

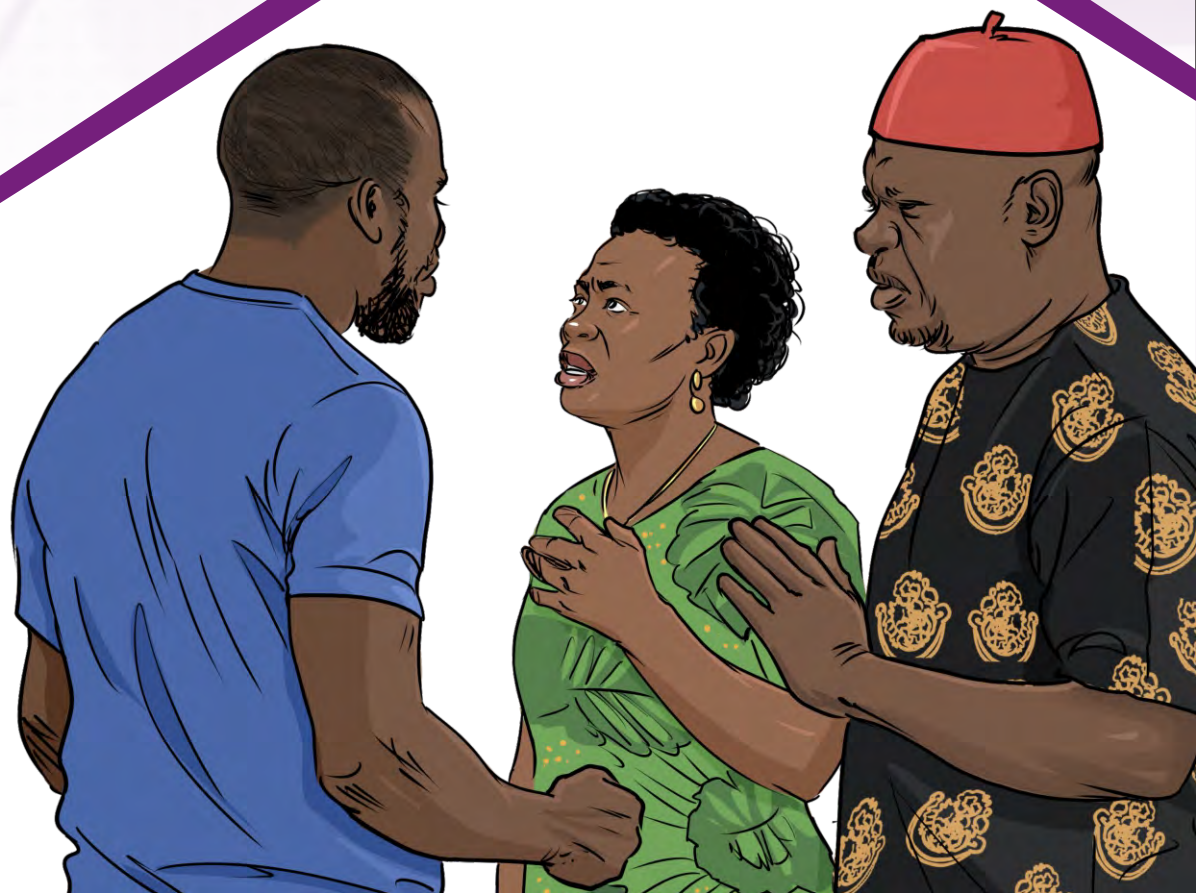
GUIDELINE

FOR THE PREVENTION OF

INTIMATE PARTNER

VIOLENCE

Imo State - Nigeria





Preface

Intimate Partner Violence (IPV) constitutes one of the most persistent and destructive forms of Gender-Based Violence (GBV), manifesting in both public and private spheres. It is defined not merely by the acts of violence but by the power dynamics underpinning them. IPV occurs within the framework of intimate relationships, marital, cohabiting, or dating and includes a spectrum of abusive behaviours ranging from physical assault to psychological manipulation and economic deprivation. What distinguishes IPV from other forms of GBV is the proximity, trust, and emotional dependency that often exist between victim and perpetrator, thereby deepening both the harm inflicted and the barriers to escape.

In many societies, IPV is sustained and normalised by entrenched patriarchal structures that privilege male dominance and female subservience. These cultural scripts often obscure or excuse abusive behaviours, particularly those that do not leave visible scars, such as coercive control or financial isolation. Legal systems, too, frequently lag in providing adequate recognition and redress, especially in contexts where marital rape remains uncriminalised or psychological abuse is not legally actionable. Consequently, victims are left trapped in cycles of violence that are socially sanctioned, institutionally overlooked, and psychologically debilitating.

Understanding IPV requires attention not only to the acts of violence but to the systemic patterns of control that characterized abusive relationships. The evolution of scholarly and institutional definitions from focusing on isolated incidents to recognizing sustained domination reflects a broader shift toward more nuanced understandings of power

and harm. This conceptual clarity is necessary for formulating effective legal, social, and therapeutic responses. It also allows for a more inclusive and context-sensitive engagement with the lived realities of victims, whose experiences are often shaped by intersecting factors such as poverty, race, religion, and sexuality.

Intimate Partner Violence (IPV) represents a daunting public health challenge in Imo State, mirroring a broader trend across Nigeria. Research confirms that nearly one in four women experience IPV in their lifetime, with devastating impacts on their physical, reproductive, and mental health.

The ecological framework makes it clear that IPV does not stem from a single cause, but rather from the interplay of factors at multiple levels. Individual risks such as low education, limited decision-making power, early marriage, and alcohol misuse intersect with community influences like patriarchal norms, acceptance of violence, and weak local accountability. At the societal level, deeply ingrained gender inequality and tolerance for wife-beating reinforce patterns of abuse.

A groundbreaking multilevel study of Nigerian women demonstrates that higher individual status, such as education, economic participation, and autonomy, can reduce IPV risks. However, this protective effect is neutralised when community norms among men still condone violence. In other words, empowering women is vital, but changing community attitudes is equally essential.

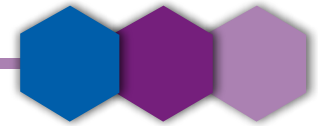


Table of Content

INSTRUCTIONS ON HOW TO USE THIS GUIDELINE	5
INTRODUCTION TO INTIMATE PARTNER VIOLENCE IN IMO STATE	6
PROMOTING HEALTHY RELATIONSHIP SKILLS AND SOCIAL NORMS	7
Introduction	7
Recommendations	8
a. Promote Mutual Respect & Equality in Relationships	8
b. Encourage Effective Communication & Conflict Resolution	9
c. Build Emotional Intelligence in Schools & Communities	10
Key Actions for Practitioners:	10
d. Encourage Conflict Resolution & De-Escalation Training to Prevent Relationship Based Violence	11
e. Foster Individual Accountability and Consent	11
ECONOMIC EMPOWERMENT AND EDUCATION	13
Introduction	13
Recommendations	14
a. Promote Financial Independence & Economic Literacy	14
b. Cultivate Practical Decision Making Abilities	14
1. Break Down Problems into Manageable Steps	
2. Encourage Joint Decision Making Where Safe	
3. Model Reflective Thinking in Conflict Situations	
4. Use Practical Scenarios for Learning	
5. Support Youth and Young Couples with Skills Based Training	
c. Encourage personal and professional development	15



COMMUNITY BASED SUPPORT SYSTEM

16

Introduction

16

Recommendations

17

- a. Support for Children & Families
- b. Availability and Access to Safe Homes & Shelters
- c. Access to Legal Support & Services
- d. Culturally Sensitive & Inclusive Support

17

17

17

18

MENTAL HEALTH AND COUNSELLING

19

Introduction

19

Recommendations

21

- a. Trauma Informed Counselling
- b. Access to Mental Health Services & Counselling
- c. Incorporation of Cognitive Behavioural Therapy & Other Modalities

21

21

22

BYSTANDER INTERVENT

23

Introduction

23

Recommendations

24

- a. Promote Awareness & Education on Bystander Responsibilities
- b. Encourage Actions Across Contexts

22

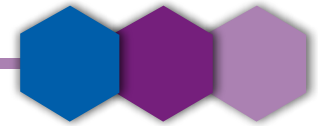
24

The 3D Approach - Practical Ways to Step In

24

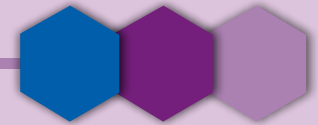
- c. Promote the 3D Method of Bystander Intervention

25

**BEST PRACTICE 26****RESEARCH METHODOLOGY 28**

1. Establish a Committee of Experts 28
2. Learn from the Experiences of Local Justice Providers (collect practice based evidence) 28
3. Collect Evidence from the Literature & Propose Recommendations (evidence based practice) 28
4. Experts Review the First Draft of the Guideline 35

COMMITTEE OF EXPERTS 36**HiiL TEAM 36****RESEARCHERS 36****DESIGN 36****CONTACT 37**



Instructions on how to use this guideline

This guideline provides a foundation for evidence-based practice in the prevention of intimate Partner violence. The Guideline contains 19 recommendations that support practitioners in their efforts to help individuals. The guideline follows a process from problem to solution and suggests ways for practitioners to reach agreements in preventing intimate partner violence and creating a safe space for survivors.

