Project Title: Preventing Domestic Abuse for All Children (PEAACH) Reference 11/3008/21 number: Lead: Professor Nicky Stanley Professor of Social Work **Institution:** School of Social Work University of Central Lancashire Start date: 2 January 2013 Status: Research in progress Plain English The aim of this study is to find out what is known about different ways of preventing and reducing the harm inflicted by domestic abuse for children and young people and to use the summarv: findings to make recommendations for future policy and research. We will bring together international evidence on preventive interventions in domestic abuse for children and young people under 18 in the general population. These preventive interventions include programmes delivered in school, and media and community campaigns and initiatives specifically targeting children and young people. Although a wide range of such programmes are currently delivered in the UK, few have been rigorously evaluated so little is known about what works in what setting and for whom. Most large-scale evidence of effectiveness is from North America; the extent to which these findings are relevant for the UK is unknown. Furthermore, while there is increasing interest in the potential of the media and new and emerging methods of communication for delivering community and media campaigns to young people, there is little evidence available to support such interventions. A particular feature of these interventions is their complexity. In order to identify which parts of a programme work for which groups of young people we will use a multi-faceted and multidisciplinary approach. In so doing, we will be able to disentangle different elements of programmes and assess their effectiveness, cost-effectiveness, and suitability for implementation in a given setting. This study will combine different forms and types of information to develop a picture of what is known about such interventions and to consider what directions research should take to develop this knowledge further. The research will have three overlapping phases: (i) a systematic review of the existing literature; (ii) a survey to identify current provision (iii) consultation with key stakeholders. This mixed knowledge approach will allow for different sources of evidence to feed into the review's final recommendations. The review of international literature will provide research evidence from both quantitative and qualitative perspectives; it will include 'grey' literature such as independent project evaluations as well as peer reviewed papers. The literature on cost and cost effectiveness will also be identified and reviewed. The survey, undertaken in 18 local authorities identified as having high, median and low rates of domestic violence will allow us to capture knowledge about local practice across the UK from practitioners; and the consultation phase will facilitate the inclusion of the views of representatives from stakeholder groups, including identified experts and young people themselves. Three advisory groups will provide consultation and advice. These will include an Advisory Group for Education, an Advisory Group for Media and Community Initiatives and a Young

People's Advisory Group comprising young people familiar with consultation on similar issues. Together with individual interviews with identified experts in the field, these groups will allow a wide range of perspectives to feed into the study.

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The final report will provide evidence on the effectiveness and cost-effectiveness of interventions to prevent domestic abuse, and to discover which approaches are likely to be most acceptable to young people, practitioners, policy makers and funders in the UK. The recommendations will inform future research.

Protocol: Link here

Cost: £

PHR Protocol

Start Date: 2nd January 2013

Title: Preventing Domestic Abuse for All Children (PEAACH)

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1. Summary for general audience

The aim of this study is to find out what is known about different ways of preventing and reducing the harm inflicted by domestic abuse for children and young people and to use the findings to make recommendations for future policy and research. We are bringing together international evidence on preventive interventions in domestic abuse for children and young people under 18 in the general population. These preventive interventions include programmes delivered in school, and media and community campaigns and initiatives specifically targeting children and young people. Although a wide range of such programmes are currently delivered in the UK, few have been rigorously evaluated so little is known about what works in what setting and for whom. Most large-scale evidence of effectiveness is from North America; the extent to which these findings are relevant for the UK is unknown. Furthermore, while there is increasing interest in the potential of the media and new and emerging methods of communication for delivering community and media campaigns to young people, there is little evidence available to support such interventions. A particular feature of these interventions is their complexity. In order to identify which parts of a programme work for which groups of young people we are using a multi-faceted and multidisciplinary approach. In so doing, we are able to disentangle different elements of programmes and assess their effectiveness, cost-effectiveness, and suitability for implementation in a given setting.

