Pre/post-test for Literate CHWs

Community Health Worker Evaluation Tools

The following tools are enclosed:

- 1. Pre/post-test for Literate CHWs (Modules 2-4; 5-6; Advanced Module 8)
- 2. Pre/Post-test for Non-literate CHWs (Modules 2-4)
- 3. Answer key to Pre/post-test
- 4. Clinical assessment tool for CHWs 2 and 3 (adult survivor)
- 5. Three month assessment tool for CHWs 2 and 3
- 6. Answer key to three month assessment tool for CHWs 2 and 3
- 7. Three month clinical assessment tool for CHWs 2 and 3 (child survivor)

CHWs should be administered different sections of the test per their level:

CHW₁

Pre-test:

- 1. Pre-test for Literate CHWs (Modules 2-4)
- 2. Pre-test for Non-literate CHWs (Modules 2-4)

Post-test:

- 1. Post-test for Literate CHWs (Modules 2-4)
- 2. Post-test for Non-literate CHWs (Modules 2-4)

CHW 2

Pre-test

1. Pre-test for Literate CHWs (Modules 2-4; 5-6)

Post-test

- 1. Post-test for Literate CHWs (Modules 2-4; 5-6)
- 4. Clinical assessment tool (adult survivor)

Three month evaluation

- 5. Three month evaluation tools
- 6. Three month clinical evaluation tool (adult or child survivor)

CHW₃

Pre-test

1. Pre-test for Literate CHWs (Modules 2-4; 5-6; Advanced Module 8)

Post-test

- 1. Post-test for Literate CHWs (Modules 2-4; 5-6; Advanced Module 8)
- 4. Clinical assessment tool (adult survivor)

Three month evaluation

- 5. Three month evaluation tools
- 6. Three month clinical evaluation tool (adult or child survivor)

Passing scores at post-test and three months are as follows:

CHW 1:

• At least 80% on the Module 2-4 post-test (1)

CHW 2:

- At least 80% on the Module 2-4 post-test (1)
- At least 80% on the Module 2-6 post-test (1)
- At least 70% on the clinical evaluation (end of training and three months) (4)
- At least 70% on three month evaluation tool (separately for clinical assessment) (5, 4, 6)

CHW 3:

- At least 50% on the Module 2-4 post-test (1)
- Average of 80% on the Module 2-6 and Advanced Module 8 post-tests (1)
- At least 70% on the clinical assessment (end of training and three months) (4)
- At least 70% on three month evaluation tool (separately for clinical assessment) (5, 4, 6)

Note that the evaluation questions can be simplified significantly if pre-packaged treatment packets will be made available for CHWs in the pilot.

Pre/post-test for Literate CHWs

Pre-/post-test (literate)

Pre-/Post-test

	ase circle the appropriate answer(s) to each question. If you have any questions, please raise your and to ask the facilitator.
1.	"Sexual violence" is a term used when someone is forced to have sex against their will. A. True B. False
2.	A survivor of sexual violence may have deserved the attack because of the way they dressed or acted. A. True B. False
3.	If a woman is forced to have sex by her husband, that is not sexual violence. A. True B. False

- 5. A person with a disability cannot be a target of sexual violence.
 - A. True

A. TrueB. False

- B. False
- 6. "Corrective rape" can help a gay person become straight.

4. Men and boys cannot be a target of sexual violence.

- A. True
- B. False
- 7. Principles that are important when caring for survivors of sexual violence include (circle all that apply):
 - A. Ensuring the survivor's physical safety.
 - B. Guaranteeing the survivor's confidentiality.
 - C. Respecting the wishes, the rights and the dignity of the survivor, and if a child, considering what is best for the child.
 - D. Treating survivors equally (non-discrimination)

- 8. Which of the following is a good way to communicate with a survivor?
 - A. Ask open ended questions: "tell me about what happened."
 - B. Ask why questions: "why didn't you tell anyone?"
 - C. Ask leading questions: "are you afraid you might be pregnant?"
- 9. When communicating with a survivor with intellectual disabilities, you should (circle all that apply):
 - A. Speak only with the survivor's parents or caregivers.
 - B. Give information in short, simple messages to the survivor.
- 10. What is the purpose of obtaining informed consent (select all that apply)?
 - A. To provide the survivor with an explanation of what you will do and how you can treat.
 - B. To ensure the survivor understands all of what you will do and how you can treat.
 - C. To give the survivor a choice of what treatment to receive.
- 11. The survivor must give you approval for you to share their information with anyone.
 - A. True
 - B. False
- 12. What is the correct way of getting the survivor's approval for you to connect them to services that could help them?
 - A. Giving the survivor information on what services are available and allowing them to choose what they would like for themself.
 - B. Advising the survivor on the services they should receive and choosing for them because you know better.
 - C. Advising the survivor on the services they should receive and asking the survivor's spouse to choose for them since they would know what is best for them.
- 13. When caring for a survivor of sexual violence, it is important to be caring and supportive and not tell others what happened because (circle all that apply):
 - A. It will help her feel safe again.
 - B. It will help her to tell her story.
 - C. All survivors should be treated this way.
- 14. If a survivor of sexual violence comes to you for help, the first thing you should do is to take them to the police.
 - A. True
 - B. False
- 15. It is your job as the community health worker to prove that rape took place.
 - A. True
 - B. False

Pre/post-test for Literate CHWs

- 16. If a woman or girl has experienced sexual violence, what can she prevent if she seeks health care as soon as possible (circle all that apply)?
 - A. Unwanted pregnancy
 - B. Sexually transmitted infections
 - C. HIV
 - D. Tetanus
 - E. Hepatitis B
- 17. Conditions that someone shows or tells you that need immediate referral to a higher-level health facility include (select all that apply):
 - A. Abdominal pain and tenderness
 - B. Bleeding from the genital area (vagina or anus)
 - C. Object in the vagina or anus
 - D. Heavy bleeding from other parts of the body
 - E. Vomiting blood
 - F. Altered mental state or confusion
 - H. Don't know
- 18. If you notice a survivor is bleeding heavily, you or the survivor can cover the wound with a clean cloth, press down and apply pressure on the wound until the person can be referred to a higher-level health facility.
 - A. True
 - B. False
- 19. If there is an object sticking out of the wound, do not remove it. You should leave it there and try to stop the object from moving with clean pads and bandage.
 - A. True
 - B. False
- 20. For a woman, girl, or transgender male survivor to prevent unwanted pregnancy after sexual violence, they need to take certain medications within:
 - A. Two full days of the assault
 - B. Three full days of the assault
 - C. Five full days of the assault
- 21. For a survivor to prevent HIV after sexual violence, they need to begin taking certain medicines within:
 - A. Two full days of the assault
 - B. Three full days of the assault
 - C. Five full days of the assault

- 22. HIV is spread by (circle all that apply):
 - A. Having sex without using a condom.
 - B. Touching, hugging, or kissing someone with HIV.
 - C. Using unclean needles or razor blades.
 - D. Sharing food or dishes with someone who has HIV.
 - E. Touching blood from someone who has HIV when you have an open cut or sore on your hand.
 - F. Sharing a bed or clothing with someone who has HIV.
 - G. Sharing latrines with someone who has HIV.
 - H. An infected mother to her baby during pregnancy, childbirth, or breastfeeding, if she is not taking any medicines to prevent HIV from infecting her baby.
 - I. Insects that bite someone with HIV, and then someone without HIV.
 - J. Receiving blood after bleeding heavily, where the blood has not been tested.
- 23. When teaching about sexual violence in your daily work, it is important to share (circle all that apply):
 - A. Why it is important to seek health care after sexual violence.
 - B. Survivors can receive care without anyone else finding out about the assault.
 - C. Nothing can be done to help the survivor since sexual violence is shameful.
 - D. It is the survivor's fault for sexual violence happening to them.

STOP here if your facilitator says you do not need to complete the rest of the test.

- 24. What is important information to collect when taking the survivor's history?
 - A. When the incident took place.
 - B. If the survivor is married.
 - C. Name of the person who forced the survivor to have sex.
- 25. Antibiotics are used to prevent and treat sexually transmitted infections.
 - A. True
 - B. False
- 26. Before administering medication, it is important to check (select all that apply):
 - A. What the medicine is called.
 - B. What to do if the survivor is already pregnant, is breast-feeding, or has an allergy
 - C. When the medicine expires.
 - D. What side effects the medicine can cause and how the person taking the medicine can address them.
 - E. How often the survivor should take the medicine.
 - F. How the medicines should look and be stored (in a cool, dry place, out of reach of children).
- 27. Pregnant women must receive special antibiotic medicines that are safe for pregnancy.
 - A. True
 - B. False

Pre/post-test for Literate CHWs

28. A survivor who is	pregnant is eligible for	r a medication	abortion up to	12 weeks into their
pregnancy.				

- A. True
- B. False
- 29. If the survivor is more than 12 weeks pregnant, there is nothing that can be done, and the survivor will just have to keep the pregnancy.
 - A. True
 - B. False
- 30. A pregnancy test is required before providing pills to prevent unwanted pregnancy.
 - A. True
 - B. False
- 31. Emergency contraceptive pills may cause abortion or harm an existing pregnancy.
 - A. True
 - B. False
- 32. A girl who is showing signs of becoming an adult but has not started having her period may receive emergency contraception.
 - A. True
 - B. False
- 33. A transgender male survivor can still be at risk of pregnancy if they have a uterus and ovaries, even if they are on testosterone therapy.
 - A. True
 - B. False
- 34. HIV prevention medicines are safe for pregnant women and child survivors of sexual violence.
 - A. True
 - B. False
- 35. For how long must the survivor take medicines to prevent HIV?
 - A. For 7 days
 - B. For 28 days
 - C. For 3 months
- 36. An HIV test is required to start medicines to prevent HIV.
 - A. True
 - B. False
- 37. If an HIV test is available, it is okay to skip counseling and simply administer the test.
 - A. True
 - B. False

- 38. If the survivor is experiencing pain in their abdomen after being sexually assaulted, you should:
 - A. Let them know it will eventually go away and tell them not to worry.
 - B. Refer them to a higher-level health facility.
- 39. To prevent infection, clean a minor wound with:
 - A. Alcohol
 - B. Soap and water
 - C. Mud
- 40. List three common emotional reactions to sexual violence a survivor may experience.