As a local leader, lawyer, paralegal, mediator, or any other practitioner, you are required to follow the law. You should always rely on your expertise and experience and act accordingly in each case. All recommendations in the guideline are generalised and do not take into account specific situations that require exceptions. Therefore, a professional assessment on a case-by-case basis is essential to make the best decisions possible.

The recommendations listed in the Intimate Partner Violence Guideline are established according to a method widely applied in medical practice (PEO/PICO/GRADE). It combines local practice from both formal and informal systems and research on 'what works'. This distinguishes the guideline from existing legal guidelines.

Recommendations are categorized into four groups:

Strongly Recommended ★★★★★	The intervention is desirable and the quality of evidence is high. <i>Apply recommendation and advise parties accordingly.</i>
Recommended ★★★	The intervention is desirable and the quality of evidence is moderate or low. <i>Apply recommendation and advise parties accordingly.</i>
Context-specific Recommendation ★★ ★	The intervention is desirable in a specific context and the quality of evidence is high, moderate or low. <i>Apply recommendation only in the right circumstances and advise parties accordingly.</i>

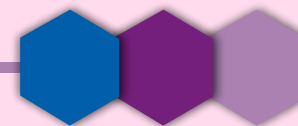


Introduction to Intimate Partner Violence in Imo State

Intimate Partner Violence (IPV) remains a serious challenge affecting the safety, health, and dignity of individuals across Imo State. It includes a range of harmful behaviours, physical, emotional, psychological, sexual, and economic abuse, committed by a current or former partner. IPV often takes place in private settings, making it difficult to detect and even harder to address, particularly where victims feel silenced by stigma or fear of retaliation.

In Imo State, social and cultural norms continue to shape how relationships are formed and maintained. While families and communities are deeply valued, traditional expectations around gender roles can sometimes reinforce unequal power dynamics, creating conditions where IPV goes unchallenged. Women and girls, in particular, face higher risks, although men and boys may also be affected and often underreport due to shame or lack of support.

Responding to IPV requires more than legal remedies. It involves prevention, community engagement, survivor support, and a deeper awareness of the root causes of violence. Both formal justice institutions and informal actors—such as traditional leaders, religious authorities, and family mediators—play a vital role in addressing this issue. This guideline aims to strengthen these efforts, providing practical tools for preventing IPV, supporting individuals affected by it, and promoting healthier, more respectful relationships with people of Imo State.



1 | PROMOTING HEALTHY RELATIONSHIP SKILLS AND SOCIAL NORMS:

INTRODUCTION

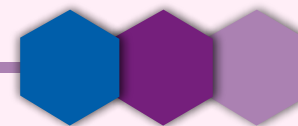
Healthy relationships are essential for strong and peaceful communities. They are rooted in respect, open dialogue, empathy, and shared responsibility. When these values are upheld, individuals feel secure, appreciated, and better able to support one another and contribute meaningfully to society.

In many communities across Imo State, certain long-held traditions and social beliefs can unintentionally perpetuate inequality in relationships. These cultural norms, often passed down over generations, sometimes grant one partner more authority or control, making it more challenging to achieve a proper balance and fairness between couples.

This section provides practical advice and strategies for community leaders, justice professionals, and others involved in resolving family and relationship issues. With a deeper understanding of how cultural dynamics shape intimate relationships, stakeholders can take informed, sensitive actions that promote healthy, respectful behaviour.

The aim is to support a shift in attitudes, challenging the beliefs that excuse or overlook abuse, and to help build a community culture where fairness, mutual care, and nonviolence are the standard in every household.





RECOMMENDATIONS

In this section, you can find the recommended interventions which the practitioner can apply. Any judge, arbitrator, traditional leader, religious leader, lawyer, paralegal, mediator, therapist, advisor, or other relevant professional is encouraged to use the following recommendations.

A. PROMOTE MUTUAL RESPECT & EQUALITY IN RELATIONSHIPS

A healthy relationship is one where both partners treat each other as equals. This means no one partner dominates or controls the other each person's voice, needs, and contributions are valued. Mutual respect involves active listening, nonviolence, shared responsibilities, and decision-making processes that consider the well-being of both parties. In many communities, including in parts of Imo State, traditional views may assign more authority to one partner (typically the man), which can lead to imbalance, emotional harm, or even abuse. Promoting respect and equality reduces the risk of violence and creates safer, more cooperative family environments, especially for women and children.

Practitioners should encourage couples to recognize each other as equal partners during mediation or counselling sessions. Reinforce that both partners have a right to be heard and to contribute to family decisions.

Practitioners should use local values to support the message, such as proverbs or religious teachings that promote fairness and mutual honour (e.g., "a home built on peace lasts longer").

Discourage practices that foster control or dominance, such as one-sided decision-making or isolating a partner from family or community.

Model and reinforce respectful communication by guiding discussions without blame or humiliation.

Involve both men and women in workshops that challenge stereotypes and encourage shared domestic and parenting roles.

Strongly Recommended ★★★



B. ENCOURAGE EFFECTIVE COMMUNICATION AND CONFLICT RESOLUTION

Disagreements are a regular part of any relationship, but how couples handle them can either strengthen or damage their bond. Effective communication means expressing thoughts, concerns, and feelings clearly and respectfully, while also listening to the other person without judgment. Conflict resolution involves finding common ground and working through disagreements without resorting to shouting, insults, or violence. Disagreements are an inevitable and normal component of any relationship, reflecting the unique perspectives and needs of each individual involved. Far from being inherently destructive, how couples navigate and resolve these differences holds the power to either significantly reinforce their connection or, conversely, inflict lasting damage.

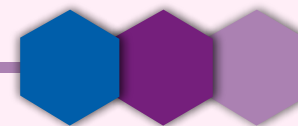
At the core of healthy conflict management lies effective communication. This encompasses not only the clear and respectful articulation of one's thoughts, concerns, and feelings but also the equally crucial skill of active, non-judgmental listening. When expressing oneself, it is vital to use "I" statements to convey personal experiences and emotions without assigning blame, for example, "I feel frustrated when..." instead of "You always make me frustrated." Respectful communication also means choosing appropriate times and settings for discussions, avoiding discussions when emotions are running too high, and focusing on the specific issue at hand rather than bringing up past grievances.

Equally important is the ability to truly hear and understand the other person's perspective. It involves paying full attention, refraining from interrupting, asking clarifying questions, and reflecting on what you hear to ensure accurate comprehension. It means setting aside preconceived notions and genuinely attempting to empathise with their point of view, even if it differs from your own. Listening without judgment fosters a sense of psychological safety, encouraging openness and honesty.

Conflict resolution, therefore, is not about one person "winning" and the other "losing," but rather about collaboratively finding common ground and working through disagreements in a constructive manner. This process explicitly excludes destructive behaviours such as shouting, which escalates tension and shuts down productive dialogue; resorting to insults, which are deeply hurtful and erode respect; or, most critically, any form of violence, which is never acceptable and constitutes a severe abuse of power. Instead, healthy conflict resolution involves:

Ultimately, the goal is to emerge from disagreements with a stronger understanding of each other, reinforced trust, and a renewed sense of partnership, rather than resentment or further division. This continuous process of learning and adapting strengthens the foundational elements of any healthy relationship.

