Global Status Report on Violence Prevention

Information for National Data Coordinators

Department of Violence and Injury Prevention and Disability
Geneva, 2012
1. Overview of the project

Thank you for agreeing to act as the National Data Coordinator (NDC) for this important project. We look forward to working with you over the next year. Please note that in your role as NDC you are representing the Ministry/agency with which you are affiliated.

Should you have any queries, please do not hesitate to contact your WHO Country Office, or the WHO HQ Department of Violence and Injury Prevention and Disability (see contact details at the end of this document).

1.1 Background

Violence is a leading cause of death among persons aged 15-44 years, where deaths due to interpersonal and self-directed violence far outnumber those directly due to war. Child maltreatment, youth violence, intimate partner and sexual violence, and elder maltreatment are among the most prevalent forms interpersonal violence, and increase the likelihood of self-directed violence. These types of interpersonal violence can also strongly increase alcohol and drug misuse, smoking, mental disorders, and unsafe sex, and via these can lead to HIV/AIDS and chronic diseases such as cardiovascular disorders and cancers.

To begin to address this problem, in 2002 the World Health Organization launched the World report on violence and health, and in 2003 the World Health Assembly adopted Resolution 56.24 "Implementing the recommendations of the World report on violence and health". This World Report recommends a number of strategies that countries can implement to strengthen violence prevention, and subsequent technical guidelines provide detailed information on the scientific evidence-base for prevention and how to prevent specific types of violence. As of 2012, three out of six WHO regional committees (Africa, the Americas, and Europe) have adopted violence prevention resolutions, with a fourth (the Western Pacific region) due to do so in October 2012. Over 50 countries have held national launches of the World report on violence and health, nearly 60 countries have developed reports and/or plans of action on violence and health, and there are over 100 officially appointed health ministry focal persons for the prevention of violence. There are also signs that increasingly countries are taking stock of levels and patterns of violence, the health consequences of such violence and also their responses to it. To support this effort, WHO has continued its work in consolidating and disseminating normative guidance on how to assess and thus prevent the problem of violence.

The Global status report on violence prevention (GSRVP) will be the primary tool for monitoring country violence prevention progress. For the first time, this report will provide a broad assessment of the state of interpersonal violence prevention in countries around the world and is thus expected to attract major attention. Using data drawn from a standardized survey, it will evaluate the extent to which countries have been implementing the recommendations of the World report on violence and health.
2. The Global status report on violence prevention

2.1 Objectives

The objectives of the GSRVP are to describe for each country:

- Levels of the main types of interpersonal violence and data collection capacity;
- The status of legal, policy, and programmatic measures taken to prevent the main types of interpersonal violence;
- The status of services for victims of violence in each country.

This snapshot of the state of interpersonal violence prevention in each country will serve as:

- A baseline to track future progress in violence prevention internationally;
- A benchmark that countries can use to assess their position in violence prevention relative to other countries, and
- Encourage countries and donors to take further violence action to address gaps in violence prevention.

National level data will be obtained through the administration of a standardized questionnaire, to collect data from WHO's 194 Member States. It is essential that each country use the same data collection methodology, as defined in this protocol. Data collection will begin in early 2013 and will be conducted through a consensus approach involving respondents who represent the multiple sectors of national governments, as well as nongovernmental organizations and academic institutions, who may be involved in country level violence prevention work.

As NDC, you have a crucial role to play in this project. The GSRVP will not succeed without your committed support and active involvement. One of your key responsibilities will be to ensure that data collection in your country is carried out according to the standard methodology that is specified in this protocol.

The final report, to be published in mid 2014, will serve as a useful tool in advocating for increased focus on and investment in violence prevention both nationally and internationally. Following its release, the GSRVP will be widely disseminated and freely available to download from the internet.

2.2 Project methodology: overview and timeline

The flow diagram overleaf shows how you as the NDC will be involved in the overall process of the project. The project starts in late 2012 and is due for finalization in July 2014. You will be involved during the data collection phase in 2013 and then again in working with other stakeholders in your Government in deciding how to use the data from your country.
Global status report on violence prevention: overall process

Acronyms:
CO = WHO Country Office
HQ = WHO headquarters, based in Geneva.

Internet-based regional training for National Data Coordinators (NDCs).

NDCs (supported by WHO COs and HQ) identify 6-10 questionnaire respondents in each country.

