NIHR Bristol Biomedical Research Centre

An effective healthcare response to domestic violence and abuse

Domestic violence and abuse (DVA) is a major public health problem which needs a better response from healthcare. Most clinicians aren't sufficiently trained to identify when patients are experiencing abuse or properly manage a disclosure.

What translational research was done?

We conducted studies on the prevalence and mental health impact of domestic abuse¹, alongside systematic reviews of DVA interventions. We showed that more effective support was needed, particularly in primary care.

With DVA organisations we developed and piloted a training and referral programme, **Identification and Referral for Safety (IRIS)**.

We modelled its cost-effectiveness (the first of a DVA intervention), showing proof of concept. It was further refined with interviews with DVA survivors and clinicians.



References

- 1. Richardson et al., BMJ, 2002; DOI:10.1136/bmj.324.7332.274
- 2. Feder et al., Lancet, 2011; DOI:10.1016/S0140-6736(11)61179-3
- 3. Barbosa et al., BMJ Open, 2018; DOI:10.1136/ bmjopen-2017-021256

Translation into later phase research and practice

We conducted a randomized trial to rigorously test IRIS. The trial recruited 48 GP practices in Hackney and Bristol, randomized to the IRIS intervention or normal care. Using data from practice and DVA agency records (143,868 women) the trial found that the intervention caused a three-fold increase in identification of DVA and a seven-fold increase in referral of survivors to specialist agencies². We then showed that the IRIS model retained its cost-effectiveness when translated from trial intervention to commissioned service³.

This work benefitted women, practitioners, and informed national and international policy:

- We co-created IRISi, a social enterprise that has driven national commissioning
- 48 localities commissioned IRIS in England and Wales by March 2020
- 1,036 practices were trained and more than 20,500 women referred to DVA services
- Disclosure of DVA is safer and clinicians' responses more appropriate
- Annual cost saving to society is conservatively estimated to exceed £2.4 million

IRIS was recommended for improving services for DVA survivors in:

• 2014 NICE DVA guidelines



- Government's National Statement of Expectations for Violence Against Women and Girls Services
- 2018 Task and Finish Group report for the Welsh Government's Ending Violence Against Women and Domestic Abuse (Wales) Bill
- 2018-2021 London Mayor's Office for Policing and Crime Violence Against Women and Girls Strategy
- Statutory instruments of the Domestic Abuse Act

Our research was cited in the World Health Organisation's first guidelines on intimate partner violence. It informed interventions in Brazil, Nepal, Sri Lanka and the occupied Palestinian territories.