Strongly Recommended ★★★



C. BUILD EMOTIONAL INTELLIGENCE IN SCHOOL AND COMMUNITIES

Emotional intelligence is the ability to understand and manage one's own emotions and to relate well to others. It encompasses self-awareness, empathy, and self-control, all of which are crucial for maintaining healthy relationships. When individuals, especially young people, learn how to recognize and respond to their emotions and those of others, they are better equipped to avoid conflict and build respectful relationships.

Developing emotional intelligence is strongly encouraged, as it helps individuals better understand and manage their own emotions while responding thoughtfully to others. When people learn to recognise and reflect on their feelings, they become more capable of handling relationship challenges with empathy and care. Emotional intelligence encourages maturity by reducing impulsive reactions and emotional outbursts. It also supports calm, respectful communication, especially during times of stress or disagreement. This emotional awareness not only strengthens personal resilience but also helps build healthier, more supportive relationships.

KEY ACTIONS FOR PRACTITIONERS

Integrate Emotional Intelligence into Conflict Mediation

Help individuals recognise emotional triggers (e.g., anger, jealousy, frustration) and discuss their root causes.

Guide parties in expressing emotions calmly, using "I" statements rather than blaming or accusing others.

Use Practical Tools During Sessions

Encourage reflective practices such as journaling or self-check-ins before responding during conflict.

Introduce role-play scenarios to practice responding to disagreements with empathy and patience.

Train and Support Couples or Individuals

Offer group sessions or one-on-one coaching focused on emotional awareness, stress management, and de-escalation skills.

Refer individuals to counselling or therapeutic services where available.

Engage Community Influencers and Educators

Encourage schools, youth groups, and faith-based institutions to incorporate themes of emotional intelligence into their programming.

Share local proverbs, religious teachings, or traditional wisdom that support patience, empathy, and peaceful resolution.

Model EI in Practice

Practitioners should lead by example, demonstrating respectful listening, calm responses, and empathy in their interactions with families and communities.



D. ENCOURAGE CONFLICT RESOLUTION AND DE-ESCALATION TRAINING TO PREVENT RELATIONSHIP BASED VIOLENCE

Disagreements are a natural part of all relationships, but when individuals lack the skills to handle conflict in healthy ways, tensions can escalate quickly into emotional, verbal, or physical violence. Conflict resolution and de-escalation training equip individuals with practical tools to manage stress, express their needs calmly, and prevent arguments from escalating into harmful or abusive situations.

Practitioners should promote training sessions, both formal and informal, that teach individuals how to listen actively, manage their emotions, and respond without aggression. These sessions can be introduced in schools, faith-based settings, community groups, or even during mediation processes. It is imperative to include strategies such as taking time-outs during heated moments, recognising triggers, and using respectful language.

Training should be adapted to reflect the local culture and values of communities in Imo State. Using familiar stories, proverbs, or conflict scenarios helps people relate to the concepts more easily. Sessions should involve couples, youth, and extended family members to ensure everyone understands their role in maintaining peace and resolving disagreements constructively.

By investing in these skills, communities can reduce the likelihood of

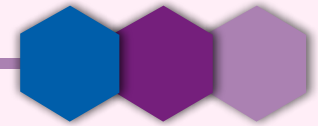
violence at home, strengthen relationships and create a more supportive environment for addressing tension before it escalates.

Many cases of intimate partner violence start from unmanaged conflict, emotional outbursts, or unresolved disagreements. Teaching people how to handle disputes without resorting to insults, threats, or physical force helps reduce the risk of violence and supports more respectful, peaceful relationships. Unmanaged conflict, emotional outbursts, and unresolved disagreements are frequent causes of intimate partner violence. By teaching individuals how to manage disputes without resorting to insults, threats, or physical force, we can mitigate the risk of violence and foster more respectful, peaceful relationships.

Recommended ★★

E. FOSTER INDIVIDUAL ACCOUNTABILITY AND CONSENT

Intimate partner violence often stems from power imbalances and a lack of respect for a partner's autonomy. Teaching personal accountability reinforces the idea that each individual is responsible for their behaviour, regardless of emotions, past experiences, or external pressures. Consent, on the other hand, ensures that decisions within a relationship, whether emotional, physical, or sexual, are made mutually and willingly, without force, pressure, or manipulation.



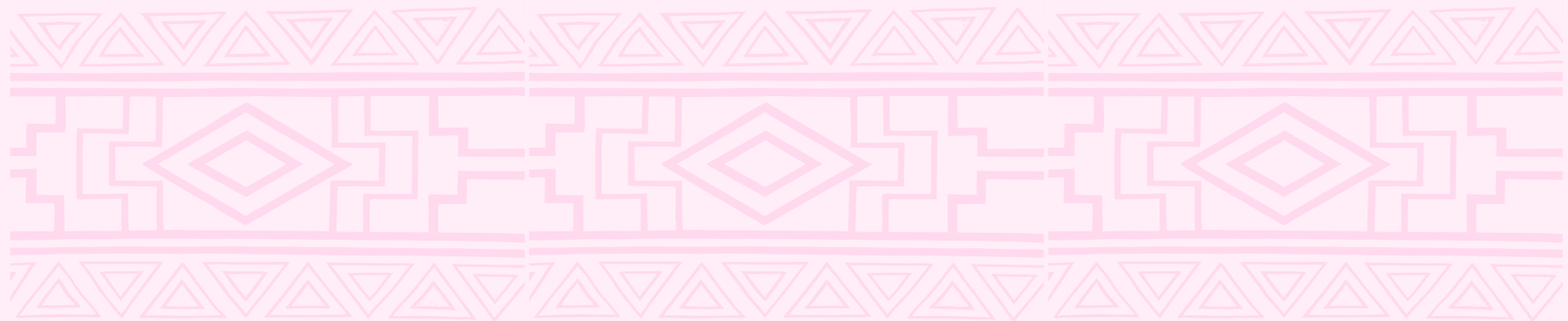
Understanding both concepts helps prevent coercive behaviours, reinforces respect, and builds the foundation for safe and equal relationships.

Respect, honesty, and shared responsibility are at the heart of safe and meaningful relationships. When people understand and accept that their actions have real consequences, especially in their relationships, they are more likely to treat their partners with care and restraint. This is what we mean by personal accountability: the ability to acknowledge how one's behaviour affects others and to take responsibility for making better choices.

Consent, on the other hand, is often misunderstood or ignored in intimate relationships. Especially in communities where traditions strongly influence relationship roles, some partners believe that agreement or submission is automatic once a relationship or marriage begins. This is not true. Consent must be given freely and clearly. It must never be assumed.

When these two principles, accountability and consent, are absent, the door opens to harmful patterns of control, manipulation, or even violence. For those working with families and couples, teaching these values is key to preventing intimate partner violence.

Recommended ★★



2 | ECONOMIC EMPOWERMENT AND EDUCATION

INTRODUCTION

Economic stability and access to education are key foundations for personal dignity and safer family life. When individuals, especially women and young people, have opportunities to earn a living and develop their skills, they become more confident, independent, better equipped to make informed decisions about their relationships, and overall well-being.

In many communities across Imo State, financial dependence and lack of access to formal or vocational education leave individuals, particularly women, more vulnerable to manipulation, abuse, and long-term hardship.

Economic power imbalances can make it difficult for survivors of violence to leave harmful situations or negotiate safer conditions within their relationships.

Investing in livelihood training, adult learning opportunities, and support for school aged children not only enhances household security but also helps break cycles of control and silence. This section guides

practitioners and community actors in promoting economic and educational support as long-term strategies to reduce vulnerability and prevent violence within families.





RECOMMENDATIONS

In this section, you can find the recommended interventions which the practitioner can apply. Any judge, arbitrator, traditional leader, religious leader, lawyer, paralegal, mediator, therapist, advisor, or other relevant professional is encouraged to use the following recommendations.