Α.	
В.	

- C. _____
- 41. A survivor presents with breaks in the skin but does not know when the injuries occurred or if they received a shot to prevent tetanus (lockjaw) in the past. Should they receive a tetanus injection?
 - A. Yes
 - B. No
- 42. At a minimum, when should survivors be asked to return for follow-up care?
 - A. 2 weeks; 1 week if taking PEP
 - B. 6 and 12 weeks
 - C. Survivors of sexual violence do not require follow up
- 43. To care for yourself and manage your own stress when working with survivors of sexual violence, it may be helpful to:
 - A. Talk about your experiences with a supervisor, another community health worker, or someone else you trust.
 - B. Learn to think about and accept what you did well, what did not go very well, and the limits of what you can do.
 - C. Take some time to rest and relax.
 - D. All of the above.

STOP here if your facilitator says you do not need to complete the rest of the test.

Pre/post-test for Literate CHWs

	_	doses
45.	How -	w many doses of Hepatitis B vaccine are required to complete the full series? doses
46.	Infe	ction in the health care setting can be prevented by:
	А. В.	Washing your hands with soap and running water before and after you provide care, and wearing clean gloves when touching any wound or fluid from the survivor. Washing and disinfecting all tools that will be reused.

C. Not reusing needles and disposing them properly so that children and animals cannot

44. How many doses of tetanus vaccine are required to complete the full series?

- find them.

 D. All of the above
- 47. Signs of a sexually transmitted infection are (select all that apply):
 - A. Unusual vaginal discharge in terms of amount, smell, or color.
 - B. Itching of the vagina or penis.
 - C. Pain while passing urine.
 - D. Rash, sores, or ulcers in the genital area.
- 48. Signs of an allergic reaction to medicines are:
 - A. Itching
 - B. Red spots
 - C. Swollen mouth and tongue
 - D. Difficulty breathing
 - E. All of the above

End. Thank you!

2. Pre/post-test (non-literate)

Pre/Post-test*

Nar	ame:	
Rea	ead each question to participants and give	e them time to circle the correct image(s).
1.	. "Sexual violence" is a term used when s	someone is forced to have sex against their own will.
	True	False
2.	 A survivor of sexual violence may have or acted. 	e deserved the attack because of the way they dressed
	True	False
3.	3. If a woman is forced to have sex by he	r husband, that is not sexual violence.
	True	False
4.	Men and boys cannot be a target of se.	xual violence.
	True	False
5.	5. A person with a disability cannot be a t	arget of sexual violence.
	True	False
6.	6. "Corrective rape" can help a gay person	n become straight.
	(a)	
	True	False

^{*}Some images adapted By Stacey Patino from Hesperian Foundation, A Book for Midwives: Care for pregnancy, birth and women's health, updated 2010, among other Hesperian resources.

Pre/post-test for Literate CHWs

7. Principles that are important when caring for survivors of sexual violence include (circle all that apply):



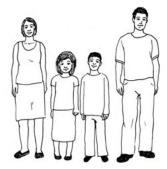
Ensuring the survivor's physical safety



Guaranteeing the survivor's confidentiality



Respecting the wishes, the rights and the dignity of the survivor (and if a child, considering what is best for the child.)



Treating survivors equally (non-discrimination)

8. Which of the following is a good way to communicate with a survivor?



Ask open ended questions: "tell me about what happened."



Ask why questions: "why didn't you tell anyone?"



Ask leading questions: "are you afraid you might be pregnant?"

9. When communicating with a survivor with intellectual disabilities, you should:



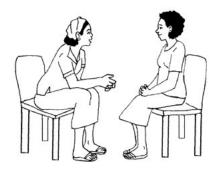
Speak only to the survivor's parents or caregivers



Give information in short, simple messages to the survivor

Pre/post-test for Literate CHWs

10. What is the purpose of obtaining informed consent (select all that apply):



To provide the survivor with an explanation of what you will do and how you can treat.



To ensure the survivor understands all of what you will do and how you can treat.



To give the survivor a choice of what treatment to receive.

11. It is your job as the community health worker to prove that rape took place.





12. What is the correct way of getting the survivor's approval for you to connect them to services that could help them?



Giving the survivor information on services available and allowing them to choose what they would like for themself.



Advising the survivor on the services they should receive and choosing for them because you know better.



Advising the survivor on the services they should receive and asking them the survivor's spouse to choose for them since they would know what is best for them.

Pre/post-test for Literate CHWs

13. When caring for a survivor of sexual violence, it is important to be caring and supportive and not tell others what happened because (circle all that apply):



It will help them feel safe again.



It will help them tell their story.



All survivors should be treated this way.

14. If a survivor of sexual violence comes to you for help, the first thing you should do is to take them to the police.



15. It is your job as the community health worker to prove that a rape took place.



16. If a woman or girl has experienced sexual violence, what can she prevent if she seeks health care as soon as possible (circle all that apply)?



Unwanted pregnancy



Sexually transmitted infections



HIV



Tetanus



Hepatitis B

Pre/post-test for Literate CHWs

17. Conditions that someone shows or tells you that need immediate referral to higher level health facility include (select all that apply):



Abdominal pain and tenderness



Bleeding from the genital area



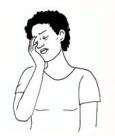
Object in the vagina or anus



Heavy bleeding from other parts of the body



Vomiting blood



Altered mental state or confusion



Don't know

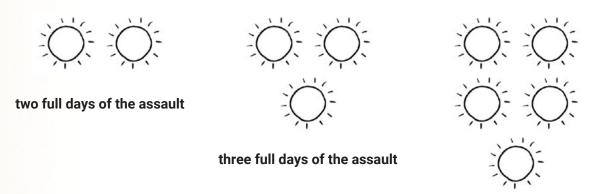
18. If you notice a survivor is bleeding heavily, you or the survivor can cover the wound with a clean cloth, press down firmly and apply pressure on the wound until the person can be referred.



19. If there is an object sticking out of the wound, do not remove it. You should leave it there and try to stop the object from moving with clean pads and bandage.



20. For a woman, girl, or transgender male survivor to prevent unwanted pregnancy after sexual violence, they need to take certain medicines within:



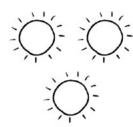
five full days of the assault

Pre/post-test for Literate CHWs

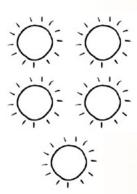
21. For a survivor to prevent HIV after sexual violence, they need to begin taking certain medicines within:



two full days of the assault



three full days of the assault



five full days of the assault

22. HIV is spread by (circle all that apply):



Having sex without using a condom



Receiving blood that has not been tested



Infected mother to her baby during pregnancy, childbirth or breastfeeding



Sharing latrine with someone who has HIV



Using unclean needles or razor blades



Sharing clothing with someone who has HIV



Touching blood from someone who has HIV



Insects that bite someone with HIV then someone without



Touching, hugging or kissing someone with HIV



Sharing food or dishes with someone who has HIV

23. When teaching about sexual violence in the community, it is important to share:



Why it is important to get health care after sexual violence



Survivors can receive care without anyone finding out about the assault



Nothing can be done to help the survivor since sexual violence is shameful



It is the survivor's fault for sexual violence happening to her

END. Thank you!

Pre/post-test for Literate CHWs

3. Pre/post-test Answer key

Name:		

Give 1 point for complete correct answer; 0.5 points for incomplete correct answer. Give 1 point each for open-ended responses (Q. 40).

Passing score for section 1: 11/23 (50%)
Passing score for section 2: 16/20 (80%)
Passing score for section 3: 4/5 (80%)

Passing score for combined sections 2 and 3: 20/25 (80%)

Please circle the appropriate answer(s) to each question. If you have any questions, please raise your hand to ask the facilitator.

- 1. "Sexual violence" is a term used when someone is forced to have sex against their own will.
 - A. True
 - B. False

Answer: True; sexual violence is when any person—regardless of relationship to the victim—uses force, pressure, or threats to attempt a sexual act or perform a sexual act against someone's will.

- 2. A survivor of sexual violence may have deserved the attack because of the way they dressed or acted.
 - A. True
 - B. False

Answer: False; nobody deserves to be sexually assaulted no matter how they dress or act. Sexual violence is not about sexual attraction or seduction, but violence.

- 3. If a woman is forced to have sex by her husband, that is not sexual violence.
 - A. True
 - B. False

Answer: False; anytime someone is forced to have sex against their will, it is sexual violence, whether the attacker is a husband, boyfriend, same-sex partner, teacher, or a stranger.

- 4. Men and boys cannot be a target of sexual violence.
 - A. True
 - B. False

Answer: False; sexual violence can happen to anyone, including men and boys.

