

IRISi

interventions

TRANSFORMING THE HEALTHCARE RESPONSE TO GENDER-BASED VIOLENCE

Empowering clinicians,
supporting survivors
and leading change
through evidence-
based programmes



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WHO WE ARE

IRISi is a social enterprise dedicated to improving the healthcare response to Gender-Based Violence (GBV). We bridge the gap between healthcare professionals and domestic abuse (DA)/ violence against women and girls (VAWG) services and our programmes provide specialist support for victims and survivors of domestic abuse and sexual violence (SV).

WHAT WE DO

We provide expert advice and consultancy in the field of GBV and health, whilst scaling our evidence-based commissionable programmes across the country. We also work with academic colleagues to develop innovative new evidence-based solutions, providing expertise at the health-GBV intersection, and we work alongside sector colleagues to champion this work at the level of national policy.

OUR MISSION AND VISION

Our mission is to promote and improve the healthcare response to GBV by working side by side with health and specialist services. Our vision is a world in which GBV is consistently recognised and addressed as a health issue.

WHY A HEALTHCARE RESPONSE TO DOMESTIC ABUSE IS NEEDED

GBV is a human rights violation and public health issue, imposing significant NHS costs. Survivors often hesitate to disclose their experiences, underscoring the urgent need for well-trained and well-equipped healthcare professionals to proactively address violence and abuse. Failing to ask about abuse misses critical opportunities to refer victims to specialist support.

NATIONAL DATA; NATIONAL IMPACT

Between April 2022 and March 2023, IRIS and ADViSE (our two commissionable programmes) operated in 40 UK areas and received 6,333 referrals. This brings total referrals to 36,352 since our first intervention, IRIS, launched in 2010. These are 36,352 survivors of DA and SV who were identified in healthcare settings and referred for specialist advocacy, many of whom would not have sought support elsewhere.

OUR SUITE OF PROGRAMMES

Our programmes are expertly developed; we have over 15 years' experience developing and implementing GBV programmes in healthcare settings, accompanied by comprehensive materials reflecting the latest research and legalisation. Our programmes are rigorously evaluated, ensuring they are cost-effective and evidence-based. These ready-to-go solutions ensure easy implementation and our nationwide reach means we are continually learning and improving.

DEVELOPMENT OF OTHER PROGRAMMES AND CONSULTANCY

IRISi also develops training and programmes in other healthcare settings and offers expert consultancy services. Our bespoke training and awareness-raising sessions are tailored for specialist settings like dentistry, ophthalmology, and emergency medical services. If you are aiming to enhance the response to domestic abuse within any healthcare setting, please get in touch with us.



Failing to ask about abuse misses critical opportunities to refer patients to specialist support.

WHAT IS IRIS?

IRIS is a specialist domestic abuse training, support and referral programme for general practices that has been positively evaluated in a cluster randomised controlled trial.

IRIS is a collaboration between primary care and third sector organisations specialising in DA. Core areas of the programme include ongoing training, education and consultancy for the clinical team and administrative staff, care pathways for healthcare practitioners and an enhanced referral pathway to specialist DA services for patients who are or have been subjected to DA.

The IRIS programme is an evidence-based, nationally recognised and cost-effective intervention that improves the primary care response to DA and improves the safety, quality of life and well-being of survivors of DA.

"I am now convinced that violence against women and children is a major public health problem with long term consequences for women and their families. As an experienced GP, the whole project has been nothing short of transformational".

IRIS TRAINED GP

WHY COMMISSION IRIS?

- **Evidence base and effectiveness over the years:**

The IRIS model is an evidence-based intervention following a successful randomised controlled trial (2007–2010) and continues to prove effective today. A more recent evaluation demonstrated that practices with the IRIS programme are 30x times more likely to recognise and refer DA victims/survivors to specialist support than those without an IRIS programme.¹

IRIS is cited as best practice by NICE guidance (NICE, 2014: recommendations 15 & 16)², and recognised within the Home Office's 'Domestic Abuse Statutory Guidance' (2022), 'National Statement of Expectations' (2022)³, and the 'VAWG Commissioning Toolkit' (2022)⁴.