A. PROMOTE FINANCIAL INDEPENDENCE AND ECONOMIC LITERACY

Financial dependence is one of the most common reasons individuals, particularly women, remain in abusive or controlling relationships. When a person lacks a source of income or access to basic financial knowledge, they may feel trapped, powerless to make decisions for their safety, or unable to leave harmful situations.

Promoting financial independence and teaching financial literacy is not just about earning a living; it is also about achieving a sense of security and stability. It is about giving individuals the tools to plan, budget, save, and access support. These essential skills build confidence and shift the balance of power within families toward fairness and mutual respect.

As a practitioner, encouraging this kind of empowerment can break the cycle of dependency and reduce the risk of continued abuse.

Involve spouses and community leaders in discussions about shared decision-making, equitable financial contributions, and mutual respect for autonomy.

Clarify that a financially empowered partner is not a threat to the household but a strength.

Strongly Recommended ★★★

B. CULTIVATE PRACTICAL DECISION MAKING ABILITIES

Effective decision-making empowers individuals, particularly women, to navigate relationship challenges with confidence. When people gain clarity, trust, and control over their choices, they're more likely to take decisive, health-promoting actions rather than passively enduring harmful situations. Empowering individuals with the ability to make thoughtful and informed decisions is crucial for reducing vulnerability, enhancing self-confidence, and promoting personal accountability, particularly in relationships and family life.

Cultivating practical decision-making abilities means helping individuals build the skills and confidence to make informed, thoughtful choices in their daily lives, especially during difficult or high-stress situations, such as those related to preventing intimate partner violence (IPV) or promoting personal empowerment.

Recommended ★★



C. ENCOURAGE PERSONAL AND PROFESSIONAL DEVELOPMENT

When we talk about preventing intimate partner violence, we often focus on laws, support services, or community awareness. However, real change also occurs when people, whether they're survivors, advocates, or everyday community members, are supported to grow both personally and professionally. Personal development builds confidence, self-respect, and the ability to set healthy boundaries. Professional growth equips individuals with the tools and knowledge to support others with empathy, skill, and the courage to do so. Both are essential.

We have seen how people who once felt powerless can, over time, become strong voices in their communities, leading change, offering support, or simply living without fear. That transformation does not come from just giving advice or training; it comes from creating an environment that allows people to learn, reflect, and develop confidence in themselves.

At its heart, encouraging growth is not about ticking boxes. It is about standing beside people, helping them build confidence, and reminding them that they have something important to offer, not just to others, but to themselves as well.

In many Nigerian communities, helping people grow personally and professionally can make a real difference in preventing intimate

partner violence (IPV). When women and men have the chance to build confidence, learn practical skills, or earn an income, they are in a better position to recognise abuse and make safer choices.

But it is not only about training or information. It's about being present, walking with people as they find their voice, rebuild their self-worth, and imagine a life free from violence. For many survivors, knowing they are not alone is the first step to healing. Support can come from a mentor, a neighbour, a religious leader, or a local women's group. These relationships matter.

When people grow, families grow. And when families grow, communities become stronger. By investing in personal and professional development, we help create a culture where safety, dignity, and mutual respect become the norm, not the exception.

Strongly Recommended ★★★



3 | COMMUNITY BASED SUPPORT SYSTEM

INTRODUCTION

Intimate Partner Violence (IPV) thrives in environments where individuals lack the resources, support, and confidence to make independent decisions. One of the most sustainable ways to reduce vulnerability to IPV is by investing in the personal and professional growth of individuals. When people, especially women and youth, are equipped with the knowledge, skills, and confidence to build a stable future, they are better positioned to leave harmful relationships, assert their rights, and contribute meaningfully to their communities.

Supporting individuals, especially survivors and those at risk, with growth opportunities can improve self-esteem, promote financial independence, and reduce vulnerability to intimate partner violence (IPV). Personal and

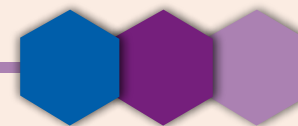
professional development enhances resilience, providing individuals with the tools to build safer and healthier lives.

Creating an enabling environment is key to helping individuals regain control over their lives and reduce vulnerability to Intimate Partner Violence (IPV). Empowerment should be holistic, addressing emotional,

educational, social and economic well being.

Empowerment is not just about leaving an abusive relationship; it is about building a life of safety, stability, and purpose. Helping individuals grow personally and professionally reduces dependency and strengthens their capacity to make informed decisions.





RECOMMENDATIONS

This section of the guideline highlights how justice practitioners, support workers, and community leaders can foster personal and professional development as a tool for empowerment. By promoting lifelong learning, vocational training, mentoring, and career-building opportunities, stakeholders can help break cycles of dependency and abuse, supporting survivors not just in escaping violence but in thriving beyond it.

A. SUPPORT FOR CHILDREN AND FAMILIES

Intimate Partner Violence (IPV) affects not only the individuals directly involved but also has a profound and long-lasting impact on children and other family members. Offering targeted support to children and families is essential to breaking the cycle of violence and fostering healing, resilience, and healthy relationships.

It is highly recommended to offer comprehensive support for children and families impacted by IPV. Providing trauma-informed counselling, safe spaces, and educational assistance ensures that children of survivors receive the necessary emotional and psychological care to heal from the effects of violence. This not only promotes the long-term well-being of the next generation but also reduces the likelihood of them experiencing or continuing cycles of violence.

Additionally, supporting the entire family can help strengthen family bonds and enable survivors to restore a sense of stability and emotional well-being, contributing to a safer and healthier environment for rebuilding their lives.

Strongly Recommended ★★★

B. AVAILABILITY AND ACCESS TO SAFE HOMES AND SHELTERS

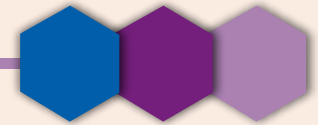
Ensuring availability and access to safe homes and shelters is a vital component in preventing and responding to Intimate Partner Violence (IPV). Survivors often face the threat of continued harm or have no secure place to go. Practitioners play a crucial role in connecting survivors to safety, restoring dignity, and promoting long-term healing.

Unfortunately, there are no safe houses or shelters for victims of domestic violence in Imo State. However, it is advisable to stay with relatives until the victim can become independent.

Context Specific Recommendation ★

C. ACCESS TO LEGAL SUPPORT AND SERVICES

For survivors of Intimate Partner Violence (IPV), access to timely, affordable, and survivor-centred legal support is often a critical step in achieving safety, justice, and recovery.



Legal systems can offer protection orders, child custody arrangements, divorce proceedings and redress for harm, but only if survivors are aware of their rights and can navigate the process safely.

Unfortunately, many individuals face significant barriers, including the high cost of legal services, fear of retaliation, a lack of information, or distrust of legal institutions. This is especially true for marginalized groups, including women in rural areas, low-income families, and those facing cultural or language barriers

Use non-technical terms when explaining legal rights, protection orders, divorce options, custody arrangements, or compensation. Create or share visual materials (such as flyers, posters, and audio in local languages) that clearly explain rights and processes.

Link survivors to pro bono legal aid services, family lawyers, FIDA, legal clinics, or relevant state institutions. Where possible, assign a legal volunteer or paralegal to accompany the survivor to court or police stations to reduce fear and ensure follow-through.

Recommended ★★

D. CULTURALLY SENSITIVE AND INCLUSIVE SUPPORT

The availability of culturally sensitive and inclusive support for addressing IPV plays a pivotal role in increasing access to care, fostering trust and empowering survivors from diverse backgrounds. It ensures that survivors feel respected and understood, which

significantly enhances their willingness to engage with support services. However, to truly be effective, it is essential to approach cultural sensitivity with caution, avoiding the reinforcement of harmful cultural norms, ensuring that resources are allocated adequately, and training providers to prevent cultural misunderstandings. By striking a balance between cultural respect and addressing systemic issues, we can create a supportive and inclusive environment that leads to better outcomes for survivors of IPV, promoting long-term healing and safety for all.