This study combines different forms and types of information to develop a picture of what is known about such interventions and to consider what directions research should take to develop this knowledge further. The research has three overlapping phases: (i) a systematic review of the existing literature; (ii) a survey to identify current provision and (iii) consultation with key stakeholders. This mixed knowledge approach allows different sources of evidence to feed into the review's final recommendations. The review of international literature will provide research evidence from both quantitative and qualitative perspectives; it includes 'grey' literature such as independent project evaluations as well as peer reviewed papers. The literature on cost and cost effectiveness is also being identified and reviewed. The survey, undertaken in 18 local authorities identified as having high and low rates of domestic violence allows us to capture knowledge about local practice across the UK from practitioners; and the consultation phase facilitates the inclusion

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Three consultation groups are providing consultation and advice. These include an Consultation Group for Education, an Consultation Group for Media and Community Initiatives and a Young People's Consultation Group comprising young people familiar with consultation on similar issues. Together with individual interviews with identified experts in the field, these groups allow a wide range of perspectives to feed into the study.

The final report will provide evidence on the effectiveness and cost-effectiveness of interventions to prevent domestic abuse, and to discover which approaches are likely to be most acceptable to young people, practitioners, policy makers and funders in the UK. The recommendations will inform future research. Much of the research is desk-based. Appropriate ethics and governance procedures have been adopted for the young people's consultation group.

Professor Stanley and Dr Ellis are recognised UK experts in the prevention of the effects of domestic abuse on children. They have a history of collaboration in this area of research as well as having independently conducted a range of studies in this field. The team includes experience of conducting systematic reviews, skills in undertaking economic evaluations in domestic abuse and established links with policy and practice networks addressing violence against women and children. The study has been planned and is being undertaken in partnership with Women's Aid (the leading organisation campaigning on violence against women) and the PSHE Association whose members play a key role in the delivery of preventive programmes.

2. Background and existing research

There are few rigorous evaluations of primary prevention work relating to preventive interventions in domestic abuse for children and young people in the UK or elsewhere. Whitaker et al. 1 identified 11 school-based programmes, all North American, for inclusion in a systematic review of primary prevention of partner violence. The majority of programmes were delivered in school settings and aimed at universal populations in middle or high schools. These studies all focused on preventing violence in young people's own relationships ('dating' violence), recognised as a strong precursor to partner violence in adulthood2. The review found that nine of the studies reported at least one positive outcome, relating to either knowledge or attitudes. Three of the studies were judged high quality whilst the others had methodological shortcomings including no behavioural outcomes, a short follow-up period and low or unreported retention rates. The longest follow-up period (in one study) was four years3. The authors concluded that, although some are promising, no firm claims can be made for the effectiveness of school-based partner violence prevention programmes.

A plethora of single study evidence has been published in North America. These illustrate the strengths and weaknesses of such studies in relation to effectiveness. The programmes evaluated addressed dating violence_{4,5,6}, gender violence/sexual harassment_{7,8}; gender inequality₉ and bystander behaviour (those who observe conflict or unacceptable behaviour)₁₀. These studies employed a variety of methodologies; the follow-up periods varied from immediate post-intervention up to 3 years. Increased knowledge and attitude change were the key outcomes measured, although some studies examined rates of self-reported physical dating violence and risk related behaviours (such as substance use)₆, and reported incidences of physical violence and use of assertive strategies₉. Most of these studies showed improvement in students' knowledge, although Lowe et al₅ found that attitudes remained stable. Wolfe et al.₆ found no reduction in substance use or peer violence although boys in the intervention group reported increased condom use 2.5 years later. All the studies reported differential effects between boys and girls in relation to one or more outcomes with the exception of Taylor et al.₇ Further analysis did, however, show that boys are more involved in violence than girls as perpetrators and victims₈. In one study, some improvements did not manifest themselves until year three₉.