Identified respondents invited to participate and receive briefing on their role. Respondents sent questionnaire and invitation to the consensus meeting.

PRIOR to consensus meeting respondents each fill in their copy of the RESPONDENT'S QUESTIONNAIRE and collect any supporting documents they may want to submit.

PRIOR to consensus meeting NDC fills in his/her copy of RESPONDENT'S QUESTIONNAIRE and collects any supporting documents to bring to the consensus meeting.

Consensus meeting held where NDC and respondents go through each question on the questionnaire and together decide which response best represents their country situation – these answers are filled in on FINAL COUNTRY QUESTIONNAIRE.

Where appropriate, data on FINAL COUNTRY QUESTIONNAIRE reviewed by WHO CO.

NDC enters data from FINAL COUNTRY QUESTIONNAIRE into the online database. Hard copies of any supporting documents sent to WHO HQ.

Data validated by NDC, WHO CO, WHO Regional Office and WHO HQ to resolve any inconsistencies and complete any missing responses.

NDC submits copy of FINAL COUNTRY QUESTIONNAIRE to relevant authorities and facilitates government clearance process.

FINAL COUNTRY QUESTIONNAIRE approved by national authorities.
## 2.3 Timeframe for project

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3. Responsibilities of the National Data Coordinator

3.1 Initial steps

- Work with your WHO Country Office to finalize your terms of reference for this project (see Appendix 1).
- Participate in the online NDCs' training seminar scheduled for your region (details will be sent to you).
- Through your Government affiliation, make contact with the relevant authorities (e.g. Ministry of Health, Ministry of Justice, Ministry of Interior) to brief them about the project and your role.
- Develop a timeline for your activities with your WHO Country Office and prepare a budget for these activities.
- Oversee the translation of the RESPONDENT'S QUESTIONNAIRE and GLOSSARY OF KEY TERMS into your local language where necessary. This means working with your WHO Country Office to identify whether translation into a local language is needed. If this is the case, you need to identify a qualified translator (for example, through the WHO country office), and discuss fees (to be included in your budget mentioned above). See Appendix 2. Before approving the work, you will need to ensure that the WHO Country Office has authorized the budget and the use of funds for translation.

3.2 Data collection

As the NDC for your country, you are responsible, in collaboration with your Ministry/Department, and the WHO Country Office (where applicable), for identifying the respondents for the consensus meeting and coordinating the data collection in order to get one FINAL COUNTRY QUESTIONNAIRE. Please follow the steps below.

Step 1: Identify respondents

As the NDC, you will work with your WHO Country Office (where applicable) to select a minimum of 6 and a maximum of 10 key respondents (including yourself). As the questionnaire covers a broad range of violence prevention issues, it is foreseen that 6 to 10 respondents will be needed to adequately answer the range of questions. Note that you will also be a respondent. Each respondent should have credibility at the national level, as well as a good national level knowledge with regards to the violence prevention situation in your country.

The composition of the group MUST include a respondent from each of the following Government institutions or their equivalent, if they exist in your country:

- Ministry of Health/Dept responsible for public health
- Ministry of Justice
- Ministry responsible for law enforcement / police
• Ministry of Interior
• Ministry of Education
• Ministry responsible for gender and women
• Ministry responsible for children and social development

Additional respondents CAN be chosen from the following categories/institutions:
• National statistics office
• Nongovernmental organizations working on violence prevention
• Academics or representatives of other research institutions working on violence prevention research.

Step 2: Inviting the respondents to participate

• Make initial contact with the respondents to explain the project and invite them to become involved. The WHO Country Office can assist with this task where appropriate. In some cases it may be appropriate for you to contact a ministry directly and ask for their nomination of their respondent (see Appendix 3).
• Where possible meet with the respondent to explain the project in more detail.
• If the respondent says that he/she is interested:
  • Send them a formal letter of invitation (see Appendix 4).
  • Once they have confirmed that they will participate, send them the respondents’ package, including:
    1. Sample cover letter (see Appendix 5).
    2. RESPONDENT’S QUESTIONNAIRE, explaining that electronic copies of the questionnaire will be provided for respondents who prefer to complete them electronically.
    3.GLOSSARY OF KEY TERMS.
  • Deadline for sending their copy of the completed RESPONDENT’S QUESTIONNAIRE back to you (i.e. one week prior to Consensus Meeting). Make sure they are aware that they must return their completed questionnaire to you before the Consensus Meeting – individual questionnaires will not be accepted after the Consensus Meeting.
  • Details on the logistics of the Consensus meeting (i.e. when, where, travel, reimbursement of costs [if required], etc).
  • Consensus meeting methodology (i.e. details on the process that will be used for the consensus meeting including explanations on facilitation, expected outcomes of the meeting, and subsequent data clearance, etc).
  • Send reminder messages requesting written confirmation from respondents if you have not heard within a reasonable timeframe (for example, two weeks). Follow up with phone calls and meetings as appropriate to confirm participation and answer any questions.
  • PLEASE ENSURE THAT RESPONDENTS HAVE THE MOST DIRECT METHODS OF REACHING YOU – i.e. your mobile phone number, or e-email address.
Step 3: Organizing the meeting

