

# Migrant Clinician Network (MCN) is accredited as an approved provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

- To receive continuing education credits for this activity, the participant must complete a post-activity evaluation.
- Once successful completion has been verified, each participant will receive a letter and certificate of successful completion that details the number of contact hours that have been awarded.
- The planning committee members, presenters, faculty, authors, and content reviewers of this CNE activity have disclosed no relevant professional, personal, or financial relationship related to the planning or implementation of this CNE activity.
- This CNE activity receive no sponsorship or commercial support.
- This CNE activity does not endorse any products.

FOR QUESTIONS OR ADDITIONAL INFORMATION PLEASE CONTACT: JILLIAN HOPEWELL – jhopewell@migrantclinician.org

## Conflict of Interest Disclosure

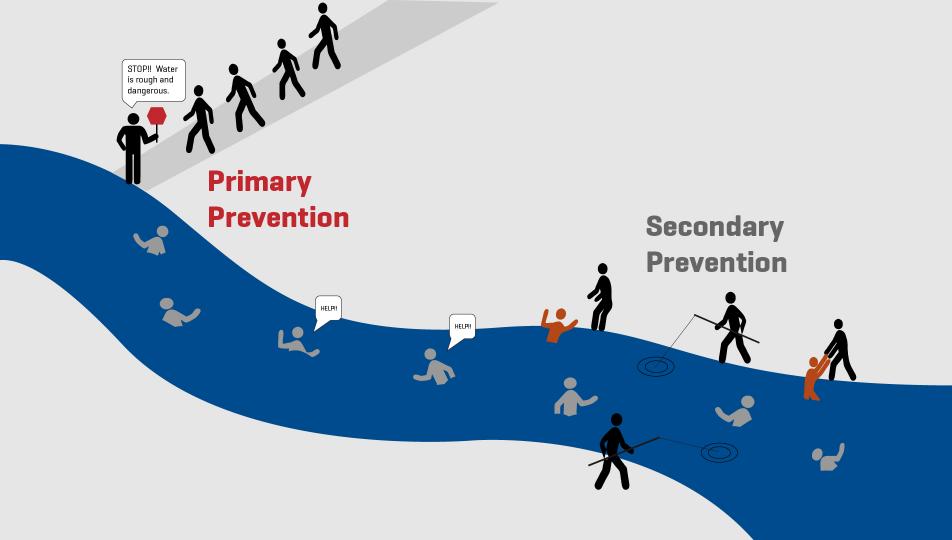
We have no real or perceived vested interests that relate to this presentation nor do we have any relationships with pharmaceutical companies, biomedical device manufacturers and/or other corporations whose products or services are related to pertinent therapeutic areas.

# Poll Question



## Outcomes.

- ☐ Methods on how to begin a conversation on sexual and intimate partner violence with Latino migrant men
- ☐ Knowledge on efforts to continue to engage Latino migrant men in sexual and intimate partner violence prevention
- ☐ Skills on how to incorporate existing efforts with your population

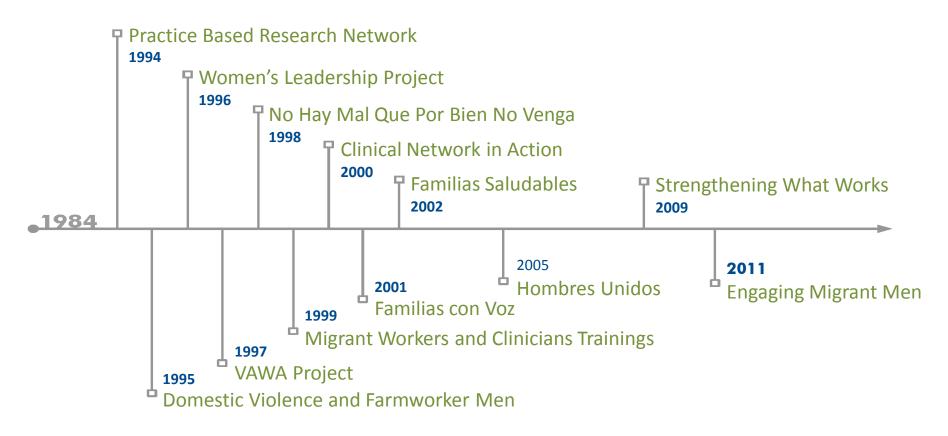


# Get Men Involved! Hombres Unidos Contra la Violencia Familiar



Primary prevention of S/IPV in male Hispanic migrant community through a culturally relevant program model aimed at positively affecting knowledge, attitudes, beliefs and behaviors of program participants