School-based work is relatively widespread in the UK, however the vast majority of practice remains unevaluated and existing evaluations are mostly limited in their design and

implementation₁₁. Some independent studies have been undertaken_{12,13}, ₁₄, ₁₅, ₁₆, ₁₇. These are mostly small-scale, use mixed method and focus predominantly on changes in knowledge and attitudes. All the programmes evaluated addressed domestic violence and one examined violence against women and girls more widely. Six were delivered in secondary schools and two were aimed at primary and secondary students. Five used pre and post intervention questionnaires with the longest follow-up period being one year. The Reed Howie study produced in-depth qualitative data as it focussed on processes and perceptions₁₂. The impact of adopting a whole-school approach was explored by Maxwell et al. ₁₆. The three studies reviewed by Hester and Westmarland all reported increases in knowledge of domestic violence along with changes in attitudes₁₄. Gender differences in learning and responses to the programmes were noted by six of the studies with a greater impact on girls than boys. Maquire et al. reported a positive change in behavioural intentions in relation to dating violence₁₇.

Several literature reviews on preventing domestic abuse or violence against women and girls have been undertaken in the past five years_{18, 19, 20, 21, 22}. The reviews, aimed at policy makers, included qualitative, quantitative and grey literature, theoretical work, consultations with policy makers and practitioners. A protocol ₂₃ has been developed for a Cochrane review in this field.

Public education/media campaigns for young people are a recent development in the UK; there is substantially less of this work than school-based programmes 20. Drawing on social marketing techniques, campaigns generally aim to raise awareness of domestic violence and provide information on support services. The BBC *Hitting Home* series, broadcast in 2003, included programmes with large audiences of children and young people. Some programmes and items were specifically targeted at children and young people, such as *Behind Closed Doors*, and special content in *The Big Toe Radio Show* and *NewsRound*24. The Home Office funded 'Teenage relationship abuse' (2011) and the current 'What is Rape' awareness raising campaigns are amongst the few directed specifically at young people25. Many public education initiatives are unevaluated. Where campaigns are evaluated they generally show increased knowledge of domestic abuse, increased reporting and help seeking by survivors26, 27, 28, 29, 30, 31.

Community initiatives specifically for children are often integrated with schools programmes, for example *Violence Against Women - Australia Says No*₃₂ and *Zero Tolerance* (Scotland)₃₃. Some are arts-based, e.g. Glasgow's 16 Days of Action₃₄ and several community projects in Australia₃₅. Increasingly, work with children and young people incorporates Internet resources with several interactive websites established since the mid-2000s. The Promoting Healthy, Equal Relationships campaign (Ontario, Canada) includes a web resource targeted at 8 to 14-year-olds ₃₆. Some campaigns have been produced in consultation with young people, e.g. Nottinghamshire Domestic Violence Forum's *Respect Not Fear*₃₇, *Break the Cycle* (US)₃₈ and Scottish Women's Aid *Our Rights, Our Lives*₃₉. Studies show that community-based programmes increase action against domestic abuse₂₇, ₂₈, ₄₀ and that effectiveness is enhanced where different campaign strands are integrated, through use of research, clear conceptual frameworks and where messages are persistent and consistent₁₈, ₃₅, ₄₁. VicHealth₄₂ and EVAW₂₁ identified community development and social marketing strategies as promising. A recent but untested initiative is the use of serious games to address dating violence; the CAVA project is developing a video game for young people aimed at changing attitudes to dating violence₄₃.

There are clearly considerable gaps in the evidence for prevention of domestic violence aimed at children. Most of the limited quantitative evidence focuses on school-based work. The more innovative approaches emerging from the grey literature do not seem to have been formally evaluated, there appears to be limited empirical evaluation of UK based studies, and there is little clarity on the underpinning theoretical assumptions. The evidence on costs and cost-effectiveness is limited although some studies, have addressed this. However, although the extent and quality of the evidence base is limited in places, practice is well established in the UK. There is therefore a need for a review that draws on a wide range of sources and which addresses current practice and stakeholders' views, as well as the formal published literature.