It is highly recommended to establish culturally sensitive and inclusive support systems for IPV survivors. These systems ensure that individuals from all backgrounds, including those who may face cultural, linguistic, or social barriers, can access the resources they need for healing and recovery. By recognising the specific challenges faced by groups such as immigrants, refugees, Indigenous peoples, and people of colour, support services can provide more equitable and effective care. This approach enhances the inclusivity and accessibility of services, making it more likely that survivors from diverse communities will seek help. Culturally competent services foster trust and empowerment, which in turn increase engagement and enhance the chances of successful recovery for individuals who might otherwise feel disconnected or reluctant to seek support.

Recommended ★★



4 | MENTAL HEALTH SERVICES AND COUNSELLING

INTRODUCTION

Mental health services and counselling are essential components of a comprehensive and compassionate response to Intimate Partner Violence (IPV). While physical injuries may be visible and urgent, the emotional and psychological wounds of abuse often run deeper and last longer, affecting a person's self-worth, decision-making, and overall well-being. Survivors of IPV may experience a wide range of mental health challenges, including depression, anxiety, trauma-related stress, and emotional isolation. Without appropriate support, these effects can hinder a survivor's ability to seek help, care for their children, work, or participate meaningfully in community life.

Counselling offers survivors a safe space in which they can be heard, believed, and supported. It enables them to process their experiences, regain a sense of control, and begin the journey toward healing and recovery. More than a clinical process, mental health support when delivered in a culturally sensitive and trauma-informed way can restore dignity, rebuild trust, and renew hope.

In communities across Nigeria and beyond, many survivors of

Intimate Partner Violence (IPV) struggle not only with visible injuries, but also with deep emotional wounds that are harder to see. These invisible scars, anxiety, depression, loss of self worth and trauma can linger long after physical violence ends.

Mental health services and counselling play a crucial role in helping survivors heal. IPV affects people differently, but one common thread is the emotional pain and confusion it causes. Survivors often feel isolated, blamed, or silenced. This is especially true when emotional abuse is involved, or other forms of violence that leave no bruises but can shatter a person's confidence and identity.

When practitioners, be it counsellors, community leaders, health workers, or legal advocates, offer trauma-informed mental health support, they create a pathway for survivors to recover and rebuild their lives.

Counselling does more than help people feel better. It can



Provide a safe space for survivors to speak freely.

Offer practical tools to manage fear, flashbacks, and stress.

Help survivors understand that the abuse was not their fault.

Support people to regain control, set boundaries, and make empowered choices.

To be effective, counselling must be sensitive to culture, gender, and personal experience. Some people may feel ashamed or fearful when asking for help. Others may worry about what their family, community, or religious affiliations will say. This is why culturally appropriate, accessible, and confidential support is essential.

As practitioners, your role is to walk beside the survivor, not push or judge. When mental health support is provided with empathy and respect, it becomes a powerful tool not just for healing but for breaking the cycle of violence.





RECOMMENDATIONS

In this section, you can find the recommended interventions which the practitioner can apply. Any judge, arbitrator, cultural leader, religious leader, lawyer, paralegal, mediator, therapist, advisor, or other relevant professional is encouraged to use the following recommendations.

A. TRAUMA INFORMED COUNSELLING

Trauma-informed counselling is a healing approach that recognises the widespread impact of trauma, particularly from violence and abuse, and actively works to avoid re-traumatisation. It acknowledges that survivors of IPV may carry deep psychological scars that affect how they think, feel, and respond to help.

Survivors of IPV often experience emotional, psychological, and physical trauma. Without careful handling, even well-meaning counselling can trigger fear, shame, or distress. Trauma-informed counselling helps survivors feel safe, respected, and in control of their healing journey.

Trauma-informed counselling is highly recommended for IPV survivors as it provides them with a safe and supportive therapeutic environment. This approach takes into account the lasting effects of trauma and ensures that interventions are sensitive to the survivor's experiences, which helps prevent further harm. As a result, survivors often experience a decrease in feelings of shame, guilt, and fear,

which are common after IPV. Through this process, they can regain trust in themselves and others, an essential step in healing from emotional and psychological scars. A trauma-informed approach also helps improve emotional regulation, allowing survivors to address their trauma at their own pace without the risk of re-traumatisation

Context Specific Recommendation★

B. ACCESS TO MENTAL HEALTH SERVICES AND COUNSELLING

Mental health services and counselling are essential elements in both preventing and responding to intimate partner violence (IPV). Survivors often carry invisible scars, emotional wounds that impact their daily lives, decision-making, relationships, and sense of self.

Effective prevention must go beyond physical safety to address trauma, restore dignity and build emotional resilience.

mental health and counselling are critical components of any comprehensive response to IPV. Survivors often endure not only physical harm but also deep emotional and psychological trauma. The lasting effects may include anxiety, depression, PTSD, low self esteem and suicidal ideation. Counselling offers survivors a safe and non judgemental space to heal, rebuild and reclaim control over their lives.

Context Specific Recommendation★



C. INCORPORATION OF COGNITIVE BEHAVIOURAL THERAPY AND OTHER MODALITIES

When addressing mental health issues, particularly in the context of complex challenges like intimate partner violence (IPV), a single therapeutic approach is rarely sufficient. A comprehensive and effective response often involves the incorporation of various modalities, with Cognitive Behavioural Therapy (CBT) serving as a prominent and evidence-based cornerstone, alongside other complementary approaches. CBT is a highly structured, goal-oriented form of psychotherapy that helps individuals identify and challenge unhelpful thinking patterns (cognitions) and behaviours. The core principle of CBT is that our thoughts, feelings, and behaviours are interconnected, and by changing unhelpful thoughts and behaviours, we can improve our emotional well-being. It is often a short-term therapy that focuses on present-day problems.

Cognitive Behavioural Therapy (CBT) is a proven, practical approach to support survivors of Intimate Partner Violence (IPV) by helping them identify and challenge harmful thought patterns and build healthier coping strategies. When combined with other therapeutic methods such as trauma-informed care, narrative therapy, group support, and mindfulness, it provides a holistic pathway to emotional healing. Practitioners are encouraged to receive training in CBT techniques, adapt interventions to cultural contexts, and monitor progress to ensure survivors feel safe, empowered, and supported throughout their recovery journey.

