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Example 7: The RESPONDS Study. Bridging the knowledge and practice gap between domestic violence and child safeguarding: developing policy and training for general practice

About the research

Lead researcher: Professor Gene Feder, School of Social and Community Medicine, Bristol University.

Funder: Policy Research Programme.

Project aim: To develop and evaluate training for GPs that addresses the combined issues of domestic violence and child safeguarding. The broader aim is to improve the care given to women experiencing abuse, and their children.

Type of research: Action research.

Duration: 30 months - started in July 2012.

Who we spoke to

We interviewed the lead researcher, Professor Gene Feder, and his collaborator Professor Nicky Stanley at the University of Central Lancashire. Their comments are in blue below.

About the involvement

How service users influenced the research question

The survivor groups were instrumental in identifying this topic as a priority for research.

We were aware that in previous studies we had not addressed the issue of the impact of domestic violence on children. Working with the survivor groups made it clear just how serious a short-coming this was. They encouraged us to pursue this project and not wait another few years. It wasn't simply them saying 'That's a good idea'. They gave us a rationale based on their experience, which is precisely what we wanted. You could do studies on a dozen things... they gave us the reasons to run with this one. **99 Gene**

Service user involvement prior to applying for funding

The research team has established two groups of survivors of domestic violence (DV). One is in Bristol, supported by a DV organisation called Next Link, and the other is in Cardiff, supported by Cardiff Women's Aid. These groups were set up to provide advice to previous research projects. They have evolved into standing groups that provide input into all new research ideas, and continue to advise on the existing research programme. Both groups were consulted during the development phase of this project, as part of their regular meetings.

In addition, staff at Hyndburn and Ribble Valley (HARV) Domestic Violence Team, an organisation that supports young people with experience of DV, were asked to comment on early drafts of the project proposal.

I wasn't able to meet directly with children, but I did consult HARV. Their staff are very much in touch with young people's issues. I've worked with them on several projects, so I was able to ring them up and ask them to read through the proposal and tell us what they thought. "Nicky

Impact of the early involvement

The groups' views influenced the **conceptual framework**, the researchers' thinking on what aspects of the research to focus on.

What the groups said very strongly was that they wanted GPs to be more understanding of the dilemmas women face around disclosing their experience of domestic violence and their fear of children's services being involved... They also encouraged us to consult young people during the project, which gave us confidence that this was the right thing to do... It's about the underlying conceptual framework, around making choices about what's going to be in the research – there's no doubt they had quite a strong influence that way. ****J** Gene**

Continuation of involvement following funding

The groups have continued to be involved since the project started, for example providing their views on the content of the GP training. Some group members have now been working with the research team for four or five years and have become very enthusiastic about research. Their involvement continues to evolve over time. One of the group members has developed further research skills, conducting interviews with other survivors of DV and co-authoring publications.

Lessons learnt

Maintaining a group long-term requires adequate resourcing, not only to cover paying for people's time, travel and expenses, but also to provide sufficient admin support to arrange the meetings. The research group has budgeted for patient and public involvement (PPI) in each study, with overlap between funded studies and those still under development. The researchers have also learnt practical lessons about running the group and getting the most out of discussions.

though the group has strong individuals who have no problems in speaking up, they have felt overloaded with information. So we've designed the meetings to be more interactive. It's not very helpful to just present information and ask for the group's opinion. That's a bit passive and not really using people's talents to the best advantage. It's much better to pose specific questions – then you get very sophisticated and specific answers. **J Gene**

Having a long-term relationship with a group and/or relevant organisations facilitates the process of having discussions at this very early stage of research.

Engaging people in the early stages is hard to do cold. It's easier in the context of an ongoing relationship, where people understand research and their role in developing applications. You don't want to be making false promises about research which may not get funded. Having a group that understands the stage you're at, means they come to it in an informed way and you also understand what you can expect from them. **37 Nicky**

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