

# PROTOCOL FOR THE SCOPING REVIEW OF INTERVENTIONS AND RECOMMENDATIONS FOR THE MANAGEMENT OF CASES OF GENDER-BASED VIOLENCE AGAINST WOMEN IN HUMANITARIAN CRISES

## 1. INTRODUCTION

Gender-based violence (GBV) against women is a public health and social problem that affects women globally and is greater in low- and middle-income countries. Humanitarian crises or emergencies, such as the SARS-VOC-2 pandemic, increase women's risk of GBV. According to the United Nations, worldwide measures of social isolation increase cases of GBV by 25%. Special situations, such as crises or humanitarian emergencies, require interventions to prevent and manage GBV. For example, Canada has ensured that domestic violence shelters provide care during quarantine, Italy has regulated that instead of the victim leaving the home, the abuser does, and South Africa has targeted support to accelerate the reach of community services to survivors of GBV, especially those living in the informal economy, as well as girls and women affected by the Human Immunodeficiency Virus and Acquired Immune Deficiency Syndrome.<sup>(1)</sup> In addition, there are strategies with technological assistance, as in the United States, where telehealth is used to detect victims of family violence with individualized interventions and a cultural approach<sup>(2)</sup>.

However, existing interventions need to be identified and systematized in order to recognize their components, review their quality, compare their results and learn from the barriers and facilitators of their implementation.

## 2. OBJETIVE

Identify interventions and recommendations for managing cases of gender-based violence against women in situations of confinement, states of emergency, natural disasters, epidemic outbreaks or other humanitarian crises.

## 3. INCLUSION CRITERIA

**3.1. *Types of studies:*** Experimental studies (randomised clinical trials and quasi-experimental studies (pre-post studies, non-randomised experiments, etc.) shall be included. Guidelines, policies and protocols that present recommendations for the management of cases of gender-based violence in humanitarian crises will also be included.

- 3.2. Interventions:** Included interventions will seek to prevent or manage situations of gender-based violence in the context of humanitarian crises, confinement or health emergencies. These interventions may target women and girls, or others.
- 3.3. Outcomes:** Studies informing outcomes related to the reporting and frequency of gender-based violence will be included. In addition, studies that have assessed the impact of interventions on perceptions or attitudes towards gender-based violence, women's economic and social empowerment, and women's autonomy will be included.
- 3.4. Time:** We will include studies from the year 2000 onward.

#### **4. EXCLUSION CRITERIA**

Documents in languages other than Spanish, English, Portuguese and French will be excluded, as well as studies that are not accessible in full text. Studies conducted on minorities (migrant women, refugees and prisoners) will also be excluded.

#### **5. SEARCH STRATEGY**

The search for scientific articles will be carried out in two phases. In the first phase a search will be performed in the following databases: PubMed; Global Index Medicus: African Index Medicus - AIM (AFRO/WHO), Latin American and Caribbean Scientific and Technical Literature - LILACS (AMRO-PAHO/WHO), Index Medicus for the Eastern Mediterranean Region - IMEMR (EMRO/WHO), Index Medicus for the South East Asian Region - IMSEAR (SEARO/WHO), Index Medicus for the Western Pacific Region - WPRIM (WPRO/WHO); EBSCO (PsycINFO), and Cochrane Central Register of Controlled Trials (CENTRAL). In the second phase, a citation review of the articles selected in the first phase will be conducted.

The search for health policies will include guidelines and recommendations from specialized agencies in databases such as TRIP DATABASE; governmental and non-governmental guidelines and recommendations at the international level; additionally, grey literature found on the web will also be included.

We will use a combination of the following key words in English and Spanish: [violence], [domestic violence], [gender-based violence], [intimate partner violence], [physical violence], [sexual violence], [involuntary restraint], [controlled restraint], [emergency situation], [emergency alert], [quarantine], [disaster], [disaster emergencies], [disaster victims], [disaster vulnerability], [disaster zone], [humanitarian crisis]. The search strategy for PubMed can be found in Annex 1.