4. Risks and benefits

This study poses few risks for participants or society. Most of the research is desk-based and the mapping and consultation phases is being undertaken with practitioners and experts in this field who are familiar with discussing and reporting on this type of work.

A young people's consultation group will be convened from an established young people's participation group of over 16s that has experience of being consulted on a range of similar issues. Age-appropriate information is being provided to ensure that they are fully informed about the nature of the topic to be discussed beforehand and the researchers will liaise with the local organisation supporting this group to arrange for support and information to be provided in the case of any participant becoming distressed or disclosing any personal experience of abuse that indicates that they or someone else may be at risk of harm. Ethical approval has been sought for this aspect of the study.

5. Rationale for current study

Although a wide range of interventions aimed at preventing domestic abuse are known to be delivered to children and young people in the general population, there are few rigorous evaluations of such primary prevention work in the UK_{11, 20}. Most large-scale evidence of effectiveness is from North America; the extent to which these findings are relevant and replicable in the UK is unknown. A number of local case evaluations have been published in the UK_{12, 13, 14, 15, 17} but these have not as yet been synthesized. Current reviews in this area have mainly been unsystematic, but have identified some promising practices_{18, 20}

Most educational programmes are delivered in schools and there has been some debate and uncertainty about the timing and content of such programmes₄₄. There is increasing interest in the potential of the media and new technology for delivering community mobilization and media campaigns to young people₄₅ but there is little evidence available to support such interventions. This study aims to bring together different forms and types of information to develop a picture of what is known about such interventions and to consider what directions research should take to develop this knowledge further. This is a field where practice has developed rapidly in the absence of a comprehensive UK evidence base. We are therefore undertaking a mixed knowledge review47 that engages with practitioners and experts in this field through mapping and consultation phases in addition to systematically reviewing a broad range of UK and international literature, including 'grey' literature as well as peer-reviewed studies. The Mapping Study contributes knowledge about what interventions are currently being delivered in which settings in the UK and provides information about the acceptability of different interventions. Consultation adds methodological rigour to scoping reviews⁴⁸ and is particularly appropriate in emerging fields of study such as this. The literature on cost-effectiveness is also being systematically identified, appraised and summarised.

The study findings will inform policy, practice and future research, addressing which interventions should be investigated in the UK context and how this should be done, as well as identifying target population groups and potential outcome measures.

6. Research aims and objectives

Aims

- 1. To identify and synthesise the evidence on effectiveness, cost-effectiveness and acceptability of preventive interventions addressing domestic abuse for children and young people under 18 in the general population.
- 2. To produce advice on what form future research might take in the context of England and Wales.

Objectives

1. To locate and describe the existing body of evidence relating to preventive interventions addressing domestic abuse for children and young people under 18 in the general population.

- 2. To identify the range of short, medium and long-term outcomes achieved by preventive interventions for children and young people under 18 to date.
- 3. To distinguish between different preventive interventions including educational programmes, media and community campaigns and other initiatives in terms of effectiveness, cost and cost-effectiveness.
- 4. To identify particular elements of programmes or interventions that have proved effective.
- 5. To identify which groups of children and young people appear to benefit most from specific approaches, and whether interventions should be targeted at particular groups in particular settings.
- 6. To discover how gender can inform interventions in terms of design, content and target audience.
- 7. To agree with stakeholders which interventions might prove most acceptable and cost effective in the context of services and developments to date in the UK, and to identify the research gaps.

6. Research design

The study comprises a mixed knowledge review₄₇ with three phases: a systematic mixed methods literature review, a mapping study of current practice, and a consultation phase. All three phases are taking place in parallel over a period of 18 months. This mixed knowledge approach allows for different sources of evidence to feed into the review. The literature review is providing research evidence from both quantitative and qualitative perspectives; the mapping study allows us to capture knowledge from current practice and from practitioners; and the consultation phase is facilitating the inclusion of the views of representatives from stakeholder groups, including identified experts and young people themselves.

