

## 1.3 Fears and motivations

### Objective

- Understand providers' concerns about caring for survivors of GBV
- Build on providers' motivations and strengths in addressing GBV

### Time:

15 minutes

### Instructions for facilitators

- Give each participant two pieces of paper.
- Put out two hats or boxes for participants to put their notes in. Label one "Fears" and the other "Motivations".
- Ask participants to write:
  - on one piece of paper something that motivates them to respond to intimate partner or sexual violence
  - on a second piece of paper one fear that they have about responding to intimate partner or sexual violence.
- Ask the participants to fold the pieces of paper and put them in the hats – fears in one, motivations in the other.
- Randomly pick out a response from the "fears" hat and read it to the group. Discuss the fear with the participants and ask how such a fear can be overcome.
- Do this two or three more times, depending on time.
- Next pick out a response from the "motivations" hat and read it to the group. Discuss the motivation with the participants and ask for suggestions of how the training can build on this.
- Do this two or three more times, depending on time.
- During a break, stick all responses on two separate flip charts (barriers/fears on one and motivations on the other), organized by broad themes/areas, to refer to throughout the training.
- If time permits, it is useful to include a short session towards the end of the course to revisit them, see how many were addressed throughout the training and discuss others.

### Resources needed:

- Paper (post-it notes or paper and tape), pens, flip chart and markers

### Instructions for participants

- Write:
  - One thing that motivates them to respond to intimate partner or sexual violence
  - On a second piece of paper, one fear they have about responding to intimate partner or sexual violence
- Fold the piece of paper and put them in two hats: one for motivations, one for fears

### **Key messages**

- Many providers have **concerns** about raising the topic of violence with their patients, as it may trigger their own memories of experiencing or witnessing abuse, or they may feel inadequate.
- However, data suggest that responding to women with empathy can be a **source of healing** for survivors.
- Many of us are passionate about providing care and assuring health and justice for our clients. This positive **energy** can fuel how we apply this training in our clinical practice.

*Adapted from WHO (2019) Caring for women subjected to violence: A WHO curriculum for training health-care providers*