

Violence against women in resource-limited settings: A WHO behavioral intervention

15 August 2017



Credit: CC0 Public Domain

A randomized controlled trial has shown that a brief behavioral treatment delivered by community lay workers significantly reduced psychological distress in women exposed to gender-based violence. In a study published in *PLOS Medicine*, Richard A. Bryant of the University of New South Wales, Australia, and colleagues tested the five-session intervention on 421 women in Kenya.

Gender-based violence, which includes actual or threatened sexual or nonsexual violence committed by an intimate partner or others, has been experienced by more than a third of [women](#) worldwide. Its adverse impacts on physical and mental health make it a global health issue. The World Health Organization has developed Problem Management Plus (PM+) as a brief 5-session intervention to treat people experiencing psychological distress following adversity. Because lay community health workers can be trained to deliver PM+, it is particularly applicable in resource-limited settings.

This study, in a peri-urban area of Nairobi, Kenya, randomly assigned 421 women who displayed

distress and impaired functioning to receive either 5 individual sessions of PM+ or enhanced usual care (EUC). The primary outcome was psychological distress as measured by total score on the 12-item General Health Questionnaire (GHQ-12) assessed at 3 months after treatment. Assessments by investigators who were blind to the treatment assignment indicated that women who received PM+ reported significantly less [psychological distress](#), with a moderate effect relative to EUC. The difference between PM+ and EUC in the change from baseline to 3 months on the GHQ-12 was 3.33 (95% CI 1.86 - 4.79, $P = 0.001$) in favour of PM+.

Further study is needed to evaluate the sustainability of PM+ in the community so that survivors of gender-based violence can be safely identified and treated without stigma. Limitations of the study include no long-term follow-up and a reliance on self-report rather than structured interview data. The PM+ manual is available for dissemination at the [WHO website](#).

In an accompanying Perspective, Alexander C. Tsai of Harvard Medical School, USA, says: "The potential widespread deployment of PM+ stands at the intersection of two vital issues relevant to women's health: [mental health](#) and interpersonal violence. Until the large-scale structural forces that give rise to health disparities affecting vulnerable populations can be eliminated ... the [health](#) system will continue to play a key role in the multisectoral response to violence against women in resource-limited settings."

More information: Bryant RA, Schafer A, Dawson KS, Anjuri D, Mulili C, Ndogoni L, et al. (2017) Effectiveness of a brief behavioural intervention on psychological distress among women with a history of gender-based violence in urban Kenya: A randomised clinical trial. *PLoS Med* 14(8): e1002371. doi.org/10.1371/journal.pmed.1002371

Provided by Public Library of Science

APA citation: Violence against women in resource-limited settings: A WHO behavioral intervention (2017, August 15) retrieved 19 November 2019 from <https://medicalxpress.com/news/2017-08-violence-women-resource-limited-behavioral-intervention.html>

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.