Challenges to Developing a Trans-European Programme for Health Professionals to Recognize and Respond to Survivors of Domestic Violence and Abuse

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Abstract : Recognition and education in violence, abuse, and neglect for medical and healthcare practitioners (REVAMP) is a trans-European project aiming to introduce a training programme that has been specifically developed by partners across seven European countries to meet the needs of medical and healthcare practitioners. Amalgamating the knowledge and experience of clinicians, researchers, and educators from interdisciplinary and multi-professional backgrounds, REVAMP has tackled the under-resourced and underdeveloped area of domestic violence and abuse. The team designed an online training programme to support medical and healthcare practitioners to recognise and respond appropriately to survivors of domestic violence and abuse at their point of contact with a health provider. The REVAMP partner countries include Europe: France, Lithuania, Germany, Greece, Iceland, Norway, and the UK. The training is delivered through a series of interactive online modules, adapting evidence-based pedagogical approaches to learning. Capturing and addressing the complexities of the project impacted the methodological decisions and approaches to evaluation. The challenge was to find an evaluation methodology that captured valid data across all partner languages to demonstrate the extent of the change in knowledge and understanding. Co-development by all team members was a lengthy iterative process, challenged by a lack of consistency in terminology. A mixed methods approach enabled both qualitative and quantitative data to be collected, at the start, during, and at the conclusion of the training for the purposes of evaluation. The module content and evaluation instrument were accessible in each partner country's language. Collecting both types of data provided a high-level snapshot of attainment via the quantitative dataset and an in-depth understanding of the impact of the training from the qualitative dataset. The analysis was mixed methods, with integration at multiple interfaces. The primary focus of the analysis was to support the overall project evaluation for the funding agency. A key project outcome was identifying that the trans-European approach posed several challenges. Firstly, the project partners did not share a first language or a legal or professional approach to domestic abuse and neglect. This was negotiated through complex, systematic, and iterative interaction between team members so that consensus could be achieved. Secondly, the context of the data collection in several different cultural, educational, and healthcare systems across Europe challenged the development of a robust evaluation. The participants in the pilot evaluation shared that the training was contemporary, well-designed, and of great relevance to inform practice. Initial results from the evaluation indicated that the participants were drawn from more than eight partner countries due to the online nature of the training. The primary results indicated a high level of engagement with the content and achievement through the online assessment. The main finding was that the participants perceived the impact of domestic abuse and neglect in very different ways in their individual professional contexts. Most significantly, the participants recognised the need for the training and the gap that existed previously. It is notable that a mixed-methods evaluation of a trans-European project is unusual at this scale.
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