- 5. A person with a disability cannot be a target of sexual violence.
 - A. True
 - B. False

Answer: False; sexual violence can happen to anyone, and persons with disabilities are particularly at risk. Persons with disabilities also have a right to freedom from exploitation, violence, and abuse.

- 6. "Corrective rape" can help a gay person become straight.
 - A. True
 - B. False

Answer: False; it is never acceptable to think someone deserves to experience intercourse against their will. Forcing someone to have intercourse to change their sexual orientation or gender identity is a violation of their human rights.

- 7. Principles that are important when caring for survivors of sexual violence include (circle all that apply):
 - A. Ensuring the survivor's physical safety.
 - B. Guaranteeing the survivor's confidentiality.
 - C. Respecting the wishes, the rights and the dignity of the survivor, and if a child, considering what is best for the child.
 - D. Treating survivors equally (non-discrimination)

Answer: A-D; all of the above are important guiding principles to consider when caring for survivors.

- 8. Which of the following is a good way to communicate with a survivor?
 - A. Ask open ended questions: "tell me about what happened."
 - B. Ask why questions: "why didn't you tell anyone?"
 - C. Ask leading questions: "are you afraid you might be pregnant?"

Answer: A; asking "why" questions often puts the survivor on the defensive and might sound accusatory. Asking leading questions may cause additional anxiety and does not provide space for the survivor to communicate in their own terms.

- 9. When communicating with a survivor with intellectual disabilities, you should (circle all that apply):
 - A. Speak only with the survivor's parents or caregivers.
 - B. Give information in short, simple messages to the survivor.

Answer: B; as with anyone, always communicate directly with survivors with disabilities. You should always ask whether the survivor wishes to be spoken to alone and/or with someone they trust, and make sure to respect the survivor's wishes.

Pre/post-test for Literate CHWs

- 10. What is the purpose of obtaining informed consent (select all that apply)?
 - A. To provide the survivor with an explanation of what you will do and how you can treat.
 - B. To ensure the survivor understands all of what you will do and how you can treat.
 - C. To give the survivor a choice of what treatment to receive.

Answer: A-C; all of the above illustrate the reason why it is important to obtain informed consent before working with a survivor.

- 11. The survivor must give you approval for you to share their information with anyone.
 - A. True
 - B. False

Answer: A; this statement is true. Part of informed consent means informing the survivor that you may need to share their information with others who can provide services, but only with the survivor's permission.

- 12. What is the correct way of getting the survivor's approval for you to connect them to services that could help them?
 - A. Giving the survivor information on what services are available and allowing them to choose what they would like for themself.
 - B. Advising the survivor on the services they should receive and choosing for them because you know better.
 - C. Advising the survivor on the services they should receive and asking the survivor's spouse to choose for them since they would know what is best for them.

Answer: A; you should provide the survivor with information about all available services and their quality. This will help the survivor choose the care and support that they would like.

- 13. When caring for a survivor of sexual violence, it is important to be caring and supportive and not tell others what happened because (circle all that apply):
 - A. It will help them feel safe again.
 - B. It will help them to tell their story.
 - C. All survivors should be treated this way.

Answer: A-C; when communicating with a survivor, it is important to show that you believe the survivor, that you do not question the story or blame them, and that you respect their privacy.

- 14. If a survivor of sexual violence comes to you for help, the first thing you should do is to take them to the police.
 - A. True
 - B. False

Answer: False; if the survivor discloses that they have been a victim of sexual violence, you should treat them with the same guiding principles and show compassion, confidentiality, and competence. Police officers should never be present in the room where care by a CHW or other healthcare worker is provided.

- 15. It is your job as the community health worker to prove that rape took place.
 - A. True
 - B. False

Answer: False; as a CHW, it is not your responsibility, nor any health provider's responsibility, to determine whether or not a survivor has been raped. That is a legal determination.

- 16. If a woman, girl, or transgender male survivor has experienced sexual violence, what can they prevent if they seek health care as soon as possible (circle all that apply)?
 - A. Unwanted pregnancy
 - B. Sexually transmitted infections
 - C. HIV
 - D. Tetanus
 - E. Hepatitis B

Answer: All of the above; the effectiveness of treatment for these conditions will depend on how soon after an assault the survivor seeks care. The earlier a survivor receives medication, the more likely it is to be effective.

- 17. Conditions that someone shows or tells you that need immediate referral to a higher-level health facility include (select all that apply):
 - A. Abdominal pain and tenderness
 - B. Bleeding from the genital area (vagina or anus)
 - C. Object in the vagina or anus
 - D. Heavy bleeding from other parts of the body
 - E. Vomiting blood
 - F. Altered mental state or confusion
 - G. Don't know

Answer: A-F; anyone presenting with the symptoms listed above in A-F should be referred immediately to a higher-level health care facility. These conditions are dangerous and require immediate medical attention.

- 18. If you notice a survivor is bleeding heavily, you or the survivor can cover the wound with a clean cloth, press down, and apply pressure on the wound until the person can be referred to a higher-level health facility.
 - A. True
 - B. False

Answer: True; if a survivor is bleeding heavily: arrange for referral to higher-level health facility. Wash your hands with soap and water, and where gloves if they are available. Ask the survivor to apply pressure to the wound themself and help them lie down. Cover the wound with a clean cloth; if you are not wearing gloves, avoid direct contact with the person's blood. If there are no gloves, use a plastic bag as a barrier, and press down and apply pressure on the wound. Apply the bandage firmly enough to stop the bleeding but not so tight as to cut off circulation. If the bleeding does not stop, press on the wound more firmly and apply more bandages, and do not remove the first dressings. Wash your hands with soap and water after giving care.

Pre/post-test for Literate CHWs

- 19. If there is an object sticking out of the wound, do not remove it. You should leave it there and try to stop the object from moving with clean pads and bandage.
 - A. True
 - B. False

Answer: A; this statement is true. Any object noted sticking out from a wound should be kept in place and bandaged until referral to a higherlevel health facility is available. If bleeding does not stop, apply more bandages. Do not remove the first dressings.

- 20. For a woman, girl, or transgender male survivor to prevent unwanted pregnancy after sexual violence, she needs to take certain medicines within:
 - A. Two full days of the assault
 - B. Three full days of the assault
 - C. Five full days of the assault

Answer: C; a survivor of sexual violence who is of reproductive age (menstruating or adolescents who have developed breast buds), has a uterus and ovaries, and presents for care within 5 full days (120 hours) after vaginal or anal penetration should receive emergency contraception pills to prevent unintended pregnancy.

- 21. For a survivor to prevent HIV after sexual violence, they need to begin taking certain medicines within:
 - A. Two full days of the assault
 - B. Three full days of the assault
 - C. Five full days of the assault

Answer: B; HIV post-exposure prophylaxis, or PEP, is a medication that can reduce the risk of HIV transmission after sexual violence if given promptly. PEP must be started within 72 hours, or 3 full days, after a survivor experiences sexual violence. PEP is more effective the sooner it is started.

- 22. HIV is spread by (circle all that apply):
 - A. Having sex without using a condom.
 - B. Touching, hugging, or kissing someone with HIV.
 - C. Using unclean needles or razor blades.
 - D. Sharing food or dishes with someone who has HIV.
 - E. Touching blood from someone who has HIV when you have an open cut or sore on your hand.
 - F. Sharing a bed or clothing with someone who has HIV.
 - G. Sharing latrines with someone who has HIV.
 - H. An infected mother to her baby during pregnancy, childbirth, or breastfeeding, if she is not taking any medicines to prevent HIV from infecting her baby.
 - I. Insects that bite someone with HIV, and then someone without HIV.
 - J. Receiving blood after bleeding heavily, where the blood has not been tested.

Answers: A, C, E, H, J

- 23. When teaching about sexual violence in your daily work, it is important to share (circle all that apply):
 - A. Why it is important to seek health care after sexual violence.
 - B. Survivors can receive care without anyone else finding out about the assault.
 - C. Nothing can be done to help the survivor since sexual violence is shameful.
 - D. It is the survivor's fault for sexual violence happening to them.

Answer: A, B; sexual violence is never the survivor's fault. Health care after an assault helps a survivor prevent further health consequences and may be provided without anyone else finding out about the assault. In some instances, a survivor may hesitate to seek health care given assumptions that any act to seek care is associated with seeking justice. It can be helpful to reinforce that health care and legal/justice action can be considered separately; as CHWs, the most important health message to share is the benefits to seeking timely care and where services can be accessed.

STOP here if your facilitator says you do not need to complete the rest of the test.

- 24. What is important information to collect when taking the survivor's history?
 - A. When the incident took place.
 - B. If the survivor is married.
 - C. Name of the person who forced the survivor to have sex.

Answer: A; it is important to note the date and time when the survivor experienced sexual violence, as this information will guide whether or not certain treatments (such as EC and PEP) will be given. Other information, such as a survivor's age, extent of physical violence, penetration, current signs and symptoms, and medical history is also collected. Neither the name of the survivor nor perpetrator is usually collected for security reasons.

- 25. Antibiotics are used to prevent and treat sexually transmitted infections.
 - A. True
 - B. False

Answer: A; this statement is true. Antibiotics are used to prevent and treat certain sexually transmitted infections.

- 26. Before administering medication, it is important to check (select all that apply):
 - A. What the medicine is called.
 - B. What to do if the survivor is already pregnant, is breast-feeding, or has an allergy
 - C. When the medicine expires.
 - D. What side effects the medicine can cause and how the person taking the medicine can address them.
 - E. How often the survivor should take the medicine.

