

WHO, together with the Ministry of Public Health, is strengthening health sector response to gender-based violence (GBV) in Afghanistan with the support of USAID and the Italian Development Cooperation. This involves training over 6,500 healthcare providers on a GBV Treatment Protocol so that doctors, nurses and midwives are able to provide compassionate and appropriate care to everyone who has experienced gender-based violence, including sexual, physical and psychological violence.

Gender-based violence is a serious human rights violation with consequences for physical, mental and reproductive health. Although men and boys can also experience GBV, women and girls make up the majority of GBV survivors.

As part of its five-year project, WHO supports the strengthening of health facilities to ensure they are properly organized and equipped to provide appropriate care in all of Afghanistan's 34 provinces.

Through this series of photographs, meet the people who are making a difference in their health facilities, helping survivors of violence in their path to recovery.

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Credit: WHO Afghanistan/S.Ramo

### **Parwina Hassanzadah, medical doctor at the Nawabad Comprehensive Health Centre in Herat province**

“In the training I learned a lot about gender-based violence and our role as healthcare providers in responding to it. I took the training 6 months ago and again I recently reviewed the GBV Protocol. Now I can identify GBV survivors, give them the medical treatment and information they need and support them in adopting positive coping mechanisms and doing safety planning. GBV is very common. Mainly I see women who are suffering from physical violence, for example beating by their husbands. Emotional violence is also common. I have been working as a medical doctor since I graduated from Kabul Medical University in 1993 and for the past 3

years I have worked at this clinic. It is so important that we uphold the key principles of respect, confidentiality, safety and non-discrimination when we are in contact with GBV survivors.”

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Credit: WHO Afghanistan/S.Ramo

### **Habiba Jaffari, a midwife at the Yakawlang District Hospital in Bamyan province**

“The lack of adequate space to provide enough privacy remains a challenge in our hospital. However, although we have challenges in this clinic, the GBV protocol training has helped me a lot. Before, I wasn’t aware of all the different types of GBV and how to identify different types of gender-based violence. Every week I see around 5 women who suffer from violence. Now I am happy there is at least something I can do to help them recover.”

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Credit: WHO Afghanistan/S.Ramo

### **Zahra, midwife at a Basic Health Centre in Bamyan province**

“I have seen many cases of violence against women in my community and at the health facility. Last year I saw a beheaded woman near my village – it was a so-called “honour killing” perpetrated by the family. Before, when women who were abused came to the clinic and asked for advice about what to do and where to go, I didn’t know what to tell them, I wasn’t aware of referral options. I’ve learned that it is very important to support survivors and to be respectful and not judgmental, and to have open communication so I can get the whole story from the survivor. I used to be a vaccinator but after seeing so many women and babies dying or getting sick during childbirth I wanted to stop that and do my part to help. Women are equal to men and we all have human rights.”

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Credit: WHO Afghanistan/S.Ramo

### **Muhammad Muhammadi, paediatric specialist, Yakawlang District Hospital, Bamyan**

“Before when GBV survivors came to my clinic I didn’t really know what to do and how to give them the right kind of medical treatment. I have been a doctor for 10 years and this is the first time I received training on GBV. I learned about the different types of violence, how to identify

GBV and how to manage rape cases and also wounds and burns. I also learned about giving messages to survivors that highlight that they are not alone and that help is available. We are not here to judge but to offer support. Emotional violence is very common here, I see on average 20 or more cases like this every month. Domestic violence is very prevalent in our communities. It has a major impact on children as well and I can see the effects of domestic violence on many children – they cannot concentrate well, they don't pay much attention to anything and they are in low spirits.”

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Credit: WHO Afghanistan/S.Ramo

### **Naseema, midwife at the Kishm District Hospital, Badakhshan province**

“It's important for healthcare providers to know about the different forms of gender-based violence. GBV incidents are increasing day by day in our community and the health facility is often the first place where survivors come to seek help. After taking the GBV Protocol training, I now realize that GBV cases should be given priority in the clinic. Now I know how to apply survivor-centred skills in a practical way. I also learned about proper documentation of GBV cases and how to store documents in a confidential way.”

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Credit: WHO Afghanistan/S.Ramo

### **Baz Mohammad, Nurse, Bamyan Provincial Hospital**

“I have been working as a nurse for 4 years in this hospital. Everything in the GBV Protocol training was new to me. Identifying and knowing the signs and symptoms of GBV is very important, not just here in the health facility but also in the community. I learned about how the clinic can be better set up to ensure privacy and make survivors feel more comfortable. I also understand the importance of confidentiality and for example making sure that all patient files are kept strictly confidential in a safe place.