- Confirm whether your Ministry/Department or the WHO Country Office (where applicable) will convene the meeting.
- Set a date for the consensus meeting to be held no more than 2 weeks AFTER all the respondents receive their questionnaire.
- Arrange a meeting place which is convenient and central. A meeting room of suitable size at your Government office is the preferred location.
- If an external venue is required please negotiate the cost of the meeting place and how this will be paid for with your WHO Country Office and WHO HQ.
- Seek prior approval on other costs that are likely to be incurred as part of the project so that there is agreement between you, your WHO Country Office and with WHO HQ on which costs will be reimbursed, as well as on the process for reimbursement.
- Through your Ministry/Department, issue invitations to all participants, or if WHO is the meeting convener, liaise with the WHO Country Office to ensure all consensus panel members are invited. Only questionnaire respondents should participate in the meeting. No observers should attend except for representatives from the WHO Country Office and WHO HQ who may wish to attend.
- If necessary, liaise with the WHO Country Office and WHO HQ to arrange travel authorization and per diem for participants coming from outside the venue city of consensus meeting.
- If necessary, and if funds are available, (please discuss with your WHO Country Office first) engage an independent facilitator to facilitate the meeting.
- Organize administrative support for the meeting (e.g. for record-keeping) if appropriate.
- Allow at least a half-day – but ideally a full day – for the meeting including refreshments and lunch, the cost of which will be covered by the project funds.

Step 4: Complete your own respondents' questionnaire and collect supporting documents

- Complete your own copy of the RESPONDENTS' QUESTIONNAIRE before coming to the meeting, according to the instructions.
- Begin collecting any supporting documents respondents want to submit.
- Collect copies of completed RESPONDENTS’ QUESTIONNAIRES from other respondents and review ahead of the consensus meeting, to identify areas where there is not yet consensus (you can discuss these issues with your WHO Country Office or WHO HQ ahead of time for advice if necessary).
- Remind respondents to bring their completed questionnaires along with a spare copy and supporting documents to the meeting.
- Take your completed copy of the RESPONDENTS’ QUESTIONNAIRE, the other completed RESPONDENTS' QUESTIONNAIRE and any supporting documents with you to the consensus meeting, as well as a blank copy of the FINAL COUNTRY QUESTIONNAIRE. Consider taking the original English (or other UN language) version of the RESPONDENT'S QUESTIONNAIRE and GLOSSARY OF KEY TERMS to the meeting, in case there are questions regarding translation.
- Make arrangements for translation for online data entry of final country questionnaire, where needed.
Step 5: Facilitating the consensus meeting and completing the FINAL COUNTRY QUESTIONNAIRE

- Please nominate someone who will facilitate the consensus meeting. This could be you, as NDC, or you can nominate an independent facilitator. Try to choose someone with experience facilitating group discussions, ideally someone with good diplomatic skills. Please ensure that the person who will facilitate the meeting is fully briefed in advance of the meeting.

- As NDC, please provide a welcome and introduction, e.g.:
  — NDC gives background of project
  — NDC reviews meeting objectives
  — Respondents introduce themselves, give their background in violence prevention
  — NDC explains how the meeting will work, including role of the facilitator
  — If culturally appropriate, the Facilitator proposes list of ground rules, seeks agreement on the rules, and makes amendments as necessary. See example below.