All three phases of the study are being informed by a realist methodology, as pioneered by Pawson et al.49. Realist research is focused on 'what works, for who, in what circumstances'. and is also interested in the theories that underpin programmes of health and social care provision. Pawson and colleagues49 note that outcomes are a consequence of the interactions between mechanisms, and contexts; that is, what works in certain contexts may not work in other situations. For example, different programmes may be required for children of different ages and in different settings. However, all of this variation might be explained by one or two relevant theories that act as underpinning principles that are expressed differently in different local contexts. Box 1 identifies the key questions and sub-questions that inform all three phases of the review. These questions derive from the research objectives above. They are being considered and, if necessary, refined in the first meetings held with the three consultation groups.

Definition of terms: The first meetings of the three consultation groups (see below) consider the definitions adopted for key terms but the following definitions are proposed:

Preventive interventions: Programmes delivered in schools and other settings (such as youth centres, residential homes) to children and young people under 18 in the general population that aim to prevent domestic abuse through raising awareness and by addressing domestic abuse in young people's own interpersonal relationships and any experience of domestic abuse in their parents' relationships. Media and community campaigns and initiatives aimed at preventing domestic abuse that address children and young people in the general population.

Domestic abuse: To include coercive and controlling behaviour⁵⁰ in addition to physical, sexual, threatening, emotional/psychological or financial abuse of those who are or have been an intimate partner, regardless of gender or sexuality. To include 'honour-based' violence and forced marriage but not Female Genital Mutilation (in line with definition adopted by NICE's forthcoming Public Health Guidance).

Phase 1: Literature Review: This is comprehensive while aiming to answer the specific questions listed above₅₁. The realist methodology allows consideration of the underlying theories and mechanisms of the various programmes and programme components identified, and which specific

groups of children and young people they are most effective for. A preliminary search strategy, designed to encompass all the key questions above, is given below. The final search strategy is being confirmed with the study stakeholders in the first two months of the study. For each of the key questions above, the types of stud(ies) that are most likely to provide a definitive answer will be confirmed, based on the knowledge matrix developed by Petticrew and Roberts52. This prioritises different kinds of knowledge for different kinds of questions since the traditional 'hierarchy of evidence' can be problematic when appraising evidence for public health or social interventions such as those examined here.

Search Strategy: The applicants are harnessing their knowledge of work in this field to search databases, key journals, websites and relevant organisations and networks. The proposed inclusion and exclusion criteria are shown in Table 1 below but these are being refined further in collaboration with the Consultation Groups (see below), and with the assistance of UCLan library staff with expertise in defining and refining electronic searches. The review covers material published in all languages between 1990 and 2012, including meta-analyses, research reviews, controlled studies, before-and-after studies, independent case evaluations and ethnographic studies. Their relevance is being assessed using Petticrew and Roberts' matrix51. Recent reviews of prevention of different but related forms of violence such as child sexual abuse have identified between 16 and 52 relevant studies53, 54, 55, 56. These reviews have not however included the 'grey' literature which we are including in our review (since much UK material is only available in this form).

A wide range of databases are being searched, including: AMED; ASSIA; BNI; CINAHL; Current Contents Search® - Life Sciences and Clinical Medicine Edition; Current Contents® - Social and Behavioral Sciences; Embase; Education Resources Information Centre (ERIC); Evidence-Based Medicine Reviews (EBMR); Global Health; MEDLINE®; PsycARTICLES®; PsycBOOKS ®, PsycINFO ®, Social Policy and Practice, Social Work Abstracts, Sociological Abstracts, Studies on Women and Gender Abstracts, Australian Education Index, British Education Index, Women's Studies International; and the Centre for Reviews and Dissemination NHS EED (NHS Economic Evaluation Database). We are searching relevant websites such as NICE; SCIE; WHO; National Resource Center on Domestic Violence (US); Domestic Violence Resource Center Victoria, Australia: Centre for Research on Violence against Women and Children (Canada). We have set up a Zetoc alert list to include all journals regularly publishing research in this field and, if new studies emerge during the study, we will use them to test emerging findings and theories. Search terms have been chosen that generate a wide range of hits in the first instance. They have been structured using the PICO framework (population, intervention, context, outcome). Appendix 1 provides examples of some of the key search terms to be utilised. These key terms will be extended following consultation with the expert consultation groups.

