Through empathy, showing understanding of how she feels.



Slide 11 notes

- Interrupting can signal to the survivor that you are not listening or do not think what they have to say is important or of value.
- Focus on the survivor, do not talk about yourself, your feelings or other people. Do not say “One time this happened to...”

Slide 12 notes

- Let them speak at their own pace, do not interrupt or rush, do not speak too rapidly, wait until she has finished before asking questions.
- Do not guess what the person is saying or jumping into conclusions after a few sentences.
- Questions, comments, and minimal encouragers can always wait until the survivor has had the opportunity to convey the entirety of what they want to say.
- Allowing the survivor to control the pace helps them to regain some control.
- Respect silence, wait, be patient and calm, give her time to think, do not pressure them to speak.

Slide 13 notes

- Acknowledge what they want, show your respect for their wishes, do not offer advice or opinions, try to solve problems for them.

Slide 14 notes

- A position that shows you are attentive and listening is called **SOLER**:
 - S** - Squarely face person
 - O** - use Open posture
 - L** - Lean a little toward the person
 - E** - make Eye contact
 - R** - Relax, keep it natural
- Show that you are interested and listening with your **body language** – with your posture, relaxed sitting, position, leaning forward, eye contact (appropriate to the culture), facial expression, gestures, nodding
- Pay attention to the **survivors' body language**, if you are sensing that they are uncomfortable in the conversation, ask to clarify.
- Don't look disinterested and distracted, look away from the person, cross your arms, stand above the patient, look at your watch, answer the telephone, look at a computer or write.

Slide 15 notes

- Before asking anything, remember the guiding principles of **confidentiality** and let the survivor know the limits of confidentiality. Talk about abuse only when you and the patient are alone. No one older than age 2 should overhear your conversation. Never discuss it if her husband or other family members or anyone else who has accompanied her—even a friend—may be able to overhear. You may need to think of an excuse to be able to see the woman alone, such as sending the person to do an errand or fill out a form. If her children are with her, ask a colleague to look after them while you talk.
- Encourage the survivor to keep talking if they wish.
- Phrase your questions as an **invitation to speak**.
 - ✓ “Would you like to tell me more?”
 - ✓ “What would you like to talk about?”, “Would you like to tell me more?”
 - ✓ “How can we help you today?”
 - ✓ “What would you like me to do for you today?”
 - ✓ “Is there anything that you need or are concerned about?”
- Help to identify and express needs and concerns.
- Ask about **needs and concerns**, give her the opportunity to say what kind of help she wants, learn what is most important
- Help survivors express their needs and ensure you understand their needs.
- When the patient are talking, pay attention to what she says about her needs or concerns. She may let you know about physical needs, emotional needs, economic needs, need for social support or concerns about safety.
- Check your understanding, **para-phrasing or repeating** what they say. **Acknowledge and reflect back** how the survivor is feeling to show you are listening and understood.
 - ✓ “You mentioned that you feel very frustrated.”
 - ✓ “You mentioned feeling worried about STIs...”
 - ✓ “It sounds like you are worried about your children.”
 - ✓ “I hear how difficult this has been for you”; “It sounds like a very scary situation” “It sounds as if you are feeling angry about that” “You seem upset” “It sounds to me that you are feeling helpless right now,” “You mentioned that you feel very frustrated.”

Slide 17 notes

- Avoid asking **leading questions**, such as “I would imagine that made you feel upset, didn't it?” “I imagine that you are angry, aren't you?” “Are you worried about being pregnant?”
- Avoid **compound questions** “So what would you like to see the nurse, and then go to the women's safe space?”. These can be confusing or overwhelming.



- Avoid asking “**why**” questions, such as “Why did you do that...?” They may sound accusing. Why didn’t you tell anyone? Why did you go there? Why did you do that?” “Why didn’t you fight them off?” “What did you learn from this that you might do differently in the future?” “Why won’t you report it to the police?”
- They may sound accusing or may the survivor feel judged or blamed

Slide 18 notes

- **Validating** lets a survivor know that their feelings are normal, that it is safe to express them, that she has a right to live without violence and fear, and that you believe what she says without judgement.
- Address feelings of blame, guilt, shame & fear.
- Avoid saying
 - ⊗ “I know how you feel.”
 - ⊗ “Everything will be okay.”
 - ⊗ “You should...”
 - ⊗ “Are you sure?”
- Provide further information about normal stress reactions to an experience of violence and exploring and strengthening positive coping methods in the handouts.



Activity 2.3 Validating statements



Slide 20 Summarize LIVES

- Explain that we will continue LIVES with the ES (Enhance their safety, support to connect with service) after providing care.



Activity 2.4 Listening, inquiring and validating (LIV) role play



DISCUSS

Ask what questions the participants have.



Slide 23 Summarize key messages