Pre/post-test for Literate CHWs

F. How the medicines should look and be stored (in a cool, dry place, out of reach of children).

Answer: A-F; all of the above are important considerations in the safe administration of medicine. It is very important to inform survivors to finish all of their medicine. Medicine should be kept in a cool, dry place and out of reach from children. Pills that are starting to fall apart or change color, or capsules that have stuck together or changed shape, should not be given.

- 27. Pregnant women must receive special antibiotic medicines that are safe for pregnancy.
 - A. True
 - B. False

Answer: A; true. It is important to ask the survivor if they are pregnant because they may need to take special antibiotic medicines that are safe for women who are pregnant or breast-feeding.

- 28. A survivor who is pregnant is eligible for a medication abortion up to 12 weeks into their pregnancy.
 - A. True
 - B. False

Answer: A; if the pregnancy is less than 12 weeks and 0 days, the survivor is within the window to undergo a medication abortion if they so choose. They can receive a combination of mifepristone and misoprostol, or misoprostol alone.

- 29. If the survivor is more than 12 weeks pregnant, there is nothing that can be done, and the survivor will just have to keep the pregnancy.
 - A. True
 - B. False

Answer: False; CHWs should refer any pregnancy beyond 12 weeks and 0 days to a health facility for available options if the survivor does not wish to keep the pregnancy. If the pregnancy is between 12 and 14 weeks and 0 days, the survivor can undergo manual vacuum aspiration. If the pregnancy is beyond 14 weeks, the possibility of termination will be based on whether a referral is available for dilatation and evacuation (D&E) or misoprostol-based methods.

- 30. A pregnancy test is required before providing pills to prevent unwanted pregnancy.
 - A. True
 - B. False

Answer: B; this statement is false. If the pregnancy is not yet known and a pregnant woman takes EC pills, it will not harm the pregnancy. EC is not a method of abortion. If you know that a woman is pregnant, you do not give EC pills, because they will have no effect.

- 31. Emergency contraceptive pills may cause abortion or harm an existing pregnancy.
 - A. True
 - B. False

Answer: B; this statement is false. EC pills will not harm the pregnancy and are not a method of abortion.

- 32. A girl who is showing signs of becoming an adult but has not started having her period may receive emergency contraception.
 - A. True
 - B. False

Answer: A; this statement is true. A female survivor of sexual violence who is of reproductive age (menstruating women, or adolescents who have developed breast buds) may receive EC.

- 33. A transgender male survivor can still be at risk of pregnancy if they have a uterus and ovaries, even if they are on testosterone therapy.
 - A. True
 - B. False

Answer: A; true. A person taking testosterone may still ovulate and be at risk of pregnancy. As such, transgender male survivors should be given EC if they still have their ovaries and uterus, even if they are no longer menstruating as a result of testosterone therapy.

- 34. HIV prevention medicines are safe for pregnant women and child survivors of sexual violence.
 - A. True
 - B. False

Answer: A; this statement is true. Pregnant women and children may be eligible to receive PEP. The dose is adjusted for children based on age and weight.

- 35. For how long must the survivor take medicines to prevent HIV?
 - A. For 7 days
 - B. For 28 days
 - C. For 3 months

Answer: B; PEP consists of antiretroviral (ARV) drugs taken daily for 28 days.

- 36. An HIV test is required to start medicines to prevent HIV.
 - A. True
 - B. False

Answer: B, this statement is false. While it is not required that survivors are tested for HIV to be offered PEP, explain to participants that they should encourage survivors to go to a health center, if available, for an HIV test since they will no longer need to take PEP and need to access further health care if they test positive for HIV.

- 37. If an HIV test is available, it is okay to skip counseling and simply administer the test.
 - A. True

Pre/post-test for Literate CHWs

B. False

Answer: B; false. An HIV test should always be voluntary, and consist of consent, confidentiality, counseling, conveying the correct test results, and connection to care, treatment, and prevention services. When providing counseling, you should explain the advantages and disadvantages of knowing one's HIV status. Since AIDS is a treatable illness but it is not curable, counseling is an important part of an HIV test.

- 38. If the survivor is experiencing pain in their abdomen after being sexually assaulted, you should:
 - A. Let them know it will eventually go away and tell them not to worry.
 - B. Refer them to a higher-level health facility.

Answer: B; pain in the abdomen or belly may be the sign of an infection or other serious medical condition that requires immediate referral to a higher-level health facility.

- 39. To prevent infection, clean a minor wound with:
 - A. Alcohol
 - B. Soap and water
 - C. Mud

Answer: B; any wounds that do not require a referral to a higher-level health facility should be cleaned, dried and covered with a thin piece of clean guaze to prevent infection. If available, a thin layer of an antibiotic cream, such as Neosporin, may be applied to the wound before the gauze is placed. The survivor should be told to change the gauze every day and look for signs of infection (such as redness, heat, or tenderness to touch).

10. List three common emotional reactions to sexual violence a	survivor may experience.
A	
В	
C	
·	

Answers: May vary, possible responses include: fear, denial, depression, anxiety, anger, loneliness/isolation, loss of control, mood changes, guilt/blame, embarrassment/shame, loss of self-confidence.

- 41. A survivor presents with breaks in the skin but does not know when the injuries occurred or if they received a shot to prevent tetanus (lockjaw) in the past. Should they receive a tetanus injection?
 - A. Yes
 - B. No

Answer: A; tetanus is a serious disease caused by bacteria entering a wound. A survivor who presents with breaks in the skin or mucous membranes may be at risk for tetanus infection and should be offered the vaccination, especially if they have not had (or does not know if they have had) this vaccine before.

- 42. At a minimum, when should survivors be asked to return for follow-up care?
 - A. 2 weeks; 1 week if taking PEP

- B. 6 and 12 weeks
- C. Survivors of sexual violence do not require follow up

Answer: A; encourage a follow up visit in 2 weeks, preferably 1 week if the survivor is taking PEP or if the survivor is a person with an intellectual or psychosocial impairment to provide ongoing opportunities for them to ask questions or clarify health matters. They can also be followed-up in 1, 3, and 6 months to re-assess for pregnancy, HIV, STIs, mental health, and administer the Hepatitis B and tetanus vaccines.

- 43. To care for yourself and manage your own stress when working with survivors of sexual violence, it may be helpful to:
 - A. Talk about your experiences with a supervisor, another community health worker or someone else you trust.
 - B. Learn to think about and accept what you did well, what did not go very well, and the limits of what you can do.
 - C. Take some time to rest and relax.
 - D. All of the above.

Answer: D; all of the above statements are helpful strategies to care for yourself and manage your own stress.

STOP here if your facilitator says you do not need to complete the rest of the test.

44. How many doses of tetanus vaccine are required to complete the full series?
_____ doses

Answer: 3 doses; survivors that receive the tetanus vaccination should complete the vaccination schedule. The first dose can be given when the survivor seeks care. The second dose is typically given 4 weeks after the first dose (1 month follow-up visit), and the third dose is given 6 months to one year after the first dose (6 month follow-up visit).

45. How many doses of Hepatitis B vaccine are required to complete the full series?
_____ doses

Answer: 3 doses; a survivor who receives the Hepatitis B vaccination should complete the vaccination schedule. The first dose can be given when the survivor seeks care. Depending on the product, the second dose is typically given 4 weeks after the first dose (1 month follow-up visit), and the third dose is given 4-6 months after the first dose (6 month follow-up visit).

Pre/post-test for Literate CHWs

- 46. Infection in the health care setting can be prevented by:
 - A. Washing your hands with soap and running water before and after you provide care, and wearing clean gloves when touching any wound or fluid from the survivor.
 - B. Washing and disinfecting all tools that will be reused.
 - C. Not reusing needles and disposing them properly so that children and animals cannot find them.
 - D. All of the above

Answer: D; all of the above are actions that should be taken to prevent against infections in health care settings. If airborne infections are prevalent, facial masks can also prevent infections from spreading.

- 47. Signs of a sexually transmitted infection are (select all that apply):
 - A. Unusual vaginal discharge in terms of amount, smell, or color.
 - B. Itching of the vagina or penis.
 - C. Pain while passing urine.
 - D. Rash, sores, or ulcers in the genital area.

Answer: A-D; all answers are correct. Other symptoms can include pain during sex and lower belly pain.

- 48. Signs of an allergic reaction to medicines are:
 - A. Itching
 - B. Red spots
 - C. Swollen mouth and tongue
 - D. Difficulty breathing
 - E. All of the above

Answer: E; all of the above are signs of an allergic reaction. To prevent allergic reaction and allergic shock, before giving a medication, you should ask "Have you ever had a reaction to this medicine, like red spots, itching, swelling, or trouble breathing?" If the answer is yes, you should not use that medicine in any form.

END. Thank you!

4. CHW Clinical Assessment Tool

Post-test and Three Months ADULT FEMALE

Instructions

The clinical assessment component involves a role play between the CHW and a mock survivor. The circumstances of the survivor's case are detailed below. An evaluator should use the following checklist to assess whether key competencies for CHWs are met during each phase of the exam. This activity provides an opportunity to evaluate the CHW's direct practice and communication skills and for the CHW to receive guidance from the evaluator on areas for improvement.

Case background (read to CHW):

A 22-year-old female survivor comes to the clinic two days after being sexually assaulted by a soldier. The soldier assaulted her through her vagina and mouth. The woman states she wants all available treatment and that she has no allergies. She has bruising on her arms and legs; she denies vaginal bleeding, discharge, genital sores, or difficulty urinating. She reports some pain in her genital area, and presents with minor bleeding to a wound on her forearm, which does not require referral to a higher-level facility. She is unsure of her vaccine history for both Hepatitis B and Tetanus. Her last menstrual period was one week ago and she is not using contraceptives.