GROUND RULES
Operating principles that ensure the consensus meeting will run smoothly and effectively. Suggest the facilitator proposes the following core ground rules:
- Decisions will be made by consensus, not by voting.
- Approach the decision on the basis of logic, reasoning and scientific evidence (when available).
- Keep an open mind. Listen to other people’s ideas and seek to understand their reasoning.
- Ask for clarification when you don’t understand.
- Speak up if you disagree. Each participant is responsible for expressing his/her views, especially when those views are different from the group’s.
- Do not change your mind regarding an answer simply to avoid conflict. You should support decisions only when concerns that you consider important have been resolved.
- Formal objections should be used rarely and carefully. Refusal to enter consensus should be based on a very strong belief that the decision is wrong-and that the dissenter(s) would be doing the group a great disservice by allowing the decision to go forward.
- Describe your reasoning so others may understand you, but do not try to argue your position or convince others that your answer is the only correct one. State your case and let them decide for themselves.

The group may wish to add other rules governing behaviour, such as no interrupting, no belittling, no remarks against individuals or their institutions.

- Explain that you are looking for consensus of respondents.

CONSENSUS is reached when a decision is consented to by all group members. Consensus aims for complete agreement and support among participants of the consensus meeting. However when complete agreement is not possible, the facilitator may move ahead with a decision when:

1. There is clear support among the majority of members, AND
2. Not more than two members oppose the decision, AND
3. The dissenters do not feel it is a critical issue to which they are totally and absolutely opposed - i.e. where they are willing, despite their dissent, to ‘stand aside’.

World Health Organization
Consensus does not mean that everyone agrees, or that everyone must be completely satisfied with the final decision – in fact, total satisfaction is rare. The decision must be acceptable enough, however, that all will agree to support the group in choosing it. All participants should have an opportunity to present evidence, express their opinions and feel that they have been listened to by the group.

• You (or the facilitator) should walk the group question by question through the RESPONDENT’S QUESTIONNAIRE and discuss their results.
• If need be, read the accompanying explanation in the GLOSSARY OF KEY TERMS; if all responses match, the facilitator records answer on FINAL COUNTRY QUESTIONNAIRE and moves to next question.
• If responses are discordant, check to make sure that everyone understands the intended meaning of the question. Use the GLOSSARY OF KEY TERMS if needed to clarify interpretation of the questions. Each participant is then asked to present the reasoning behind their answer. Answers that can be justified with supporting documentation should be adopted by the group (e.g. for questions on content of legislation) and documents should then be submitted. If multiple responses are supported by different sources or there is no source to confirm any one answer, the group must discuss the various options until consensus is reached.
• Where respondents are unable to reach consensus on the answer to a question, please keep track of such discussions and record any dissension that arises around particular questions. You can do this on a separate paper, noting the question number you are referring to.
• Collect all supporting documents that respondents have brought to the meeting.
• Collect the RESPONDENTS’ QUESTIONNAIRES from each participant at the meeting, if you were not able to have copies of these before the meeting.
• The output of this meeting should be ONE COMPLETED FINAL COUNTRY QUESTIONNAIRE. The NDC is responsible for ensuring that all answers are complete. Where possible the responses should be in English (for more information on translation see Appendix 2).
• Complete a list of all your respondents’ names and contact details (this also needs to be entered on-line) and include this with documents to be sent to WHO HQ.

Step 6: Follow up post-meeting

• Collect all receipts needed for reimbursement of costs, as previously agreed upon, and submit them (either directly to WHO HQ or via the Country office, depending on the pre-agreed arrangement).

Step 7: Data entry, validation and processing

• After the meeting, go through all the supporting documentation to see that there are no major discrepancies between the panel’s answers and these documents (if there is you will need to re-contact the participants to discuss). Documents are only required in the case of disagreement. If, for instance, all respondents agree that a law exists or
if no respondents object to stating that a particular child maltreatment prevention programme has been implemented, then no supporting documents are required. If, however, there is disagreement about the existence of a particular law, documents supporting its existence must be provided.

- Please make sure that no acronyms are used in the FINAL COUNTRY QUESTIONNAIRE (e.g. write 'Ministry of Health' instead of 'MOH').
- NDCs are responsible for entering the data into the on-line database. Further information on this process will be distributed to you by WHO HQ. Data may only be entered into the database in English.
- TRANSLATION: If the NDC is not comfortable working in English, he/she can enter the data into the FINAL COUNTRY QUESTIONNAIRE in any of the 6 UN languages (i.e. Arabic, Chinese, French, Russian, Spanish) and then this must be translated into English for entry into the online database. This means that you must discuss the issue of translation ahead of time with WHO HQ. Your WHO Country Office may also be able to help with facilitating translation (See Appendix 2 for more information).