Strongly Recommended ★★ ★



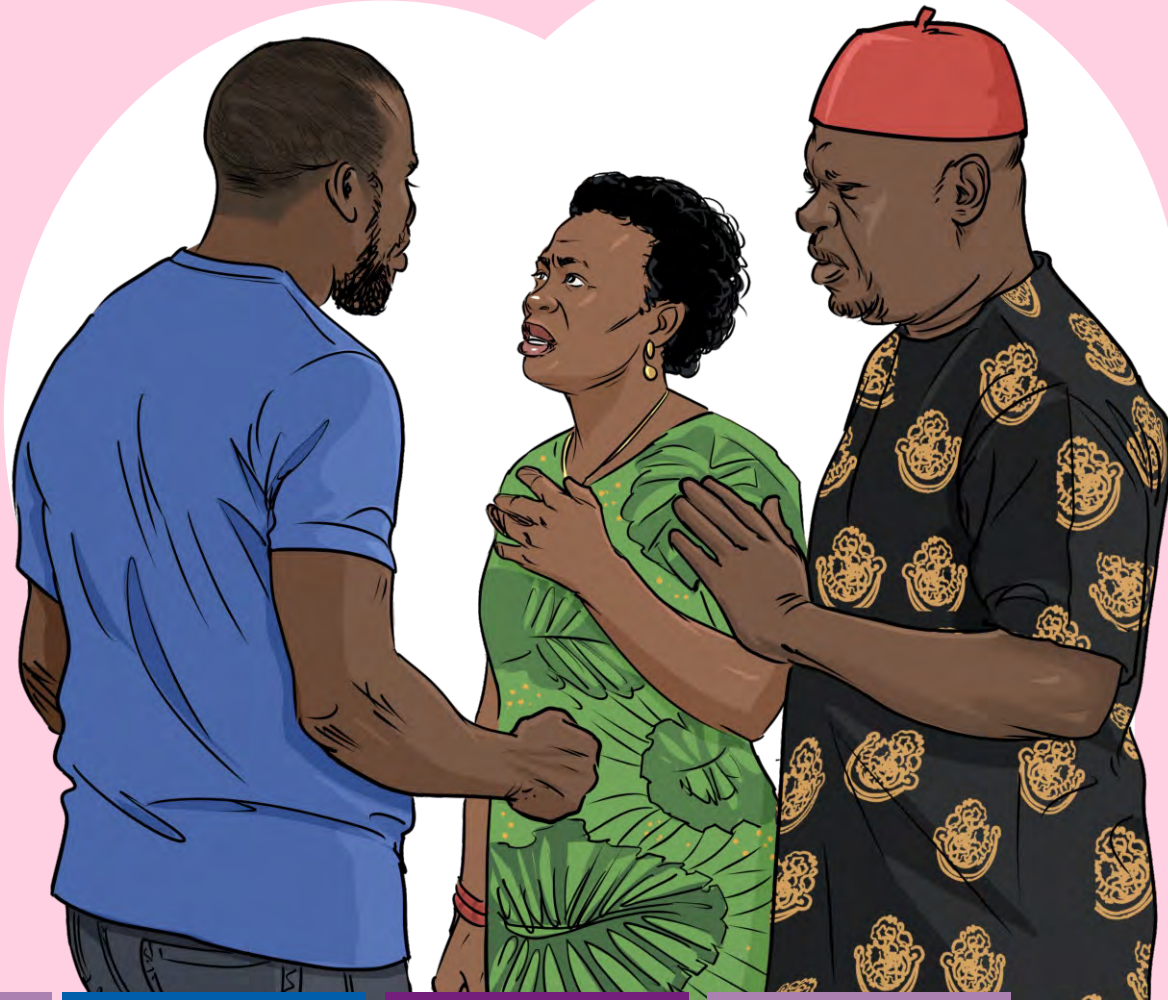
5 BYSTANDER INTERVENTION

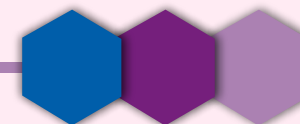
INTRODUCTION

Bystander intervention is a proactive approach that empowers individuals, whether friends, family members, neighbours, co-workers, or community members, to play a constructive role in preventing and addressing Intimate Partner Violence (IPV). Often, people witness warning signs of abuse but remain silent due to fear, uncertainty, or a belief that it is not their place to intervene. Bystander strategies challenge this passivity and promote a culture of shared responsibility.

By equipping bystanders with practical tools and safe intervention methods, we can foster supportive communities where violence is less likely to occur or escalate. Importantly, this approach emphasises that everyone has a role to play in promoting safety, challenging harmful norms, and offering support to survivors. It can be by providing help in the moment, checking in with a victim afterwards, or referring someone to appropriate services; small actions can lead to meaningful change.

This section outlines how practitioners can promote bystander intervention as part of IPV prevention, drawing on evidence-based models such as the 5D's (Direct, Distract, Delegate, Document, and Delay), while ensuring that actions remain survivor-centred, culturally sensitive, and trauma-informed.





RECOMMENDATIONS

In this section, you can find the recommended interventions which the practitioner can apply. Any judge, arbitrator, cultural leader, religious leader, lawyer, mediator, therapist, advisor, or other relevant professional is encouraged to use the following recommendations.

A. PROMOTE AWARENESS AND EDUCATION ON BYSTANDER RESPONSIBILITIES

Raising awareness about the role of bystanders is a vital step in preventing intimate partner violence (IPV). Many people are unsure how to respond when they witness signs of abuse or coercive behaviour in a relationship. This recommendation encourages practitioners to create opportunities actively, through community dialogues, school programs, religious gatherings, and professional trainings, to educate people about their responsibility and ability to intervene safely.

This awareness-building must go beyond simply telling people to "step in." It should involve helping individuals understand the different forms that IPV can take, emotional, physical, and financial and how these may manifest subtly in daily life. Through storytelling, relatable scenarios, and open discussion, people can begin to reflect on their role, overcome hesitation, and build the confidence to take action.

Education around bystander responsibilities should be rooted in empathy and safety. The goal is not to create confrontation, but to foster a sense of care and shared accountability. When people feel informed and supported, they are more likely to respond in ways that protect victims, discourage harmful behaviour, and send a clear message that violence is unacceptable in their community.

Context Specific Recommendation★

B. PROMOTE THE 5D METHOD OF BYSTANDER INTERVENTION

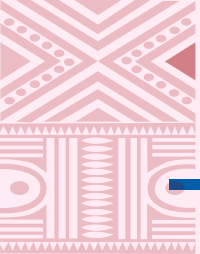
When it comes to preventing intimate partner violence, the people around us, friends, neighbours, colleagues, even strangers, can make a real difference. Many times, someone notices that something feels wrong, but they're unsure of what to do. That's where the 5D method comes in. It offers simple, realistic options that help people step in safely when they witness a troubling situation.

This approach is not about being a hero or putting yourself at risk. It is about doing what's possible, with what you have, in that moment.

THE 5D APPROACH - PRACTICAL WAYS TO STEP IN

1. Direct

Sometimes, it is enough to say something. If you feel it is safe, you can speak up and let the person know their behaviour is not acceptable, or check in with the person being affected. A calm but firm "Are you okay?" or "That's not alright" can interrupt a harmful moment. This is not about confrontation; it is about connection.



2. Distract

Not everyone is comfortable speaking up directly. That's okay. Distraction is another powerful tool. You might start a conversation, drop something, or make an excuse to pull someone away from the situation. It may feel small, but that pause can be enough to shift the energy and create a safer space.

3. Delegate

If the situation is serious or feels unsafe, find someone who can help quickly. This may involve contacting a trusted adult, community leader, police officer, or even alerting a colleague.

You don't have to fix everything on your own. Delegating is just as responsible and often more effective.

4. Delay

Check in with the victim afterwards to offer support, even if you could not intervene in the moment.

5. Document

Record what you see (with permission, if possible) to create a record that could support the victim's case later.

Context Specific Recommendation★

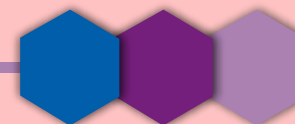
C. PROMOTE THE 3D METHOD OF BYSTANDER INTERVENTION

In communities across Nigeria, people often step in quietly to prevent violence, sometimes without even being asked. It could be a neighbour who offers a woman a safe place to stay for the night, a market woman who notices something is wrong and speaks up, or a young person who reports a troubling situation to the community head. These actions might seem small, but they can change lives, and they deserve to be recognised.

When we take the time to celebrate these acts of courage, we remind others that protecting one another is a shared responsibility. It shifts our mindset from fear to action, and from silence to standing together. Even simple steps, like checking in on someone or calling for help, show that we care and that we won't look the other way.

Recognising these acts is not about rewarding heroism; it is about affirming our shared humanity. When we acknowledge those who step up, however quietly, we send a message that care, responsibility, and moral courage are not only possible but expected. It tells the person who intervened, "What you did mattered." It tells others watching from the sidelines that they, too, can act. It reassures survivors that they are not alone and that someone is willing to stand by their side, even when the situation is complicated or risky.

Recommended★★



Best Practice

The following best practices are identified by over 100 experienced practitioners in Imo State. These practitioners include judges, policymakers, lawyers, traditional leaders, religious leaders and others. All best practices are compared to the recommended interventions, and we assess whether they align with the existing literature. Those best practices that are not in line with the literature need further research.

Most of the identified best practices aren't truly preventive; they come into play only after IPV has already occurred or when they are actively occurring. This is mainly due to weak reporting systems and the fact that individuals typically seek help only once violence has begun. However, some of these practices do serve a dual purpose. While they address existing situations, they also help prevent further incidents or limit recurrence by equipping people with tools and strategies that build resilience and safety, even after the problem has surfaced.