Awareness about GBV is generally very low among everyone, including healthcare providers. Men play a very dominant role in our society. GBV patients really need a private space where they are examined and that is often a challenge in health facilities as there are so many people coming in every day for different reasons. If doctors and healthcare providers are not trained on GBV, they don't take the issue seriously. People who have experienced GBV have often low confidence, they want to isolate themselves. Healthcare providers need to pay attention to them.”

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Credit: WHO Afghanistan/S.Ramo

### **Khjawa Ahmad, Medical Doctor at a Basic Health Centre in Charikar, Parwan province**

“Before I didn’t know how to provide proper services to GBV survivors. Now I can follow the GBV Treatment Protocol and I know what to do. This is the first time I am being trained on any gender-based violence issues and I hadn’t heard about most of the topics before. Even the definition of gender-based violence was new to me – I didn’t know there are so many different types of GBV, including physical, sexual, psychological violence, forced marriage, honour killings, denial of resources. The GBV Treatment Protocol is a really useful resource for us all.”

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Credit: WHO Afghanistan/S.Ramo

### **Arzo, Nurse at a Comprehensive Health Centre in Bamyan**

“I graduated from nursing school 2 years ago and I have been working at the same clinic since then. Gender-based violence is very common in my area and I know many women suffer from it. It takes so many forms, a lot of it is domestic violence and physical violence, men attacking women with knives, their fists and household tools like shovels. I have also heard about a lot of GBV due to a woman not wanting to marry a man. Men would rape the woman to force her to marry or gang rape them as revenge. There is also harassment and rape happening when women walk alone to go to school, for example. GBV is really a huge problem. I have also seen a few men and boys come to the clinic as GBV survivors. The majority of those who suffer from GBV don’t report it because they are ashamed.

After this training, I am even more determined to raise these issues in my community. I want to set up a community shura (group) to tackle this issue and raise awareness of influential community members like traditional and religious leaders and reinforce the message that GBV survivors should seek care at the health facility. I am the first from my clinic to be trained on the GBV Protocol but I hope that other healthcare providers get trained too. This is so important.”

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Credit: WHO Afghanistan/S.Ramo

### **Masoma, Midwife, Bamyan Provincial Hospital**

“I have been a midwife for 10 years in this same hospital. I come from a small village in the centre of Bamyán province. I wanted to become a midwife so I could help mothers and babies in my community: when I returned back to Afghanistan from Iran 15 years ago there were not enough midwives - many women were dying giving birth and babies died because there weren't any skilled birth attendants and women gave birth at home. I have seen many types of violence during my work here at the hospital, including psychological violence, physical and sexual violence. Ensuring survivors' privacy and building trust with patients is very important. I haven't heard about the GBV Treatment Protocol before but I am taking the WHO training on the GBV Protocol next month and I am looking forward to it. Everyone has a right to good healthcare and we need to be able to support GBV survivors.”

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Credit: WHO Afghanistan/S.Ramo

### **Manezha, midwife in Qara Quzi Basic Health Centre, Argo, Badakhshan**

“Gender-based violence is very common in my area which is why it is so important to have this kind of training for healthcare providers. After taking the training, I feel more prepared to help survivors of violence and make basic safety plans with them. The training emphasized the importance of confidentiality and respect for survivors which is so important. Now I also know that so called “virginity testing” doesn't have any medical validity and that it is against human rights to continue this practice of hymen examinations. In this clinic we mainly see women who have experienced physical or emotional violence but not that many rape survivors seek help here. We have many challenges related to providing care to GBV survivors, mainly the lack of space to guarantee privacy and also we don't have many of the medicines that are needed for effective post-rape care.”

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Credit: WHO Afghanistan/S.Ramo

### **Jumat Gul, medical doctor, health facility in a Herat prison**

“Gender-based violence is the cause of so many problems in our country but before I didn't know much about it, its different forms and how it affects people's health. This was the first time I attended any training dealing with GBV issues. I learned a lot about confidentiality and how to store information about survivors in a proper way. I am originally from Khost province but now I provide health services to prisoners in Herat province. I have experience in dealing with GBV cases among men inside the prison, especially cases of rape. After taking the training, I now feel more prepared to offer the right kind of services and support to those who have

experienced violence.”

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Credit: WHO Afghanistan/S.Ramo

### **Muhamad Ali, Nurse at the Bamyan provincial hospital**

“In Afghanistan, we have many problems, there is conflict, poverty and violence. As healthcare providers, we can help those who have suffered from gender-based violence. After this training, I now know how to identify survivors and provide appropriate care. I have seen many cases of violence in the hospital, for example women who have experienced rape and sexual assault. But before I didn’t know what to do and how to deal with it. This training has given me confidence to treat survivors. Safety and confidentiality are the key principles we must follow in our work.”

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