## **6. DATA EXTRACTION**

### **6.1. Study selection process**

The articles will be selected by two independent researchers who will select potential articles of interest based on the title and abstract. Subsequently, full texts of these studies will be reviewed. Initially, the reviewers will make a calibration of their judgments using a small number of studies. Then, they will review the total number of studies. Disagreements will be resolved by consensus, and if not possible, by arbitration.

### **6.2. Data extraction process**

Data will be extracted by two independent researchers, who will use an Excel database. This database will include the following variables: i) country, number of participants enrolled, type of study, group intervened, context where the intervention was implemented, components of the intervention, alleged causality (hypotheses of how the intervention might work and the method of evaluation), ii) details of the process such as response time to the GBV case, relevance of the response, orientation processes, reporting processes, protection strategies, treatment of victims and actors involved and their responsibilities, and iii) information on the team that implemented the intervention (health workers, legal team, research team field workers). The database will be reformulated as the data extraction is done. Disagreements will be resolved by a third reviewer.

### **6.3. Assessment of evidence quality**

The following tools will be used to assess the risk of bias according to study design. For quasi-experimental studies and clinical trials, the Newcastle-Ottawa scale (NOS) and Cochrane Risk-of-bias tools will be used, respectively. The quality of the clinical practice guidelines will be evaluated with the Appraisal of Guidelines for Research and Evaluation Instrument version 2 (AGREE II). For guideline assessment, the evaluation of the recommendations will be carried out only for those which pass 60% in the methodological quality of AGREE II.

## **7. DATA SYTNHESIS STRATEGY**

Collected data will be presented in narrative form.

## 8. BIBLIOGRAPHY

1. United Nations Women. COVID-19 and ending violence against women and girls | Digital library: Publications | UN Women – Headquarters [Internet]. 2020 [cited 2020 Jun 17]. p. 10. Available from: <https://www.unwomen.org/en/digital-library/publications/2020/04/issue-brief-covid-19-and-ending-violence-against-women-and-girls>
2. Zero O, Geary M. COVID-19 and intimate partner violence: A call to action. United States; 2020 Jun.

## **ANNEX 1. Preliminary search strategy for PubMed**

**Search: ("Gender-Based Violence"[Mesh] OR "Domestic Violence"[Mesh] OR "Spouse Abuse"[Mesh] OR "Sex Offenses"[Mesh] OR "Intimate Partner Violence"[Mesh] OR "Physical Abuse"[Mesh] OR "Gender-Based Violence"[tiab] OR "Domestic Violence"[tiab] OR "Spouse Abuse"[tiab] OR "Sex Offenses"[tiab] OR "Intimate Partner Violence"[tiab] OR "Physical Abuse"[tiab] OR "Battered Women"[Mesh] OR "Women's Rights"[Mesh] OR home-based violence[tiab] OR intimate partner violence[tiab] OR ((psychological[tiab] OR emotional[tiab] OR verbal[tiab]) AND violence[tiab] AND women[tiab])) AND ("Disease Outbreaks"[Mesh] OR "Epidemics"[Mesh] OR "Pandemics"[Mesh] OR "Outbreak"[tiab] OR "Outbreaks"[tiab] OR Epidemic[tiab] OR Epidemics[tiab] OR "Pandemic"[tiab] OR "Pandemics"[tiab] OR "Coronavirus Infections"[Mesh] OR "SARS Virus"[Mesh] OR "COVID-19"[Supplementary Concept] OR "severe acute respiratory syndrome coronavirus 2"[Supplementary Concept] OR "Hemorrhagic Fever, Ebola"[Mesh] OR "Middle East Respiratory Syndrome Coronavirus"[Mesh] OR "Influenza, human" [Mesh] OR "Influenza A Virus, H1N1 Subtype" [Mesh] OR "Influenza A Virus, H5N1 Subtype" [Mesh] OR "Confinement" OR "Quarantine"[Mesh] OR "Social Isolation"[Mesh] OR "Patient Isolation"[Mesh] OR "Disasters"[Mesh] OR "Natural Disasters"[Mesh] OR "Disaster Victims"[Mesh]) Filters: from 2000 - 2020 Sort by: Most Recent**