Additional prompts:

- The survivor is very tearful at times and feels ashamed of what happened. She asks the CHW if other people will know of the assault or of her decision to seek treatment today.
- The survivor has many questions about her medications and wants to know what follow-up is needed after her visit today.
- The survivor is particularly concerned about HIV and wants to understand more about her risk and what she can do to protect herself in the future.

Pre/post-test for Literate CHWs

Intake and Assessment Session

General assessment, preparation, consent						
Did the CHW	Yes	No	N/A	Evaluator comment		
Observe for danger signs to determine whether or not the survivor requires immediate referral						
2. Take the person to a private, quiet and safe place if the survivor is stable						
3. Explain procedures						
Obtain informed consent to treat from the survivor						
Add total "Yes"						

Yes	No	N/A	Evaluator comment

Add total "Yes"

Taking a health history				
Did the CHW	Yes	No	N/A	Evaluator comment
1. Ask the survivor their age				
Ask the survivor their gender and preferred pronouns				
Ask the survivor when the incident occurred (time and date)				
Ask if the survivor has had Hepatitis and Tetanus vaccines				
5. Ask if the survivor is taking any other medications				
Ask if the survivor has any allergies to medications				
7. Ask the survivor if there are any injuries and if so, where				
8. Ask if the survivor was penetrated in their anus, vagina or mouth				
9. Ask if the survivor is experiencing any pain and uses FACES scale to describe the pain				
10. Ask if the survivor is experiencing vaginal bleeding or discharge				
11. Ask if the survivor is pregnant				
12. Ask if the survivor is using contraceptives				
13. Ask if the survivor is known to have HIV				
14. Complete documentation of health history appropriately				
Add total "Yes"				

Pre/post-test for Literate CHWs

Appropriate care and treatment Did the CHW... Yes No N/A **Evaluator comment** 1. Offer a pregnancy test and interpret results correctly 2. Offer, and if permission from survivor, give EC pills with appropriate messages 3. Offer, and if permission from survivor, give 1g azithromycin to prevent syphilis and Chlamydia and give appropriate messages 4. Offer, and if permission from survivor, give cefixime 400 mg for gonorrhea (or ceftriaxone 125 mg injection) and give appropriate messages 5. Offer, and if permission from survivor, give metronidazole 2 g for trichomoniasis and give appropriate messages 6. Offer voluntary counseling and testing for HIV, appropriately counseled survivor, and interpreted results correctly 7. Offer, and if permission from survivor, give PEP for HIV prevention (for 28 days) and give appropriate messages 8. Offer, and if permission from survivor, give paracetamol 250 mg for pain 9. Offer, and if permission from survivor, administer Hepatitis B vaccine appropriately 10. Offer, and if permission from survivor, administer Tetanus vaccine appropriately 11. Provide (or likely verbalize) correct basic wound care to survivor's forearm, including cleaning, removing dirt, applying Neosporin (if available), and covering with gauze 12. Check all medications for expiration 13. Administer medications correctly per protocols (check dose, route, medication name, etc) Add total "Yes"

Education, referral and counseling						
Did the CHW	Yes	No	N/A	Evaluator comment		
Give treatment counseling, including management of side effects, dosing frequency, importance of completing entire treatment, if not already provided						
Offer and, if permission is granted from survivor, arrange referral for HIV test						
3. Discuss safer sex and condom negotiation						
4. Decide together what referrals the survivor would like or need (more health services, psychosocial, protection, legal, social, etc)						
5. Offer and, if permission from survivor, arrange referral for Hepatitis B vaccine						
Offer, and if permission from survivor, arrange referral for Hepatitis B/Tetanus vaccination, if not provided at the visit						
7. Discuss personal safety concerns and make sure the survivor has a safe place to go						
8. Arrange a follow-up visit (one week if taking PEP, two weeks if not taking PEP)						
9. Complete intake form accurately						
10. Ask if the survivor would like a record of the visit, discussing any security concerns						

Pre/post-test for Literate CHWs

Wrap-up				
Did the CHW	Yes	No	N/A	Evaluator comment
After the survivor leaves, transfer information from the intake form to the monitoring form as soon as possible				
Add total "Yes"				

Follow up care Did the CHW... Yes No N/A **Evaluator comment** 1. Ask the survivor how he or she is doing with the medicines and any side effects 2. Remind the survivor to finish the full course of medicines 3. If the survivor has not already been tested, ask if the survivor would like to take an HIV test at the health center 4. Discuss the option of partner referral for sexually transmitted infections (STIs) and HIV, as necessary 5. Evaluate for pregnancy (at 1 month) and provide appropriate counseling 6. If the survivor desires a termination, correctly estimates the pregnancy, and offers medication abortion if pregnancy is less than 12 weeks 7. Assess the survivor's emotional state and ensure he or she has appropriate psychosocial support 8. Decide together what referrals the survivor would like (more health services, psychosocial, protection, social, legal) 9. Discuss new or existing safety concerns with the survivor 10. Inform the survivor that they are welcome to come back anytime, especially at 1, 3, and 6 months 11. Document the care provided and any issues of concern on the intake form 12. After the survivor leaves, safely store both the original intake and monitoring forms according to protocol Add total "Yes"

Overall assessment (please circle one)										
How well did the CHW			1 (poc	or)	5 (ave	rage)	10	(excell	ent)	
Communicate clearly and accurately with the survivor	1	2	3	4	5	6	7	8	9	10
Demonstrate supportive listening and communication skills	1	2	3	4	5	6	7	8	9	10
Demonstrate understanding of treatment options	1	2	3	4	5	6	7	8	9	10

Additional comments		
7/10/10		

Total overall score: _____

(Passing score is 41/59 or more "Yes" responses)

^{*} Ada<mark>pted from</mark> IRC, Clinical Care for Survivors of Sexual Assault: A Multi-Media Training Tool, 2008; and IRC/UNICEF, Case Management Checklist, Caring for Child Survivors of Sexual Abuse, 2012.

Pre/post-test for Literate CHWs

5. Sample three-month assessment

Three-month Assessment for CHWs 2 and 3*

For questions 5-24, give 1 point for complete correct answer; 0.5 points for incomplete correct answer. Give 1 point each for open-ended responses (Q. 20).

Passing score is 16/20 (80%).

The follow-up can be a verbal interview or written activity. For CHW 1s, tailor the qualitative questions to meet their scope of work.

In-depth interview guide

Interview ID:	Date:	
Participant ID:	Site	
Translator ID:	Start Time:	
	End Time:	

Attitudes

What are your thoughts about sexual violence and survivors of sexual violence?

 Probe: What does sexual violence include for you? Has this changed since you have been a part of this project? If so, in what way?

Confidence

How prepared do you feel in your ability to provide quality health care to survivors of sexual violence?

- Probe: Do you feel prepared to conduct: history taking, informed consent, treatment, and follow-up? What is the hardest skill to apply? What are the challenges you face in providing quality care to survivors?
- <u>Probe</u>: What are you concerned about as a health worker providing care for survivors of sexual violence? What would you like more support from program staff?

Practice

What happens when a person comes to you and says they have been sexually assaulted?

<u>Probe</u>: What treatment do you frequently provide to survivors and what do you rarely provide? What
documentation is kept for sexual assault survivors? What are the procedures for referring survivors
to care and following-up?

Other

What do you think would additionally encourage people in your community to come for health care if they have been sexually assaulted?

• Probe: What could you as health care workers do to help with this?

Questionnaire

Please begin by answering a few questions about yourself.

- 1. What is your gender?
 - A. Female
 - B. Male
 - C. Other
 - D. Do not wish to disclose
- 2. How old are you?
 - A. <30
 - B. 30-39
 - C. 40-49
 - D. >50
- 3. Have you ever cared for a survivor of sexual violence?
 - A. Yes
 - B. No
- 4. How many sexual violence survivors have you cared for in the past 3 months?
 - Α. (
 - B. 1
 - C. 2
 - D. 3 or more

Please read the questions carefully and provide what you think to be the most true and honest answer. For questions marked "Select all that apply," you may select 1 or more answers. You may have the choice to select "I don't know". If you do not understand a question or answer, feel free to ask the survey administrator for explanation.

- 5. What is sexual violence? Select all that apply.
 - A. Any unwanted physical violence or contact of a sexual nature.
 - B. Forced penetration of the mouth with the penis.
 - C. Forced penetration of the vagina with the penis or foreign object.
 - D. Forced penetration of the anus with the penis or foreign object.
 - E. Don't know.
- 6. If a woman, girl, or transgender male survivor has experienced sexual violence, what can they prevent if they seek health care as soon as possible? Select all that apply.
 - A. Unwanted pregnancy
 - B. Sexually transmitted infections
 - C. HIV
 - D. Tetanus
 - E. Hepatitis B
- 7. When you come across a potential survivor, what should you do first? Select all that apply.
 - A. See if the person is stable enough for you to treat.