#### History of Family Violence Prevention Program



# Risk Tiers

#### Individual

low self esteem, depression, unemployment, gender roles, prior history, low academic achievement, desire for power and control, etc.

#### Relationship

marital instability, male dominance, economic stress, unhealthy family relationships, etc.

#### Community

poverty, low social capital, peer behaviors and attitudes, weak community IPV sanctions, etc.

#### Societal

gender norms, societal norms that maintain women's inferiority, high violence tolerance levels.



Risk Factors vs Protective Factors

# Risk Factors

#### **Latino Migrants**

- Low Academic Achievement
- Job Insecurity
- Live under poverty lives
- Male dominated culture Machismo
- Language Barriers
- Live in Geographically Isolated Areas
- Documentation?

# **Protective Factors**

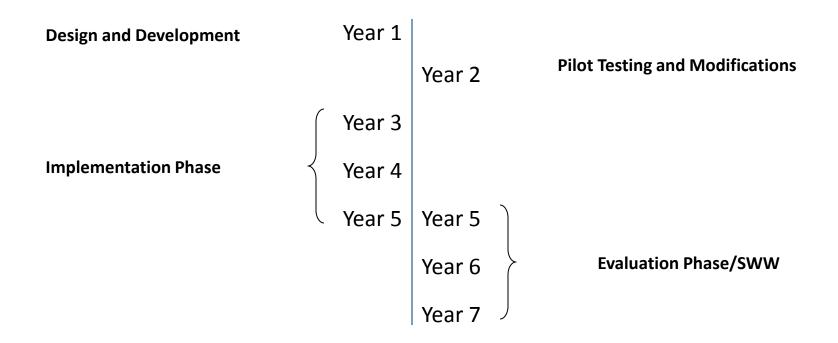
- Emotional health
- Connectedness with friends & adults
- High socioeconomic status

## Latino Migrants

- Familism
- Respectism
- Collectivism
- Personalism



#### Design



# Workshop Ideology

- Men can be naturally loving, sensitive, nurturing human beings.
- Many men can and want to help stop violence against women.
- Men who provide support for each other have the power to change the social acceptance of violence.
- We cannot define perfection and we can only change ourselves; we cannot change anyone else.