MESH terms are being used where they are available. In the absence of a relevant MESH term, searching will be by keyword. The search strategy is being tested and refined for parsimony in the run-in period of the study. The reference lists of all included studies are then searched to check for any frequently cited studies not identified by the primary search ('back-chaining').

Inclusion and Exclusion Criteria: 1990 has been chosen as the start date for inclusion of material for review since prevention programmes emerged in North America in the mid-1980s44 and evaluations and research into such programmes did not appear until the 1990s. The full range of languages are being included and translation facilities will be utilised where necessary. Much of the UK literature is only available as 'grey literature' so this will be included in the review and the two Expert Consultation Groups and the mapping phase of the study are assisting in identifying this literature. Local evaluations (where independently undertaken), technical reports, theses and bibliographies are being included but in-house evaluations are being excluded. Key authors in the field will be contacted to locate any studies that are on-going or completed but not yet published. Study inception databases and study log portfolios (such as the NIHR portfolio of studies) are being searched for newly funded and on-going or not yet published studies.7

Include	Exclude
1990 – 2012 All languages – papers will be translated as required Peer-reviewed research papers Grey literature from UK only including local independent evaluations, national reports, technical reports and theses.	
Meta-analyses, research reviews, controlled studies, before-and-after studies, independent case evaluations and ethnographic studies Children and young people below the age of 18 Studies assessing outcomes/experiences of interventions designed to help children/young people in the general population to avoid/deal with domestic abuse both in their own and their parents' interpersonal relationships Studies of interventions aiming to prevent children and young people becoming either/both victims or perpetrators of domestic abuse Studies of preventive interventions targeting girls/boys/both	In-house evaluations, internal audits Studies with minimal or no data relevant to children/young adults below 18 Studies focused only on prevalence or outcomes of domestic abuse Studies focused on prevention programmes for adults who perpetrate abuse Studies focused only on interventions for children and young people who have experienced domestic abuse Studies focused only on child abuse and neglect or on bullying

All studies meeting the inclusion criteria are subject to quality assessment using a tool relevant to the methods used. The tools include CONSORT (for any randomized controlled trials that are identified)₅₇, STROBE (cohort, case–control, or cross-sectional designs)₅₈, PRISMA guidelines (systematic reviews)₅₉, and a qualitative research quality assessment tool₆₀. All identified studies regardless of quality are included in the literature synthesis, with the quality level of each one identified by a score adapted from the GRADE approach, to take account of the range of methodologies in this review.

Analysis: Three topics are being addressed in the analysis of the included literature: study and outcome description; costs and cost-effectiveness; and views and experiences. A realist review approach provides the framework for the analysis, based on the approach used by Greenhalgh et al 2007₆₁.

Study and outcome description: To describe the studies and outcomes, six intersecting analyses are being performed, to provide a range of perspectives on our central question: what works, for who, in what circumstances:

- 1. The characteristics of each study are being logged on a pre-designed data extraction form.
- 2. Using a pre-designed summary form, the intervention components of, participants in, context of and outcomes assessed in each study are being described. Logic models are beingconstructed

to examine the likely theoretical basis of each intervention programme identified, and the hypothesised impact on the included participants and chosen context. Studies assessing similar intervention components are being grouped together (regardless of methodology or outcomes examined at this stage), and interrogated to establish how far they are designed with attention to the theoretical principles identified.