Pre/post-test for Literate CHWs

- B. Verify if the person has really been raped.
- C. Don't know.
- 8. What is the purpose of obtaining informed consent? Select all that apply.
 - A. To provide the survivor with an explanation of what you will do and how you can treat.
 - B. To ensure the survivor understands all of what you will do and how you can treat.
 - C. To give the survivor a choice of what treatment to receive.
 - D. Don't know.
- 9. What should you do if a survivor refuses to give consent?
 - A. Explain why and what you will do in detail; ask if they understand the treatment or have any questions, and if they still decline, accept the survivor's final decision.
 - B. Explain that without being seen by you, no one will believe them.
 - C. Proceed with history taking and treatment, since you know what is best for the person.
 - D. Don't know.
- 10. While you are taking the health history, the survivor becomes teary eyed and quiet. What should you do? Select all that apply.
 - A. Avoid eye contact and quickly move on to another question.
 - B. Ask the survivor if they need to take a break.
 - C. Reassure the survivor by saying, "You are not to blame".
- 11. Conditions that need referral to a higher-level health facility include: Select all that apply.
 - A. Abdominal pain and tenderness
 - B. Bleeding from the vagina
 - C. Object in the vagina
 - D. Loss of control over urine or feces
 - E. Heavy bleeding from the rectum
 - F. Don't know
- 12. You have the option to test for pregnancy, and the survivor's test is positive. Based on the first day of her last menstrual period, you think she is roughly 9 weeks pregnant. The survivor would not like to keep the pregnancy. What is the appropriate regimen to give the survivor? Select all that apply
 - A. Give 200 mg orally of **Mifepristone**. After 24-48 hours, give 800 micrograms of **Misoprostol** under the tongue, between the cheek and gum, or vaginally for one dose.
 - B. Give 200 mg orally of **Mifepristone**. After 36-48 hours, give 800 micrograms of **Misoprostol** vaginally, then 400 micrograms under the tongue or between the cheek and gum, every 3 hours for up to 5 doses of misoprostol.
 - C. Misoprostol 800 micrograms **vaginally** every 3-12 hours for up to 3 doses.
 - D. Misoprostol 800 micrograms **under the tongue** every 3 hours for up to 3 doses.

13.	To prevent unwanted pregnancy, emergency contraception must be administrated within	
	days. (Fill in the blank.)	

- 14. Which method of emergency contraception is most effective at preventing pregnancy between 3 and 5 days (73-120 hours) after sexual violence?
 - **A.** Ulipristal acetate regimen of 30 mg as a single dose.

- **B.** Levonogestrel-only (progestogen-only) regimen of 1.5 mg of levonogestrel as a single dose.
- **C. Combined estrogen-progestogen regimen** of one dose of 0.1 mg ethinyl estradiol plus 0.5 mg of levonogestrel taken 12 hours apart.
- 15. Emergency contraception can be given to young female survivors who have not started menstruation but have developed breast buds.
 - A. True
 - B. False
 - C. Don't know
- 16. Emergency contraception should be given to transgender male survivors with a uterus and ovaries, even if they are on testosterone therapy.
 - A. True
 - B. False
 - C. Don't know
- 17. HIV PEP may be given to: **Select all that apply**
 - A. Pregnant women and children survivors of sexual violence, within 3 days of penetration by a penis to the vagina.
 - B. Survivors coming for health care within 3 days of the violence (penetration by a penis to the vagina).
 - C. Survivors coming for health care within 5 days of the violence (penetration by a penis to the vagina).
 - D. Survivors coming for health care within 3 days of the violence (penetration by a penis to the anus).
 - E. Survivors coming to health care within 3 days of the violence (penetration by a penis to the mouth).
- 18. HIV PEP I must be taken for_____ days. Fill on the blank
- 19. A 16-year-old female comes for care 6 months after experiencing sexual violence (penetration by a penis inside her vagina). She reports no vaginal discharge, pain, or bleeding. What services should you offer? Select all that apply
 - A. Antibiotics to prevent STIs.
 - B. HIV PEP.
 - C. Emergency contraception.
 - D. Hepatitis B vaccine.
 - E. Tetanus vaccine.
 - F. Referral for counseling and community support services.

\sim	1.2 ()	4.5	1.5	1	16 1 1 1		
20.	List three common	emotional	reactions to) sexual ass	ault which	a survivor may	/ experience.

1.		 	 	
2.				
3				

Pre/post-test for Literate CHWs

- 21. A survivor presents after an incomplete abortion. They have not attempted to insert an unclean object into their vagina. They are less than 13 weeks pregnant. What could you give them? Select all that apply
 - A. Misoprostol 600 micrograms (three 200 microgram pills) by mouth as a single dose.
 - B. Misoprostol 400 micrograms (two 200 microgram pills) under the tongue as a single dose.
- 22. Parents and caregivers need to provide consent for health care and treatment for their young child, but a child survivor should also be involved in what will happen to them.
 - A. True
 - B. False
 - C. Don't know
- 23. If you suspect the parent or caregiver is the abuser, you should:
 - A. Ask the parent/caregiver directly.
 - B. Interview the child survivor privately to assess safety needs and action plan.
 - C. Do nothing.
 - D. Don't know.
- 24. A survivor's health information can be discussed without the survivor's consent with: **Select all that apply**
 - A. A community member who might be able to offer support.
 - B. A community member who promises to keep the information private.
 - C. A community member who does not know the survivor.
 - D. The survivor's family members.
 - E. No one.
 - F. Don't know.

Please indicate your confidence in your ability to provide health care to survivors of sexual violence.

1	2	3	4	5	8
Not at all confident	Slightly confident	Moderately confident	Very confident	Extremely confident	Not applicable

25. On a scale of 1 to 5 where 1 is "Not at all confident" and 5 is "Extremely confident," circle the number that shows how confident you are in your ability to:

Communicate with survivors of different ages and sexual orientation/gender identity	1	2	3	4	5	8
2. Explain the details of what you will do to help a survivor	1	2	3	4	5	8
3. Obtain informed consent to provide treatment	1	2	3	4	5	8
Provide appropriate health care to survivors based on their risk factors and timing of presentation	1	2	3	4	5	8
5. Refer for safe abortion services	1	2	3	4	5	8
6. Provide medication abortion	1	2	3	4	5	8
7. Know when and how to refer for higher-level health services	1	2	3	4	5	8
Refer a survivor to emotional support, mental health, legal, and community support services	1	2	3	4	5	8
9. Provide follow-up care to survivors	1	2	3	4	5	8
10. Maintain confidentiality	1	2	3	4	5	8
11. Complete in-take and monitoring forms	1	2	3	4	5	8

Pre/post-test for Literate CHWs

Please indicate your level of agreement with the following statements regarding sexual violence and care for survivors.

1 Strongly disagree	1 2 3 4 Strongly disagree Disagree Agree Strongly a				gree Don't k			w
26. On a scale of 1 to 4 w shows your level of ac				ee," ci	rcle th	ne nu	mber	that
Sexual violence hap	pens in my commı	unity.		1	2	3	4	8
2. Sexual violence can	happen to anyone			1	2	3	4	8
3. Men and boys can b	oe sexually assaulte	ed.		1	2	3	4	8
4. Children can be sex	ually assaulted.			1	2	3	4	8
5. Persons with disabi	lities can be sexual	lly assaulted.		1	2	3	4	8
6. Persons with diverse sexual orientation and gender identify are not at risk of sexual violence.				1	2	3	4	8
7. A survivor of sexual violence may have deserved the attack because of the way they dressed or acted.				1	2	3	4	8
8. If a woman's husband forced her to have sex, it is not sexual violence.				1	2	3	4	8
9. It is my responsibilit	ty to provide care to	o survivors of s	exual violence.	1	2	3	4	8
10. It is my responsibilit been "raped".	ty to determine who	ether or not a si	urvivor has	1	2	3	4	8
11. It is okay to share a getting the survivor'		tion with their fa	amily without	1	2	3	4	8
12. A survivor should be receive treatment.	e able to choose wi	hether or not to		1	2	3	4	8

5. Sample three-month assessment

ANSWER KEY: Three-month Assessment for CHWs 2 and 3*

For questions 5-24, give 1 point for complete correct answer; 0.5 points for incomplete correct answer. Give 1 point each for open-ended responses (Q. 20).

Passing score is 16/20 (80%).

The follow-up can be a verbal interview or written activity. For CHW 1s, tailor the qualitative questions to meet their scope of work.

In-depth interview guide

Interview ID:	Date:	
Participant ID:	Site	
Translator ID:		
	End Time:	

Attitudes

What are your thoughts about sexual violence and survivors of sexual violence?

• <u>Probe</u>: What does sexual violence include for you? Has this changed since you have been a part of this project? If so, in what way?

Confidence

How prepared do you feel in your ability to provide quality health care to survivors of sexual violence?

- Probe: Do you feel prepared to conduct: history taking, informed consent, treatment, and follow-up? What is the hardest skill to apply? What are the challenges you face in providing quality care to survivors?
- <u>Probe</u>: What are you concerned about as a health worker providing care for survivors of sexual violence? What would you like more support from program staff?

Practice

What happens when a person comes to you and says they have been sexually assaulted?

• <u>Probe</u>: What treatment do you frequently provide to survivors and what do you rarely provide? What documentation is kept for sexual assault survivors? What are the procedures for referring survivors to care and following-up?

Other

What do you think would additionally encourage people in your community to come for health care if they have been sexually assaulted?

Probe: What could you as health care workers do to help with this?

Pre/post-test for Literate CHWs

Questionnaire

Please begin by answering a few questions about yourself.