- Make copies of all the supporting documents and the respondents' questionnaires and keep these in a safe place.
- Send the original copies of all questionnaires (i.e. the FINAL COUNTRY QUESTIONNAIRE and the RESPONDENTS' QUESTIONNAIRES) and any supporting documents to the WHO Country Office, who will send them on to WHO HQ.
- Continue dialogue with WHO HQ and where necessary communicate with respondents until data has been validated.

**Step 8: Clearing the data**

- Through you Department, facilitate clearance/ministerial approval of the data, which includes the following steps:
  - Once the FINAL COUNTRY QUESTIONNAIRE data has been entered into the online database and validated, you will be sent a form that summarises all the answers from the consensus meeting for your country in a tabular format. This document will be sent to you and you will be responsible for obtaining the clearance of this data.
  - You will need to get clearance for this data from an appropriately senior person in your Ministry. Data that has been cleared in this way will be considered to have been officially endorsed by the country.
  - If there is a WHO country office, get the WR to sign off on this data as well.
  - Make a copy of this form and send the original to WHO-HQ and a copy to the WHO Country Office.
  - Note that the data needs to be cleared within the timeframe that has been developed by you with your WHO Country Office and WHO HQ.

**4. For further information**

For further information, please contact your WHO Country Office or WHO HQ:

Chris Mikton - miktonc@who.int
+41 22 791 3326
5. Appendices

APPENDIX 1: Draft terms of reference for National Data Coordinators

1. Participate in the regional National Data Coordinators virtual meeting (this will be a computer-based "webinar" that enables many individuals to participate in an online seminar and ask questions of the facilitators).
2. Based on the activities described in this INFORMATION FOR NATIONAL DATA COORDINATORS booklet, prepare a budget for data collection activities in your country in collaboration with WHO HQ (which would include costs for renting venue, costs for translation, costs for catering, costs for per diem, etc).
3. Identify Respondents according to the guidelines provided in this booklet.
4. Invite Respondents to participate (official WHO invitation).
5. Coordinate the data collection process as per standardized methodology and tools.
6. Facilitate translation of project materials into local languages as required and in consultation with WHO HQ.
7. Organize the consensus meeting.
8. Facilitate a consensus meeting in which between 6 and 10 experts from governmental and non-governmental organizations and academia who will review the answers and agree in order to obtain answers that reflect views from multiple sectors.
9. Facilitate clearance/ ministerial approval process of the data i.e. Oversee sign off from government on a FINAL COUNTRY QUESTIONNAIRE.
10. Data validation and processing in communication with WHO Country office, HQ, and where necessary with relevant respondents.
11. Ensure that final data are entered into the online collection tool.
12. Serve as counterpart for WHO if questions arise about the information provided.
13. Prepare a short project report according to a template provided by WHO HQ and within a stipulated time period.

- **Duration of contract:** xxx months.

**Advance:** example, 50% (since the NDC is required to organize for the consensus meeting and needs advance expenses for data collection)

**Total Amount:** US$ xxxx

**Terms of Payment:** 50% on signing the contract and the rest on delivering the required products:

1. Translated project documents into local language where necessary;
2. FINAL COUNTRY QUESTIONNAIRE completed as well as ALL original copies of RESPONDENTS’ QUESTIONNAIRE;
3. Enter information of FINAL COUNTRY QUESTIONNAIRE in ENGLISH into online database set up for this project;
4. Provide copies of all supporting background documents;
5. Complete validation and processing of data in ENGLISH in consultation with WHO HQ and Country Office and relevant respondents as applicable;
6. Expenses of consensus meeting and, where necessary, translation costs, should be included in the contract with WHO/CO.
7. The NDC is required to submit a financial statement to WHO following termination of contract tasks.
APPENDIX 2: Translation issues

Materials for respondents
The project materials (RESPONDENTS’ QUESTIONNAIRE, FINAL COUNTRY QUESTIONNAIRE, GLOSSARY OF KEY TERMS) are available in English, Arabic, Chinese, French, Russian and Spanish. If documents are needed in other local languages, the NDC is responsible for organizing this translation process where necessary. This means you need to work with WHO HQ to identify whether translation into a local language is needed. If this is the case, you need to identify a qualified translator (for example, through the WHO country office), and discuss fees. Before approving the work, you will need to ensure that WHO HQ has authorized the use of funds for translation. NOTE THAT THESE COSTS SHOULD BE INCLUDED WITHIN YOUR CONTRACT WITH WHO AS AN NDC.

