



RIVA Study – mateRnity Violence Advisor



Evaluating models of health-based
Independent Domestic Violence Advisor
provision within maternity services



Study Team



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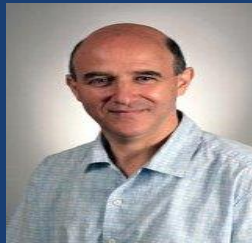
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Background

- Domestic Violence and Abuse (DVA) is abuse, controlling, threatening behaviours by a relative, partner/ex-partner
- Around 1 in 5 pregnant women experience DVA
- Increases risk of physical (pre-term birth, low-birth weight and mental health problems
- Children exposed to DVA have poorer physical/mental health, lower academic achievements
- Pregnancy is a time when women have repeated contact with health services
- Maternity services routinely enquire about women's experience of DVA

Independent Domestic Violence Advisors

- IDVAs – Independent Domestic Violence Advisors
- IDVA is a trained professional who works to address the safety of people at high-risk of experiencing harm from intimate partners, ex-partners or family members.
- They provide both emotional and practical support (e.g. general advocacy support, safety planning, supporting court processes, helping with accommodation/financial support)
- They support people for an average of 2-3 months



What do healthcare-based IDVAs do?

Healthcare-based IDVAs role includes:

- Providing support to service users experiencing DVA (e.g. safety planning, emotional support, support through Criminal Justice System processes, housing and financial support)
- Training healthcare professionals on DVA issues
- Supporting implementation of NHS Trust DVA policies and referral pathways

Why the RIVA Study?

There is evidence of effectiveness of healthcare-based IDVA models across health services but:

- Little is known about how they operate and their successes in maternity services
- Changes in maternity services provision since COVID-19 (e.g. reductions in no. of appointments, remote delivery of care) may influence the impact of IDVA models?
- Unclear how this model is implemented in maternity settings

RIVA study objectives

Study 1 – Identify/describe IDVA models across English NHS Trusts with maternity services

Study 2 - Generate guidance to support health services in implementing IDVA models in Trusts with maternity services

Study 3 - Evaluate the implementation of IDVA models across 3 NHS Trusts and assess their impact in:

- Increasing awareness/identification of DVA by maternity services' staff
- Increasing number of referrals of mothers to coordinated DVA risk conferences and their referral to DVA services (via IDVAs)

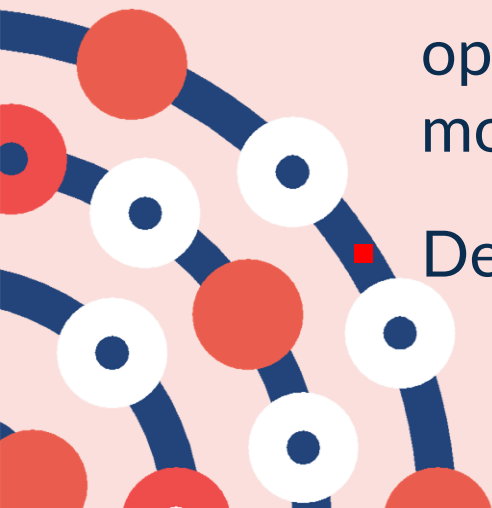
What will we do?

- *Study 1* - A survey of English NHS Trusts with maternity services
- *Study 2* - A stakeholder event on IDVA models for maternity services
- *Study 3* - An evaluation of IDVA models in 3 different Trusts

Study 1 – national survey



- Map the prevalence, diversity and common characteristics of IDVA models across English NHS Trusts with maternity services
- Online/telephone short survey with Heads of Midwifery
- Structured closed-ended questions about IDVA models with a few optional free-text items exploring implementation factors of the IDVA model
- Descriptive statistics and thematic analysis



Study 2 – stakeholder event



- Half-day online event with around 50 key stakeholders (e.g. senior maternity service and safeguarding leads, midwives, service users, survivors of DVA, IDVAs, specialist DVA voluntary sector services, policy makers, commissioners)
- Time-limited table discussions; people move between tables to answer specific questions based on questions set by the research team
- Framework analysis of data to generate recommendations on approaches to successful implementation



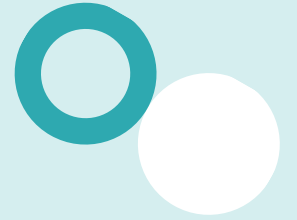
Study 3 – Case study evaluation



- All sites will receive implementation support from DVA specialist service
- Documentary analysis (*map IDVA programme details, compare intended vs actual*)
- Routine brief structured calls with IDVA implementation staff (*what works, what needs to be changed, how to overcome barriers*) – triangulate data with IDVA referral rates
- Qualitative interviews with staff, DVA service, service users and commissioners
- Survey of service users on impact, acceptability and feasibility of model
- Analysis of routine clinical data (*referral rates to IDVA, rates of DVA enquiry by maternity services, referral rates to risk assessment conferences*)



Study 3 – Case study evaluation



- Trained PPI members will conduct research interviews with service users
- Trained PPI members will be involved in the analysis of qualitative research data



Intended Impacts

- To establish recommendations for making IDVA models relevant for maternity services
- To generate implementation evidence to support the sustainability of IDVA models in health settings
- If successful, to develop an improvement science approach which Trusts can use to support the success of their IDVA models

Thank you

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