- 1. What is your gender?
 - A. Female
 - B. Male
 - C. Other
 - D. Do not wish to disclose
- 2. How old are you?
 - A. <30
 - B. 30-39
 - C. 40-49
 - D. >50
- 3. Have you ever cared for a survivor of sexual violence?
 - A. Yes
 - B. No
- 4. How many sexual violence survivors have you cared for in the past 3 months?
 - Α. (
 - B. 1
 - C. 2
 - D. 3 or more

Please read the questions carefully and provide what you think to be the most true and honest answer. For questions marked "Select all that apply," you may select 1 or more answers. You may have the choice to select "I don't know". If you do not understand a question or answer, feel free to ask the survey administrator for explanation.

- 5. What is sexual violence? Select all that apply.
 - A. Any unwanted physical violence or contact of a sexual nature.
 - B. Forced penetration of the mouth with the penis.
 - C. Forced penetration of the vagina with the penis or foreign object.
 - D. Forced penetration of the anus with the penis or foreign object.
 - E. Don't know.

Answer: A, B, C, D are all examples of sexual violence.

- 6. If a woman, girl, or transgender male survivor has experienced sexual violence, what can they prevent if they seek health care as soon as possible? Select all that apply.
 - A. Unwanted pregnancy
 - B. Sexually transmitted infections
 - C. HIV
 - D. Tetanus
 - E. Hepatitis B

Answer: A, B, C, D, E are all examples of diseases/conditions that may be prevented with immediate care.

- 7. When you come across a potential survivor, what should you do first? Select all that apply.
 - A. See if the person is stable enough for you to treat.
 - B. Verify if the person has really been raped.
 - C. Don't know.

Answer: A, you should first see if the person is stable enough for you to treat. If the survivor presents with any of the "danger signs" covered during the training, you should stabilize the survivor as best as possible and refer them to a higher-level health facility immediately for further care.

- 8. What is the purpose of obtaining informed consent? Select all that apply.
 - A. To provide the survivor with an explanation of what you will do and how you can treat.
 - B. To ensure the survivor understands all of what you will do and how you can treat.
 - C. To give the survivor a choice of what treatment to receive.
 - D. Don't know.

Answer: A, B, C

- 9. What should you do if a survivor refuses to give consent?
 - A. Explain why and what you will do in detail; ask if they understand the treatment or have any questions, and if they still decline, accept the survivor's final decision.
 - B. Explain that without being seen by you, no one will believe them.
 - C. Proceed with history taking and treatment, since you know what is best for the person.
 - D. Don't know.

Answer: A

- 10. While you are taking the health history, the survivor becomes teary eyed and quiet. What should you do? Select all that apply.
 - A. Avoid eye contact and quickly move on to another question.
 - B. Ask the survivor if they need to take a break.
 - C. Reassure the survivor by saying, "You are not to blame".

Answer: B and C

- 11. Conditions that need referral to a higher-level health facility include: Select all that apply.
 - A. Abdominal pain and tenderness
 - B. Bleeding from the vagina
 - C. Object in the vagina
 - D. Loss of control over urine or feces
 - E. Heavy bleeding from the rectum
 - F. Don't know

Answer: A-E

12. You have the option to test for pregnancy, and the survivor's test is positive. Based on the first day of her last menstrual period, you think she is roughly 9 weeks pregnant. The survivor would not like to keep the pregnancy. What is the appropriate regimen to give the survivor? *Select all that apply*

Pre/post-test for Literate CHWs

- A. Give 200 mg orally of **Mifepristone**. After 24-48 hours, give 800 micrograms of **Misoprostol** under the tongue, between the cheek and gum, or vaginally for one dose.
- B. Give 200 mg orally of **Mifepristone**. After 36-48 hours, give 800 micrograms of **Misoprostol** vaginally, then 400 micrograms under the tongue or between the cheek and gum, every 3 hours for up to 5 doses of misoprostol.
- C. Misoprostol 800 micrograms vaginally every 3-12 hours for up to 3 doses.
- D. Misoprostol 800 micrograms under the tongue every 3 hours for up to 3 doses.

Answer: A, C, D. The most effective regimen for a pregnancy less than 10 weeks is A. However, if only misoprostol is available, the survivor can be given C or D. B is for pregnancies between 10 and 12 weeks.

13.	To prevent unwanted pregnancy, emergency contraception must be administrated within
	days. Fill in the blank.
	,

Answer: 5 full days

- 14. Which method of emergency contraception is most effective at preventing pregnancy between 3 and 5 days (73-120 hours) after sexual violence?
 - **A.** Ulipristal acetate regimen of 30 mg as a single dose.
 - **B.** Levonogestrel-only (progestogen-only) regimen of 1.5 mg of levonogestrel as a single dose.
 - **C. Combined estrogen-progestogen regimen** of one dose of 0.1 mg ethinyl estradiol plus 0.5 mg of levonogestrel taken 12 hours apart.

Answer: A. Ulipristal acetate is more effective than progestin-only pills in the 73-120 hours after unprotected intercourse. It is also more effective with fewer side effects than the combined hormonal pills. The levonogesterel-only pill works best when used closer to the time of sexual intercourse. It is also more effective and has fewer side effects than the combined hormonal pills.

- 15. Emergency contraception can be given to young female survivors who have not started menstruation but have developed breast buds.
 - A. True
 - B. False
 - C. Don't know

Answer: True

- 16. Emergency contraception should be given to transgender male survivors with a uterus and ovaries, even if they are on testosterone therapy.
 - A. True
 - B. False
 - C. Don't know

Answer: True. Transgender male survivors on testosterone therapy may still experience ovulation, and may therefore be at risk of pregnancy. They should receive emergency contraception if presenting within 5 days of sexual violence.

- 17. HIV PEP may be given to: Select all that apply
 - A. Pregnant women and children survivors of sexual violence, within 3 days of penetration by a penis to the vagina.
 - B. Survivors coming for health care within 3 days of the violence (penetration by a penis to the vagina).
 - C. Survivors coming for health care within 5 days of the violence (penetration by a penis to the vagina).
 - D. Survivors coming for health care within 3 days of the violence (penetration by a penis to the anus).
 - E. Survivors coming to health care within 3 days of the violence (penetration by a penis to the mouth).

Answer: A, B, D; PEP must be administered for vaginal or anal assault within 3 full days of the incident. The transmission of HIV via oral assault is very low.

18. HIV PEP I must be taken for_____ days. *Fill on the blank*

Answer: HIV PEP must be taken for 28 days.

- 19. A 16-year-old female comes for care 6 months after experiencing sexual violence (penetration by a penis inside her vagina). She reports no vaginal discharge, pain, or bleeding. What services should you offer? Select all that apply
 - A. Antibiotics to prevent STIs.
 - B. HIV PEP.
 - C. Emergency contraception.
 - D. Hepatitis B vaccine.
 - E. Tetanus vaccine.
 - F. Referral for counseling and community support services.

Answer: A, D, E, F. Since the survivor does not present with any symptoms, the full range of presumptive treatment should be given. She can also receive the Hepatitis B and tetanus vaccines if she has not been fully vaccinated. Further discuss find out why she came and what her concerns are, and counsel her on the proposed treatment and make sure she agrees. You can also test for pregnancy and HIV if you have supplies. Also check if she has a regular partner and if he has complained of any symptoms.

Pre/post-test for Literate CHWs

- 20. List three common emotional reactions to sexual assault which a survivor may experience.
 - 1 May vary, possible responses include: fear, denial, depression, anxiety,
 - anger, alienation/isolation, loss of control, mood changes, guilt/blame,
 - embarrassment/shame, loss of self-confidence.
- 21. A survivor presents after an incomplete abortion. They have not attempted to insert an unclean object into their vagina. They are less than 13 weeks pregnant. What could you give them? Select all that apply
 - A. Misoprostol 600 micrograms (three 200 microgram pills) by mouth as a single dose.
 - B. Misoprostol 400 micrograms (two 200 microgram pills) under the tongue as a single dose.

Answer: A, B. Either dose is appropriate. While misoprostol is very safe, on rare occasions, it can cause too much bleeding or an incomplete abortion. If the uterus does not empty completely, the survivor should be referred to the health center for vacuum aspiration or other methods. Survivors presenting with symptoms of shock, or who have attempted an unsafe abortion with a non-sterile object (wire, wood, etc.) should also be referred to a higher-level facility. Such survivors also need a tetanus vaccine if they have not received one in the last 10 years.

- 22. Parents and caregivers need to provide consent for health care and treatment for their young child, but a child survivor should also be involved in what will happen to them.
 - A. True
 - B. False
 - C. Don't know

Answer: A, true

- 23. If you suspect the parent or caregiver is the abuser, you should:
 - A. Ask the parent/caregiver directly.
 - B. Interview the child survivor privately to assess safety needs and action plan.
 - C. Do nothing.
 - D. Don't know.

Answer: B

- 24. A survivor's health information can be discussed without the survivor's consent with: **Select all that apply**
 - A. A community member who might be able to offer support.
 - B. A community member who promises to keep the information private.
 - C. A community member who does not know the survivor.
 - D. The survivor's family members.
 - E. No one.
 - F. Don't know.

Answer: E

Please indicate your confidence in your ability to provide health care to survivors of sexual violence.