Final country questionnaire and data entry
- The FINAL COUNTRY QUESTIONNAIRE will also be translated into Arabic, Chinese, French, Russian and Spanish. If the NDC is not comfortable working in English, he/she can enter the data into the FINAL COUNTRY QUESTIONNAIRE in another of these languages. However, in this case, the NDC will need to hire a translator to work with them for data entry. Data entry into the online database can ONLY be conducted in English. This means that the NDC must discuss this issue ahead of time with WHO HQ, so that the process and the cost of this process is properly authorized. The translator would need to work with the NDC to translate any answers from the FINAL COUNTRY QUESTIONNAIRE first (for example, by translating the answers into a WORD document), and then to enter this data into this system, working side by side with the NDC.
APPENDIX 3:  Letter to Ministry to identify respondent

Dear ________________

Re: Global Status Report on Violence Prevention

As you may be aware, to address the problem of violence, in 2002 the World Health Organization launched the *World report on violence and health*. Since 2002, many countries have taken positive steps to begin the implementing the recommendations described in the *World Report*.

However, the precise extent to which countries are implementing all of the *World Report's* recommendations is unclear, and future progress requires that this be systematically measured as a basis for further improvements. Accordingly the *Global status report on violence prevention* is gathering information from Member States using a standardized method to ensure that data collected are comparable. In this way, it will provide the first assessment of the violence prevention situation at the global level, and a snapshot of the state of violence prevention in each country which will serve as:

- a baseline to track future progress in violence prevention internationally;
- a benchmark that countries can use to assess their position in violence prevention relative to other countries, and
- a catalyst to stimulate action at the national level.

It is anticipated that the *Global status report on violence prevention* will generate considerable attention at national and international levels and stimulate action on improving violence prevention in many Member States.

National level data on the status of violence prevention will be collected through the administration of a questionnaire. This will examine existing policies, legislation, programmes, and data collection and information exchange mechanisms.

Data will be collected from all Member States and compiled into a global report, while it is envisaged that at a national level this data will be instrumental in highlighting the country's violence prevention situation.

The project is being coordinated by WHO HQ, and the WHO Country Office.

As violence prevention is a multi-sectoral issue, this project aims to collect data from different sources, including (ADD NAME OF MINISTRY/ORGANIZATION TO WHOM THIS LETTER IS ADDRESSED). For this to occur, we would like you to identify someone within your ministry/organization who would be the best person to fill in the project questionnaire. This questionnaire asks for data relating to a number of areas around violence prevention. This person will be one of a multi-disciplinary team of experts, each of whom will fill in such a questionnaire, over a period of 10 days. Following this, these respondents will be invited to a one day "consensus meeting" to discuss and finalize the questionnaire.
and reach a consensus opinion on one set of answers for the country. The output of this meeting will be one FINAL COUNTRY QUESTIONNAIRE that all the respondents agree best summarizes the violence prevention situation in your country.

Please send me an Email or fax, or contact me by telephone to confirm whether there is someone within your Ministry who would be willing and able to fulfil this task. We will then follow up with this respondent directly. For this purpose, I will be working closely with XXX (NAME OF NDC). In the meantime please feel free to contact WHO Country Office (or NDC directly if there is no Country Office) at the telephone number below.

With best regards,

WHO Representative, (INSERT NAME OF COUNTRY)

If there is no country office then this letter can be sent from the NDC him/herself, on behalf of WHO, and should include the relevant contact details.
APENDIX 4: Sample invitation to questionnaire respondent

World Health Organization

Dear ________________

Re: Global Status Report on Violence Prevention

You have been identified as one of the key violence prevention experts in your country. For this reason, on behalf of the World Health Organization, we would like you to participate in developing a Global status report on violence prevention.

As you may be aware, to address the prevention of violence, in 2002 the World Health Organization launched the World report on violence and health. Since 2002, many countries have taken positive steps to begin the implementing the recommendations described in the World Report.

However, the precise extent to which countries are implementing all of the World Report's recommendations is unclear, and future progress requires that this be systematically measured as a basis for further improvements. Accordingly, the Global status report on violence prevention is gathering information from Member States using a standardized method in order to ensure that data collected are comparable. In this way, it will provide the first assessment of the violence prevention situation at the global level, and a snapshot of the state of violence prevention in each country which will serve as a:

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National level data on the status of violence prevention will be collected through the administration of a questionnaire. This will examine existing policies, legislation, programmes, and data collection and information exchange mechanisms.

