

Clár Sláinte Náisiúnta do Mhná & do Naíonáin

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National Women and Infants Health Programme

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27/02/2025

Deputy Clarke Dáil Éireann, Leinster House Dublin 2

PQ 5881/25: To ask the Minister for Health following the publishing of the National Clinical Practice Guideline on Screening and Management of Domestic Violence in Pregnancy and the Early Postnatal Period, if she will provide an update on any progress that has been made in relation to the development of a multi-component education and training programme for the multi-disciplinary team.

PQ 5882/25: To ask the Minister for Health regarding the National Clinical Practice Guideline on Screening and Management of Domestic Violence in Pregnancy and the Early Postnatal Period, when training will be mandatory for the awareness, screening, recognising, responding and referring of domestic violence for all midwives, nurses, doctors and health and social care professionals and students working in maternity settings; if there will be a body that maintains records of staff training; if there will be an audit and evaluation of training; and if she will make a statement on the matter.

PQ 5583/25: To ask the Minister for Health how she is going to ensure that the National Clinical Practice Guideline on Screening and Management of Domestic Violence in Pregnancy and the Early Postnatal Period are fully implemented; and how she plans on monitoring both its effectiveness and adoption.

Dear Deputy Clarke,

The Health Service Executive (HSE) has been requested to respond directly to you regarding the above Parliamentary Question submitted to the Minister for Health. I have examined the matter, and the following outlines the position.

Pregnancy is a well-documented risk factor for intimate partner violence. Maternity, gynaecology, and other women's health services provide an important opportunity to screen for and respond to domestic and sexual violence. These healthcare settings allow professionals to build trust with patients, creating a safe space for sensitive conversations. Routine screening for domestic and sexual violence in maternity and gynaecology assessments has been shown to increase disclosure rates and facilitate timely support.

As part of our maternity services, all pregnant women attending antenatal care are routinely screened for domestic violence. When a disclosure is made, established pathways ensure the woman's safety and provide appropriate onward referral.

Recognising the significant public health risk posed by domestic abuse—particularly during pregnancy—and the need for healthcare professionals to identify its signs, the National Women and Infants Health Programme (NWIHP), in collaboration with Women's Aid, implemented a Domestic Abuse Awareness Training programme from October 2022 to March 2023. This structured, half-day, multidisciplinary programme followed the Recognise, Respond, Refer model, equipping maternity and gynaecology staff with the skills needed to identify and address domestic abuse effectively.

In addition, in 2023, the HSE's National Social Inclusion Office (NSIO) developed an online training programme on Domestic, Sexual, and Gender-Based Violence (DSGBV), with the National Women and Infants Health Programme (NWIHP) contributing as part of the HSE DSGBV Training Working Group. This initiative aligns with the HSE's responsibilities under the Third National Strategy on DSGBV and is informed by the findings of the 2023 report Recognise, Respond, Refer: A review of the approaches used by frontline HSE staff to ask about domestic, sexual, and gender-based violence and the DSGBV training and resource needs analysis conducted by the HSE NSIO in 2023. The HSE National DSGBV Training Programme consists of four e-learning modules designed to enhance DSGBV awareness and response among healthcare professionals: Awareness, Recognise, Respond, and Refer. Modules 1 to 3 are currently available to all HSE staff and funded service staff via HSELanD.ie, with Module 4 set to launch in the coming months. Between December 2023 and February 2025, 4,524 professionals have completed the training on HSELanD. Staff who complete the modules can provide feedback through a post-training evaluation form, which informs annual content reviews undertaken by the HSE DSGBV Training Working Group, including NWIHP representatives.

Regarding mandatory training, under the Statutory and Mandatory Training Policy for Health Service Executive Employees, the HSE CEO designates mandatory training for all employees. While the HSE National DSGBV Training Programme is not classified as mandatory, it is included in the HSE Corporate Induction Programme Workbook and is freely accessible to all staff on HSELanD.ie. Additionally, DSGBV resources have been developed to assist staff in identifying and supporting victims and survivors, available for download on the NSIO website.

Regarding the National Clinical Guideline for Screening and Management of Domestic Violence in Pregnancy and the Early Postnatal Period, all guidelines developed by NWIHP include implementation plans and auditable standards. The responsibility for structured adoption and execution of these

plans and additable standards. The responsibility for structured adoption and execution of these
guidelines lies with local multidisciplinary clinical teams, senior executives, and clinical management
within each unit. Each hospital or unit implementing the guideline must therefore establish robust
governance and accountability mechanisms to monitor and evaluate adherence and effectiveness.
I trust this clarifies the matter.

Yours	sincerely,	

Davinia O'Donnell, General Manager, National Women and Infants Health Programme