- **Cost-effective:**

When compared with the NICE recommendation for flu vaccination, IRIS is shown to be 4.8 times more cost-effective than the flu jab,⁵ and analyses of both the Return On Investment (£16.79:£1) and Social Return On Investment (£10.71:£1) are positive.⁶ The 'VAWG commissioning toolkit' lays out that "adopting an 'invest to save' approach to commissioning can be achieved through the provision of early intervention and prevention services" and references IRIS as a cost-effective intervention (Home Office, 2022).⁴

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"IRIS is a high-quality, holistic package of training, support and referral pathways, which will provide local GPs with an essential tool to help them to provide the right interventions at the right time".

CHIEF NURSING OFFICER AND SAFEGUARDING
EXECUTIVE LEAD FOR NHS BLACK COUNTRY
INTEGRATE CARE BOARD

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General Practices with IRIS are 30x times more likely to recognise and refer DA victims/survivors to specialist support than those without the programme.



WHAT IS ADViSE?

The ADViSE programme (Assessing for Domestic Violence and Abuse in Sexual Health Environments) supports sexual health clinicians to identify and respond to patients affected by domestic abuse and sexual violence (SV) and provides a simple referral pathway to specialist services.

Core areas of the programme include ongoing training, education and consultancy for the sexual health team and administrative staff, care pathways for sexual health care practitioners and an enhanced referral pathway to specialist domestic and sexual violence services for anyone who has experienced DA and/or SV regardless of when it happened.

ADViSE compliments IRIS. We are identifying and supporting a new patient cohort and building on IRISi's established and evidence-based work.

WHY COMMISSION ADViSE?

- Open to all.
- Provides support around both DA and SV.
- Compliments IRIS by identifying a different patient cohort.
- Meets NICE (National Institute for Health and Care Excellence) Quality Standard recommendations around asking, responding and referring in relation to DA.

Across England, ADViSE has yielded significant insights from its Service Users⁷:

- 60% had not accessed support (of any kind around DV/SV) before.
- 29% identified as LGBTQ+.
- 66% disclosed mental health issues (36% with a formal diagnosis).
- 93% reported male perpetrators, highlighting the need for a gender-sensitive approach even when broadening access.



"I feel like I can start imagining what the future could be like."

ADViSE SERVICE USER



HOW TO GET IRIS/ADViSE PROGRAMMES IN YOUR AREA?

So, if you're interested or want more information about the programmes, what happens next? IRISi support with the commissioning of IRIS/ADViSE in your local area. We help calculate costs, and support with business cases and are happy to arrange a meeting to share in more detail how the programme works and the benefits for clinicians and victims/survivors in your area. For more information and to begin your journey towards commissioning one of our programmes, please contact info@irisi.org.

REFERENCES

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- 3) Home Office (2022) Violence Against Women and Girls: National Statement of Expectations. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1064571/National_Statement_of_Expectations_2022_Final.pdf (Accessed: 18th November 2022).

- 4) Home Office (2022) Violence Against Women and Girls Commissioning Toolkit. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1064572/VAWG_Commissioning_Toolkit_2022_Final.pdf (Accessed: 18th November 2022).
- 5) Barbosa, Verhoef, Morris et al. (2018), 'Cost-effectiveness of a domestic violence and abuse training and support programme in primary care in the real world: updated modelling based on an MRC phase IV observational pragmatic implementation study', BMJ Open. <https://bmjopen.bmj.com/content/bmjopen/8/8/e021256.full.pdf>
- 6) Dowrick, Hawking and Barbosa (2022), 'The social value of improving the primary care response to domestic violence and abuse: A mixed methods Social Return on Investment analysis of the IRIS programme' <https://irisi.org/wp-content/uploads/2022/11/The-social-value-of-improving-the-primary-care-response-to-domestic-violence-and-abuse.pdf>
- 7) Data based on the Greater Manchester and Bristol and South Gloucestershire referral cohort over 2022-23.