Data will be collected from all Member States and compiled into a global report, while it is envisaged that at a national level this data will be instrumental in highlighting the county's violence prevention situation.

The project is being coordinated by WHO HQ, and the WHO Country Office.

Your role in the project, should you accept, will be to provide data by filling in the questionnaire depending on your area of work and to the best of your ability. You will be
one of a multi-disciplinary team of experts, each of whom will fill in such a questionnaire, over a period of 14 days. Following this, you will be invited to a one day "consensus meeting" where all invited respondents, including yourself, will meet to discuss and finalize the questionnaire and reach a consensus opinion on one set of answers for the country. The output of this meeting will be one FINAL COUNTRY QUESTIONNAIRE that all the respondents agree best summarizes the violence prevention situation in your country. The responsibilities are summarized below:

- Prior to the consensus meeting (over a period of 2 weeks), complete the questionnaire to the best of your ability. An instruction booklet is also provided to help with filling in the questionnaire.
- Prior to the consensus meeting, collect as much background violence prevention documentation as you can, according to what is asked for in the questionnaire.
- Attend the consensus meeting (bringing your questionnaire and supporting documentation with you).
- With the facilitation of your National Data Coordinator, (insert name of NDC) participate in discussion at the consensus meeting.
- Assist in disseminating the national results of this project.

(Mr/Ms insert name of NDC). National Data Coordinator will be following up by telephone to confirm whether or not you would be interested in participating in this initiative, and to see whether you have any questions. At this point you will be sent an invitation letter with the details of where and when the consensus meeting will be held, as well as the questionnaire itself and the instruction booklet. In the meantime please feel free to contact WHO Country Office (or NDC directly if there is no Country Office) at the telephone number below.

With best regards,

WHO Representative, (INSERT NAME OF COUNTRY)

If there is no country office then this letter can be sent from the NDC him/herself, on behalf of WHO, and should include the relevant contact details.
Dear ____________

Re: Global Status Report on Violence Prevention

We are delighted that you have agreed to act as a respondent for the Global Status Report on Violence Prevention. Please find attached the respondents' questionnaire and the Instruction booklet, which will help you with filling this in.

- Please fill in the questionnaire according to the instructions.
- Please then send a copy of this questionnaire to me, your National Data Coordinator as soon as you have completed it (by XXXX INSERT DATE). My address is provided below. I will need to review your responses BEFORE the consensus meeting so it is important that I receive these materials in advance of the meeting.
- PLEASE KEEP THE ORIGINAL QUESTIONNAIRE WITH YOU AND BRING IT TO THE CONSENSUS MEETING WITH YOU.
- The consensus meeting will take place on (INSERT DATE XXX) and will be held at (INSERT VENUE). It will take approximately 8 hours, and lunch and refreshments will be provided.
- As you go through the questionnaire you will see that it asks you for a number of supporting documents. When you come to the consensus meeting, please bring these documents with you (but keep a copy for yourself).

I would be grateful if you could confirm your attendance at the consensus meeting as soon as possible and look forward to seeing you on the (XX add date).

With best regards,

NAME (National Data Coordinator, INSERT NAME OF COUNTRY)
POSTAL ADDRESS
E-MAIL ADDRESS
## Table of acronyms and terms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>CO</td>
<td>Country offices of WHO</td>
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<tr>
<td>GSRVP</td>
<td>Global status report on violence prevention</td>
</tr>
<tr>
<td>MoH</td>
<td>Ministry of Health</td>
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<tr>
<td>MoJ</td>
<td>Ministry of Justice</td>
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<tr>
<td>NDC</td>
<td>National Data Coordinator</td>
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<tr>
<td>NGO</td>
<td>Nongovernmental organization</td>
</tr>
<tr>
<td>Respondent's questionnaire</td>
<td>Questionnaire that is filled in by each of the respondents, and brought with them to the consensus meeting. The NDC should also fill in one such questionnaire.</td>
</tr>
<tr>
<td>Final Country questionnaire</td>
<td>The FINAL COUNTRY QUESTIONNAIRE is the instrument that the NDC will fill in during the consensus meeting. It reflects the agreed upon responses of all respondents (including the NDC) and is the final data that will be submitted for each country.</td>
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