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COLOPHON

Programme Book of the 94th European General Practice Research Network Meeting
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Theme Paper / Ongoing study with preliminary results**Developing a tool for implementation of good practices in Family Violence care.**

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Keywords: Implementation research, Process evaluation, Family Violence, Multicenter study

Background:

Facilitators for effective Family Violence care are professional commitment, collaboration, providing mutual trust and health care system support. Other success factors are the linkage between several intervention strategies, clear referral options, attention to attitudes and sustaining consensus application protocols. A new inquiry tool was constructed based on the IMOCFAV consensus process in three continents to use during implementation strategies.

Research questions:

What process measures should be included in implementation research about Family Violence in primary health care?

Method:

Based on the tasks enumerated in our international multicentre study on Family Violence we compared dimensions of European datasets and Premis, the latter being mainly validated in the USA. The Transtheoretical Domains Framework seems a good guide to choose dimensions to be measured as it is based on 33 models for behavioural change. The dataset is being validated by comparing participants and non-participants to training.

Results:

Barriers identified through our prior multicentre qualitative research also indicate potential facilitating factors. Several collaborative care models need adaptation according to available facilities and differences, e.g. between rural and urban areas. Knowledge and skills for clearly defined tasks and motivation and opportunity costs, beliefs about detection, the feasibility of responding to violence and emotions with situations encountered, attitudes towards collaborative care, and support by peers appear essential.

Conclusions:

Adaptation to different local settings needs to render the tool well applicable. The applied domains framework seems a good tool for better practice implementation and organisation integrated with multisectoral care.

Points for discussion:

1. Does the presented implementation measures seem fit to Family Violence primary health care in your country
2. Would you consider other elements than those enumerated to improve primary health care practice for family violence?
3. Could this model of research be applied to other topics of clinical care ?

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