#### Strategy

**Identify and Train Facilitators** 

**Recruit Participants** 

Provide Participants with Vocabulary and Concepts

Linkage of Concepts to Daily Lives

**Evaluation** 



# Poll Question

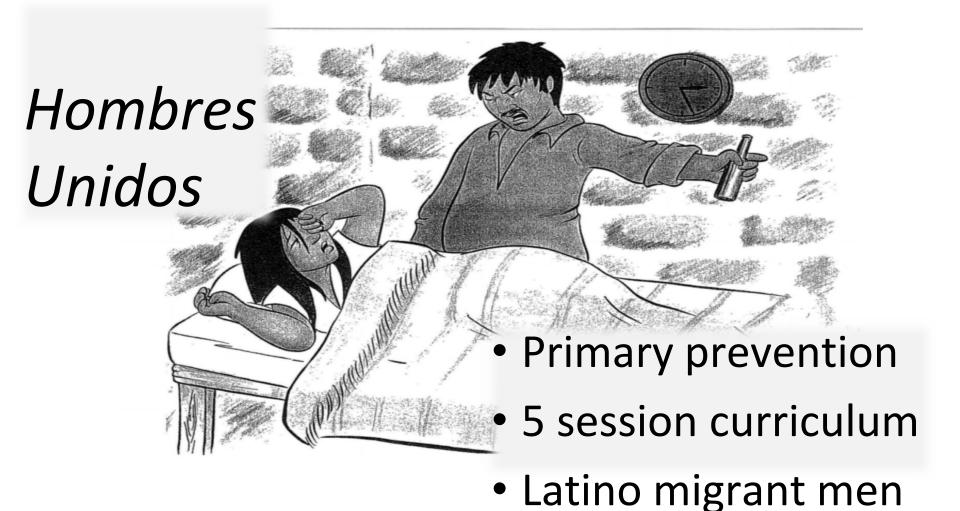






# Facilitators

- Train
- Recruit
- Facilitate
- Communicate with MCN/Organization



Source: MCN Hombres Unidos curriculum





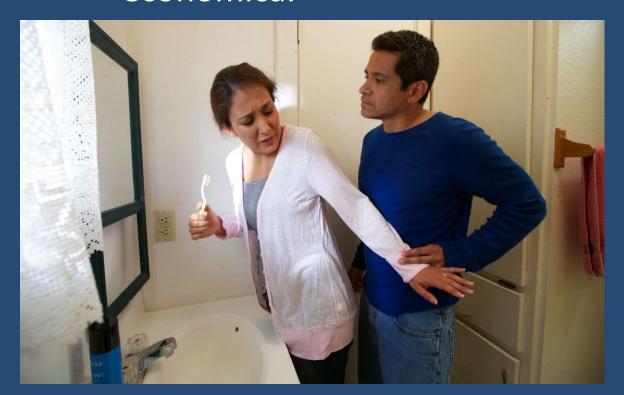
## **Outcomes**

- 3 messages were selected
- Men selected the messages felt the best way to communicate these messages to their peers is through video WITH the opportunity to discuss these messages.
- MCN created three videos with accompanying print pieces and discussion guides.





La violencia no es solo física. Es emocional, sexual y económica.



https://www.youtube.com/w atch?v=YkP6-BmWCYM



## Para. Mantegase calmado. Y evite la violencia.



https://www.youtube.com/wa tch?v=ZvgPc8fp6vA



## Mis palabras pueden causar daño a mi pareja.



https://www.youtube.com/walch?v=Q2hgJFTtR9M

Recognize the problem Educate the public Screen routinely Primary prevention focus Ongoing staff education New data sources Strategies for intervention Engage with community partners

PUBLIC HEALTH RESPONSE TO IPV

## **RESPONSE**

# Assessment screening



# Assess yourself!

- The first task of assessment is for providers to examine their own feelings and beliefs about abuse.
- Physical abuse has long been minimized:
  - "It was only a slap" diminishes it.
  - "She is impossible" justifies it.
  - "Spare the rod and spoil the child" condones it.
  - "I just don't believe it happens, certainly not during pregnancy" denies it.

## Pause to Ponder

- What comments have you heard that minimize abuse, justify abuse and deny abuse?
- What was the setting when the comments were made?
- How did people respond to the comments?

# ASSESSMENT IS THE FIRST STEP OF INTERVENTION

Listening and affirmation are invaluable to victims.

#### ASSESSMENT AS INTERVENTION



### **Primary Prevention:**

For clients who are not experiencing abuse, screening affirms that IPV is an important health care issue and provides an opportunity to talk about healthy relationships and the warning signs of an abusive relationship.

#### ASSESSMENT AS INTERVENTION

PRIMARY PREVENTION

**SECONDARY PREVENTION** 

#### **Secondary Prevention:**

In the early stages of an abusive relationship, early identification and intervention can prevent serious injuries and chronic illnesses as the violence escalates and the entrapment increases.



SECONDARY PREVENTION

TERTIARY PREVENTION

#### ASSESSMENT AS INTERVENTION

### **Tertiary Prevention:**

In relationships with escalating violence, screening provides the opportunity for disclosure in a safe and confidential environment. Even if clients do not feel safe disclosing their abuse, giving supportive messages can end their isolation and let them know that they have options.





# Products

# Questions?



Candace Kugel, CRNP, CNM, RN
Clinical Specialist
Migrant Clinicians Network
ckugel@migrantclinician.org



Deliana Garcia, MA

Director, International Projects and Emerging Issues
Migrant Clinicians Network
512-579-4501
dgarcia@migrantclinician.org