ON THE PROCESS OF PREVENTING INTIMATE PARTNER VIOLENCE

Practitioners should promote pre-marriage counselling before issuing a marriage certificate. Traditional weddings should also be conducted with proof of premarital counselling certificates, and the same applies to church or Muslim weddings. It should be a requirement to issue a marriage certificate before the ceremony for couples. **Other Practice**

Practitioners should hold a session with the couples and discuss with them the advantages of empowerment and decisions around a joint account. **Other Practice**

Encourage several enlightenment programs by the religious leaders and marriage counsellors to prevent and detect early cases of intimate partner violence. **Other Practice**

ON WAYS OF RESOLVING INTIMATE PARTNER ISSUES

Intimate Partner violence should first be resolved internally by a respected family member before resorting to the formal courtroom. **Other Practice**

Encourage community-based alternative dispute resolution methods for partner-related conflicts, particularly customary mediation and arbitration. **Other Practice**

To foster open communication and collect accurate information, practitioners should meet with each party individually in a secure and trusted environment. This approach enables a comprehensive understanding of the underlying issues before a joint discussion occurs. **In accordance with literature**

Practitioners are advised to refer couples in conflict to a psychologist in cases where there is violence against the other party or where one of the parties has anger issues. **In accordance with literature**



Where a dispute has been resolved as an aftercare, couples should be referred to a marriage counsellor, **in accordance with literature**

Couples should be allowed to speak in the language they understand, and enough time should be given to them to narrate their story; sometimes, giving them a listening ear makes them feel at ease. **Other practice**

The mediation session should focus on healing and avoid blaming any of the parties, **in accordance with the literature.**

Practitioners should inform couples that violence is a criminal offence and there are consequences for continual abuse. **In accordance with literature**

As a practitioner, if a case of economic deprivation arises, kindly advise the parties of the importance of financial empowerment to see if they can reach an understanding. **Other practice**

When a marriage has irretrievably broken down, it is strongly recommended that the parties pursue an amicable separation, particularly when children are involved. This approach, often called a “good divorce”, focuses on cooperation, respectful communication, and prioritising the well-being of all family members. Mediation, shared parenting agreements, and transparency can significantly reduce emotional and financial strain while supporting stability for children. **In accordance with literature**

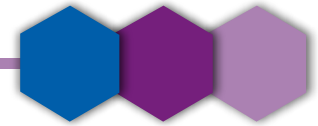
Practitioners are encouraged to opt for temporary protection measures whenever possible. **In accordance with literature.**

Teaching clear communication skills and involving both partners in shared financial decision-making can help prevent dynamics of control and build healthier relationships. **In accordance with literature**

Churches must openly discuss religious intimate partner violence (IPV): Many women suffer, silenced by Bible verses misused by men. Pastors must teach the true meaning of marital love, rather than allowing men to twist faith into fear. **In accordance with Literature**

Encourage regular home visits to prevent perpetrators from relapsing into covert abuse once official scrutiny fades. A dedicated community welfare monitoring system should be established to ensure adequate oversight. **In accordance with Literature**

Practitioners are encouraged to handle intimate partner cases brought before them quickly and issue restraining orders where necessary so that violent spouses can be legally kept away without delay. **In accordance with Literature**



Research Methodology



1. ESTABLISH A COMMITTEE OF EXPERTS

The guideline development process starts by gathering a diverse group of local practitioners and justice experts. This group is referred to as the Guideline Committee of Experts (CoE). The Committee of Experts co-creates the guideline, performs quality control, and helps to establish local ownership.



2. LEARN FROM THE EXPERIENCES OF LOCAL JUSTICE PROVIDERS (collect practice based evidence)

An essential element of the methodology is to identify what the local justice providers from the informal and formal sectors consider best practices for resolving their most pressing justice problems. We organise workshops and invite government, local, civil society leaders and practitioners to share their experiences on what works. The workshops are conducted in mixed groups of approximately 15 participants from the formal and informal sectors of justice, specifically from a designated area. It is recommended that at least three separate workshops be held in three different locations, collecting information from approximately 50 practitioners. Each workshop is facilitated as a half-day session, and ample time is allocated not only to collect suggested best practices on specific interventions but also to understand how they relate to one another.

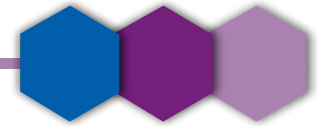
To ensure that workshops are representative of the national population, HiIL conducts workshops throughout the country, for which guidelines are being developed. Geographical coverage depends on the resources available and is determined in partnership with the Committee of Experts.



3. COLLECT EVIDENCE FROM THE LITERATURE AND PURPOSE RECOMMENDATIONS (evidence based practice)

There are several steps involved in resolving a justice issue. Each problem is broken down into a broad range of topics (such as mediation, adjudication, arrangements for raising children, etc). For each of these topics, several potential interventions can be identified to help prevent or resolve the issue. Internationally available literature contains evidence which supports or invalidates interventions to justice issues. We test these interventions, assess the quality of evidence underlying them, and formulate actionable recommendations.





i. FIRST LITERATURE SEARCH: Identifying the most common intervention

HiiL conducts a first literature search to identify all possible interventions for each topic. This is done in accordance with the search strategy (explained in step three). For each topic, the team selects the two or three most effective interventions. Two interventions are then compared with each other in PICO format and, if applicable, similarly compared to a third intervention.

ii. DEFINING THE PICO QUESTION¹

To assess the effectiveness of interventions, HiiL compares selected interventions using PICO questions. The PICO approach is used in the medical sector to help define the efficacy of an intervention. PICO stands for:

Population
Intervention
Comparison
Outcome

These four elements should always be present in the PICO questions. The standard structure of a PICO question is: For [population/person], is [intervention 1] more effective than [compared intervention 2] for [outcome/goal]?

iii. SEARCH STRATEGY² & LITERATURE SELECTION³

After identifying the PICO question, HiiL reviews and selects the literature. HiiL first defines which keywords are used for the literature search.

The literature search is conducted hierarchically. HiiL begins by examining existing evidence-based guidelines, systematic reviews, and meta-analyses. If this results in insufficient evidence, the search will extend to randomized controlled trials. If this is not available, the team searches for observational studies and empirical research. Lastly, if needed, HiiL gathers relevant opinions from international experts. Steps taken in the process of selecting literature are (in this order):

1 How to phrase a PICO question is explained in: Schunemann, Brozek, Guyatt and Oxman, GRADE Handbook, Chapter 2, accessible via: <http://gdt.guidelinedevelopment.org/app/handbook/handbook.html#h.1yd7iwhn8pxp>

2 The search strategy is similar to the strategy used in developing guidelines for family doctors in The Netherlands, accessible via: https://www.nhg.org/sites/default/files/content/nhg_org/uploads/handleiding_ontwikkelen_nhg-behandelrichtlijnen_0.pdf

3 The literature selection-process is similar to the selection-process used in developing guidelines for family doctors in The Netherlands, accessible via: https://www.nhg.org/sites/default/files/content/nhg_org/uploads/handleiding_ontwikkelen_nhg-behandelrichtlijnen_0.pdf



1. Screening of titles and abstracts: A first selection is made where non-relevant titles are excluded.
2. Selection based on methodology, using titles and abstracts: The researcher selects sources according to their methods.
3. Selection on substance: A substantive and definitive selection based on the title, abstract and the substance.
4. Rating of selected literature: The quality and quantity of the literature are assessed. If not sufficient, the search strategy and criteria are altered.

HiiL consults several (legal and psychology-related) databases, which are accessible through Google Scholar. The most relevant databases are defined on a topic-by-topic basis.

iv. ASSESSING & GRADING THE EVIDENCE⁴

The literature contains evidence. Following the selection of literature, the quality of the evidence is evaluated. HiiL grades the quality of evidence for each PICO question, based on the GRADE (Grading of Recommendations Assessment, Development and Evaluation) system. The GRADE manual (accessible at www.guidelinedevelopment.org/handbook) provides a detailed description of this method.

GRADE is used extensively by the medical sector for developing guidelines. The GRADE system defines the quality of evidence. The quality of evidence reflects the level of confidence in the effect of the intervention on people's well-being. The evidence is graded according to a three-step process.