1	2	3	4	5	8
Not at all	Slightly	Moderately	Very	Extremely	Not
confident	confident	confident	confident	confident	applicable

25. On a scale of 1 to 5 where 1 is "Not at all confident" and 5 is "Extremely confident," circle the number that shows how confident you are in your ability to:

Communicate with survivors of different ages and sexual orientation/gender identity	1	2	3	4	5	8
2. Explain the details of what you will do to help a survivor	1	2	3	4	5	8
3. Obtain informed consent to provide treatment	1	2	3	4	5	8
Provide appropriate health care to survivors based on their risk factors and timing of presentation	1	2	3	4	5	8
5. Refer for safe abortion services	1	2	3	4	5	8
6. Provide medication abortion	1	2	3	4	5	8
7. Know when and how to refer for higher-level health services	1	2	3	4	5	8
8. Refer a survivor to emotional support, mental health, legal, and community support services	1	2	3	4	5	8
9. Provide follow-up care to survivors	1	2	3	4	5	8
10. Maintain confidentiality	1	2	3	4	5	8
11. Complete in-take and monitoring forms	1	2	3	4	5	8

Pre/post-test for Literate CHWs

Please indicate your level of agreement with the following statements regarding sexual violence and care for survivors.

1 Strongly disagree	2 Disagree	3 Agree	4 Strongly ag	ıree		Don	8 't kno)W
26. On a scale of 1 to 4 w shows your level of ac				ee," ci	rcle th	ne nu	mber	that
1. Sexual violence hap	pens in my commi	unity.		1	2	3	4	8
2. Sexual violence can	happen to anyone	١.		1	2	3	4	8
3. Men and boys can b	oe sexually assault	ed.		1	2	3	4	8
4. Children can be sex		1	2	3	4	8		
5. Persons with disabi		1	2	3	4	8		
6. Persons with divers at risk of sexual viol	1	2	3	4	8			
7. A survivor of sexual violence may have deserved the attack because of the way they dressed or acted.						3	4	8
8. If a woman's husband forced her to have sex, it is not sexual violence.						3	4	8
9. It is my responsibilit	1	2	3	4	8			
10. It is my responsibilit been "raped".	1	2	3	4	8			
11. It is okay to share a getting the survivor'	1	2	3	4	8			
12. A survivor should be	hether or not to	1	2	3	4	8		

receive treatment.

CHW Clinical Assessment Tool¹ Three Month Evaluation

CHILD SURVIVOR

Instructions

The clinical assessment component involves a role play between the CHW and a mock survivor of sexual violence. The circumstances of the survivor's case are detailed below. An evaluator should use the following checklist to assess whether key competencies for CHWs are met during each phase of the exam. This activity provides an opportunity to evaluate the CHW's direct practice and communication skills and for the CHW to receive guidance from the evaluator on areas for improvement.

Case background (read to CHW):

An 11-year-old female survivor is brought to the clinic by her aunt who is her guardian. She reports being sexually assaulted by a soldier two days ago. The soldier assaulted her through her vagina. Her aunt is very concerned about HIV and wants all possible treatment for the survivor. She has bruising on her arms and legs; she denies vaginal bleeding, discharge, genital sores, or difficulty urinating. She reports some pain in her genital areas, and presents with minor bleeding to a wound on her forearm, which does not require referral to a higher-level facility. She is unsure of her vaccine history for both Hepatitis B and Tetanus. She has not started her menstrual period but shows some signs of the onset of puberty, including breast bud development. She has no known allergies. Her weight is 35 kg.

Additional prompts:

- The survivor feels ashamed of what happened. She asks the CHW if other people will know of the assault or of her decision to seek treatment today. She wants her aunt to stay with her.
- The survivor is timid but interested in learning about her medications. The caregiver wants to know what follow-up is needed after her visit today.

^{*} Adapted from IRC, Clinical Care for Survivors of Sexual Assault: A Multi-Media Training Tool, 2008; and IRC/UNICEF, Case Management Checklist, Caring for Child Survivors of Sexual Abuse, 2012.

Pre/post-test for Literate CHWs

General assessment, preparation, consent Did the CHW... N/A Yes No **Evaluator comment** 1. Observe for danger signs to determine whether or not the survivor requires immediate referral 2. If the survivor is stable, take the person to a private, quiet and safe place. Allow caregiver to accompany survivor, if the survivor requests that caregiver also be present. 3. Explain procedures 4. Obtain informed consent to treat from the caregiver and informed assent to treat from the survivor. Add total "Yes"

Create an enabling enviro	nment
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Did the CHW	Yes	No	N/A	Evaluator comment
Stay calm and comforting during the survivor's care and treatment				
2. Communicate directly with the survivor using simple, clear, non-blaming language and use supportive phrases such as "I'm sorry this happened to you," "This is not your fault," or "You are safe here"				
Express interest or concern for the survivor with body language as well as with words				
4. Avoid interrupting, asking leading questions, or offering opinions when they are not asked instead of focusing on the survivor				
5. Ensure the basic principles to working with survivors are met, including: guarantee confidentiality; respect the wishes, the rights, and the dignity of the survivor; treat the survivor without discrimination				
6. Explain to the caregiver that the survivor will need extra attention, patience and affection over next few weeks and months.				

Add total "Yes"

Pre/post-test for Literate CHWs

Taking a health history Did the CHW... Yes No N/A **Evaluator comment** 1. Ask the survivor their age and not their pubertal stage 1. Ask the survivor their gender and preferred pronouns 2. Ask the survivor when the incident occurred (time and date)? 3. Ask if the survivor has had hepatitis and tetanus vaccines 4. Ask if the survivor is taking any other medications 5. Ask if the survivor has any allergies to medications 6. Ask the survivor if there are any injuries and if so, where 7. Ask if the survivor was penetrated in their anus, vagina or mouth 8. Ask if the survivor is experiencing any pain and uses FACES scale to describe the pain 9. Ask if the survivor is experiencing vaginal bleeding or discharge 10. Ask if the survivor is known to have HIV 11. Complete documentation of health history appropriately.

Add total "Yes"

oid the CHW	Yes	No	N/A	Evaluator comment
Offer a pregnancy test and interpret results correctly				
Offer, and if permission from the caregiver and survivor, give EC pills with appropriate messages				
3. Offer, and if permission from the caregiver and survivor, give azithromycin 700 mg by mouth to prevent Chlamydia and syphilis, and provide appropriate messages				
4. Offer, and if permission from the caregiver and survivor, give cefixime 280 mg (or 125 mg ceftriaxone injection) by mouth to prevent gonorrhea, and provide appropriate messages				
5. Offer, and if permission from the caregiver and survivor, give metronidazole 175 mg to prevent trichomoniasis (by mouth, 3 times daily for 7 days), and provide appropriate messages				
Offer voluntary counseling and testing for HIV, appropriately counseled survivor and caregiver, and interpreted results correctly				
7. Offer, and if permission from the caregiver and survivor, give Zidovudine 100 mg (by mouth, 2 capsules 3 times daily for 28 days) and Lamuvidine 150 mg (by mouth, 1 tablet 2 times daily for 28 days),* and provide appropriate messages.				
Offer, and if permission from the caregiver and survivor, administer paracetamol 525 mg for pain				
Offer, and if permission from the caregiver and survivor, administer Hepatitis B vaccine appropriately				
10. Offer, and if permission from the caregiver and survivor, administer Tetanus vaccine appropriately				
 Provide (or likely verbalize) correct basic wound care to survivor forearm, including cleaning, removing dirt, applying Neosporin (i available), and covering with gauze 				
12. Check all medications for expiration				
13. Administer medications correctly per protocols (check dose, route, medication name, etc)				

Pre/post-test for Literate CHWs

Education, referral and counseling Did the CHW... Yes No N/A **Evaluator comment** 1. Give treatment counseling, including management of side effects, dosing frequency, importance of completing entire treatment, if not already provided 2. Offer and, if permission is granted from survivor, arrange referral for HIV test 3. Decide together what referrals the survivor would like or need (more health services, psychosocial, protection, legal, social, etc) 4. Offer and, if permission is granted from survivor, arrange referral for Hepatitis B vaccine 5. Offer and, if permission is granted from survivor, arrange referral for tetanus vaccination 6. Discuss personal safety concerns and make sure the survivor has a safe place to go 7. Arrange a follow-up visit (one week if taking PEP, two weeks if not taking PEP) 8. Complete intake form accurately 9. Ask if the survivor would like a record of the visit, discussing any security concerns

Add total "Yes"

Did the CHW	Yes	No	N/A	Evaluator comment
After the survivor and caretaker leave, transfer information from the intake form to the monitoring form as soon as possible.				
Add total "Yes"				

Follow up care N/A Did the CHW... Yes No **Evaluator comment** 1. Ask the survivor and caretaker how he or she is doing with the medicines and any side effects. 2. Remind the survivor to finish the full course of medicines. 3. If the survivor has not already been tested, ask if the survivor would like to take an HIV test at the health center. 4. Assess the survivor's emotional state and ensure he or she has appropriate psychosocial support. 5. Decide together what referrals the survivor would like (more health services, psychosocial, protection, social, legal). 6. Discuss new or existing safety concerns with the survivor. 7. Inform the survivor that he or she is welcome to come back anytime, especially at six weeks and three months. 8. Document the care provided and any issues of concern on the intake form. 9. After the survivor leaves, safely store both the original intake and monitoring forms according to protocol. Add total "Yes"

^{**}Evaluate for pregnancy at 1 month. The 1-2 week follow-up would be too early for a urine pregnancy to detect.

Pre/post-test for Literate CHWs

Overall assessment	(please	circle	one)	
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How well did the CHW			1 (poc	or)	5 (ave	rage)	10	(excell	ent)	
Communicate clearly and accurately with the survivor	1	2	3	4	5	6	7	8	9	10
Demonstrate supportive listening and communication skills	1	2	3	4	5	6	7	8	9	10
Demonstrate understanding of treatment options	1	2	3	4	5	6	7	8	9	10

Additional comments	

Total overall score:	

(Passing score is 37/54 "Yes" responses or higher)