



# THE COST EFFECTIVENESS OF IRIS PROGRAMMES

## ABOUT IRISi

IRISi is a social enterprise established to promote and improve the healthcare response to gender based violence. We are a not-for-profit organisation that provides areas with the IRIS model, training package, updates to the training, and support.

## THE IRIS PROGRAMME

IRIS (Identification and Referral to Improve Safety) is a general practice based domestic abuse training, support and referral programme for female patients aged 16 and above experiencing abuse from a current partner, ex-partner or family member.

## NUMBERS

From November 2010 to March 2020, IRIS programmes have received referrals for 20,544 women and fully trained more than 1,000 general practices.

## REACH

IRIS is commissioned across areas of England, Wales, the Channel Islands and Northern Ireland.

## THE COST OF DOMESTIC VIOLENCE AND ABUSE

**£66 BILLION PER YEAR**

This is the estimated cost of domestic violence and abuse, including physical and mental health costs. (Home Office, 2019)



## THE EFFECTIVENESS OF IRIS PROGRAMMES

**30x MORE LIKELY**

Most recent research shows that practices with IRIS are 30 times more likely to make a referral to specialist support for their patients than those without IRIS. (Panovska-Griffiths et al, 2020)

## COST EFFECTIVENESS

The cost effectiveness of the model was assessed in a study and it found that the IRIS programme saved

**£14 FOR EACH WOMAN**

aged 16 or older registered in general practice. (Barbosa et al, 2018)

The societal perspective takes a wider view considering how the IRIS programme affects costs to the healthcare system, the legal system (civil and criminal), costs of housing, social care, personal costs, costs of specialised services and loss of productivity due days lost at work. This tool was used in the recent study of six IRIS sites running in north east London for over two years.

**FROM AN NHS PERSPECTIVE, IRIS WAS COST SAVING AND COST EFFECTIVE IN 4 OUT OF 6 SITES\*.**

\*The other 2 sites had disruptions in funding or service provision, which affected their cost-effectiveness results.

## JUST TO COMPARE

**IRIS IS AT LEAST 4.8 TIMES BETTER VALUE FOR MONEY THAN THE ANNUAL FLU JAB.**

From an NHS perspective, the net monetary benefit “for increasing vaccination by 5% for adults in clinical risk groups is £4.00 per targeted person, for pregnant women is £4.50 per targeted person, and for children in clinical risks groups is £2.40 per targeted person”.



## CONCLUSION

The IRIS programme is not only effective from an NHS perspective, but also cheaper than not implementing IRIS to the public pocket, if other services such as justice, housing and social care are considered. As such, it should be considered an effective health intervention that is worth investing in at the primary care level.