A. RATE THE ENTIRE STUDY DESIGN

Rating the quality of evidence starts with the study design. The evidence is categorised by the type of study, using the four GRADE classifications:

High	Existing evidence-based guidelines, meta-analyses, systematic reviews
Moderate	Random Controlled Trials (RCTs), medium-sized/ large empirical research (including observational studies and experimental studies)
Low	Small empirical studies (including observational studies and experimental studies)
Very low	Opinions of international experts

The assessment and grading of evidence in the medical sector is explained in: Schunemann, Brozek, Guyatt and Oxman, GRADE Handbook, Chapter 5, accessible via: <http://gdt.guidelinedevelopment.org/app/handbook/handbook.html#h.1yd7iwhn8pxp>



B. TAKE INTO ACCOUNT FACTORS FOR DOWNGRADING & UPGRADING

Next, HiiL looks for factors that reduce the quality of evidence. These being:

Risk of bias of the publication, such as:	
<ul style="list-style-type: none"> • Use of evidence by the author to support one favoured intervention (for example: the author is clearly in favour of mediation or supporting completely equal roles of men and women in family life as a matter of principle) • Reporting of outcomes is selective • Samples used in the study to back up arguments are not representative 	1 or 2 levels down
Risk of true effects reported being different in other culture/location,	
<ul style="list-style-type: none"> • For example: the Nigeria city population may not experience the same effects of an intervention as the Texas rural sample in the study 	1 level down
Inconsistent results from different studies, such as those based on:	
<ul style="list-style-type: none"> • Geographical area (different studies report different outcomes for different geographical areas) • Interventions (different studies report different interpretations of the same intervention) • Outcomes (different studies report different effects of the same intervention) 	1 or 2 levels down
Studies only present indirect evidence, such as:	
<ul style="list-style-type: none"> • Different results in different geographical areas in one study • A difference in how the intervention is applied in one study • A difference in the effects of the intervention in one study 	1 or 2 levels down

HiiL also looks at factors that increase the quality of evidence:

Imprecision	
<ul style="list-style-type: none"> • Uncertainty about the study results 	1 or 2 levels up
A large magnitude of the effect of the intervention:	
<ul style="list-style-type: none"> • The effects are consistent across different samples • Consistency in the studies on the magnitude of the effect 	1 or 2 levels up
Unanimous endorsement of the Committee of Experts	
	0 or 1 level up
All suggested best practices are in line with the recommendation	
	0 or 1 level up



Studies may report different outcomes. All outcomes of the studies that are essential to a recommendation are graded separately.

Until now, the upgrading and downgrading process has not been evaluated individually. In future iterations of the guideline, HiiL will provide reasons for upgrading or downgrading a recommendation and explain the rationale behind these decisions.

C. RATE THE QUALITY OF EVIDENCE OF THE ENTIRE RECOMMENDATIONS BASED ON STEP A & B

After taking into account the rating of the study design and the factors for downgrading or upgrading the quality of evidence, HiiL determines the overall quality of evidence. HiiL provides a single grade of quality of evidence for every recommendation. The quality of evidence can be classified into the following four categories of the GRADE model:

High	There is much confidence that the true effects of the tested intervention are close to the estimations of the effects
Moderate	The true effects of the intervention are likely to be close to the estimates of the effect. There is a possibility that they are different
Low	The confidence in the estimates of the effects is limited. The true effects can be substantially different from the estimates

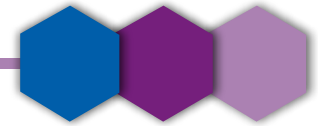
Very low

There is very little confidence in the estimates of the effects

Because the GRADE approach rates the quality of evidence separately for each important outcome of the studies, quality might differ across outcomes. When determining the overall quality of evidence across outcomes, only the outcomes that are assessed as being most important are considered. These critical outcomes have been identified for each recommendation in the guideline. If the quality of evidence is the same for all critical outcomes, then this becomes the overall quality of the evidence supporting the answer to the question. Suppose the quality of evidence differs across vital outcomes. In that case, the overall confidence in effect estimates cannot exceed the lowest confidence in effect estimates for any outcome that is critical to a decision. Therefore, the lowest quality of evidence for any of the critical outcomes determines the overall quality of evidence.

D. DEFINE THE RESEARCH GAP

After grading the evidence, it is essential to clarify where further research is needed to enhance the quality of the recommendation. There may be a lack of high-quality study designs, or there may be insufficient research on specific interventions. This way, the research gap can help universities and research institutions identify impactful fields of research for the future.



v. PROPOSE RECOMMENDATIONS⁵

The recommendations can be established by following the answer to the PICO question and assessing the quality of evidence using the GRADE approach.

The strength of the recommendation depends on whether the desirable effects of an intervention outweigh the undesirable effects, and on the strength of evidence.

RECOMMENDATIONS ARE CATEGORIZED IN FOUR GROUPS

Strongly recommended	Clear balance towards desirable outcomes of the intervention and a high/moderate quality of evidence Apply recommendation and advise parties accordingly
Recommended	Clear balance towards desirable outcomes of the intervention and a low/very low quality of evidence Apply recommendation and advise parties accordingly
Context-specific recommendation	Unclear balance towards desirable outcomes of the intervention (where desirable effects do not apply to all situations) and a high/moderate level of evidence Apply recommendation only in the right circumstances and advise parties accordingly
Not recommended	Clear balance towards undesirable outcomes of the intervention and a high/moderate level of evidence Beware of non-recommended practice

⁵ How to go from evidence to recommendations in medical guidelines is explained in: Schunemann, Brozek, Guyatt and Oxman, GRADE Handbook, Chapter 6, accessible via: <http://gdt.guidelinedevelopment.org/app/handbook/handbook.html#h.1yd7iwhn8pxp>



Key factors that influence the direction and strength of a recommendation are:

Domain	Comment
<p>The balance between desirable and undesirable outcomes (trade-offs) taking into account:</p> <ul style="list-style-type: none"> • Best estimates of the magnitude of effects on desirable and undesirable outcomes • Importance of outcomes (estimated typical values and preferences) 	<p>The larger the differences between the desirable and undesirable consequences, the more likely a strong recommendation is warranted. The smaller the net benefit and the lower the certainty for that benefit, the more likely a weak recommendation is warranted</p>
Confidence in the magnitude of estimates of the effect of the interventions on important outcomes (overall quality of evidence for outcomes)	The higher the quality of evidence, the more likely a strong recommendation is warranted
Confidence in values and preferences and their variability	The greater the variability in values and preferences, or uncertainty about typical values and preferences, the more likely a weak recommendation is warranted
Resource use	The higher the costs of an intervention (the more resources consumed), the less likely a strong recommendation is warranted



4. EXPERTS REVIEW THE FIRST DRAFT OF THE GUIDELINE

HiiL submits the guideline to the Committee of Experts for review. The Committee determines whether the recommendations are acceptable within the local or national context. They report their findings within three months of submission. Suppose the Committee of Experts determines that a recommendation is incompatible with local practice. In that case, the Committee and HiiL collectively review the recommendation and decide whether it should remain unchanged, be modified, or be removed from the guideline entirely.





Committee of Experts

The Committee of Experts has played a crucial role in developing this guideline. They have facilitated the collection and evaluation of best practices and evidence that inform these guidelines. Furthermore, they have been instrumental in ensuring that the local context is taken into account in all recommendations and best practices. This achievement would not have been possible without their contributions:

- | | | |
|----------------------------------|-----------------------------|--------------------------|
| ● Professor Nnamdi Obieraeri | ● Engr Hassan Babidi Yahaya | ● Chidinma Stella Ikea |
| ● Nkechi Monica Obioha | ● Duru Blessing | ● Blaise Iwnunze |
| ● Marjorie Ngozi Ezihe | ● Ngozi Mary Ihiekwe | ● Uzoamaka Chioma Nnah |
| ● Iherue-Sunday Chinaka Amarachi | ● Udochukwu Chukwu | ● Joy Daberechi Onuoha |
| ● Dr Blessing Oby Azubuike | ● Vivian Ijeoma Enwere | ● Okeiyi Juliet Obiageri |

Hiil Team

- Hamza Tijani (Senior Programme Manager)
- Ijeoma Nwafor (Country Representative)
- Nicoletta Marone Cinzano (Project Officer)
- Robert Ogbogu (Project Officer JIL)

Researchers

- Maryam Abba (lead Author)
- Chigozie Nwachukwu
- Jethro Baron
- Chisom Ikoku

Design

- Mustapha Bulama (*Illustrator*)
- Jamil Ibrahim Shehu (*Visual Designer*)



Contact

For inquiries, please contact info@hiil.org

www.hiil.org