- 3. The outcomes used across the studies are being described, along with the timepoints at which they were assessed, and the number of studies that included each specific outcome.
- 4. To answer the question 'which outcomes are most affected by which type of intervention'? studies are being grouped and tabulated under each of the outcomes identified. It is anticipated that most studies will be in more than one group, and that most outcomes will be measured by more than one study. Given the anticipated methodological and contextual heterogeneity between studies, quantitative results are being summarised narratively for each outcome. This phase of the analysis will broadly consider the question of which outcomes are most likely to be influenced by which type of intervention programme in which specific population group(s) and context(s). It also pays attention to which outcomes are not affected by specific interventions.
- 5. To answer the question 'what is the range of outcomes that might be affected by each type of intervention programme?' studies are being re-grouped and tabulated under similar intervention programmes. Quantitative data on the findings are being summarised narratively across each group for each outcome measure included. Variations in effect are being modelled against the predictions of what is likely to work, made by the logic models.
- 6. For each intervention programme, data that can be identifiably linked to gender is separately analysed by sub-grouping and tabulating the relevant data, and then summarised narratively. If separate data are provided in more than one study for other subgroups (such as younger or older children, or specific socio-demographics) the same process is being undertaken for these sub-groups.

Costs and Cost Effectiveness Analysis: Programmes aimed at preventing domestic abuse in children and young people that have been costed is being identified through the literature search by including appropriate search terms. The costing of programmes is being identified using 'cost', and 'cost analysis'; more sophisticated studies that include an evaluation of cost and benefit are being identified using 'economic evaluation' and 'cost-effectiveness'. We have designed a data extraction pro forma, based on that proposed by Carande-Kulis et al.62, but tailored specifically for this review. This focuses on: the type of analysis such as cost-effectiveness, cost-consequences; whether it includes a model; the perspective of the study, i.e. whether costs are restricted to the service provider or are wider ranging and including, for example, all public sector costs or society in general; the size of the study; the length of follow up; use of sensitivity analysis and generalisability.

Data will fall into a number of broad categories. A minimum requirement for inclusion is the costing of a programme. Additional information that may be reported is: the use and valuation of other health and social care resources; the use and valuation of other public sector resources; societal costs; benefits of a programme expressed in natural units (for example, reduction in the number of days off school); valuation of benefits in terms of quality adjusted life years (QALYs) or disability adjusted life years (DALYs); modeling of future costs and benefits. We are using the data extraction tool to appraise the quality of the data in line with the Drummond checklist63 for individual-level prospective studies and Philips et al.64 for models. Corso and Lutzker65 noted that "the economic literature is extremely scarce for preventive interventions concerning child maltreatment", therefore detailed quantitative synthesis is unlikely to be feasible. We are, however, drawing inferences from all available data by combining the findings narratively and in a table. Information on the cost of interventions and societal costs and benefits is being analysed according to setting, participant group, and intervention type – specifically educational, media and community, and other initiatives. For comparative purposes, cost is being adjusted for inflation and presented in local currency and sterling using appropriate exchange rates.

Views and experiences: Studies that are focused on or include data relating to assessment of the views and experiences of children and young people accessing intervention programmes (and any studies that assess the reasons for non-access or low uptake) are being tabulated separately. Quantitative data are being summarized narratively based on a simple thematic overview of the areas covered by the data collection processes in each study and across the studies. Good quality qualitative data is being synthesised employing a meta-synthesis approach (based on meta-ethnographic techniques_{66, 67}) using reciprocal and refutational translation, and line of argument synthesis. Similarities and differences between the areas covered in the quantitative and qualitative studies are being noted. Gender differences in terms of the views and experiences of specific programme components are being explicitly identified and logged.

Phase 2: Mapping Study-This is being used to determine what preventive initiatives are currently delivered in England, Wales, Scotland and Northern Ireland, to which groups, by whom and to what extent and to identify any additions to the evidence base. A stratified sample of 18 local authorities is being developed using police figures for domestic violence incidents to ensure that local authorities with high and low rates of domestic violence are included. Within each of the selected local authorities, an on-line survey is being undertaken of schools and other educational establishments (including Pupil Referral Units); sexual health services; domestic violence forums/CDRP partnerships/CSPs and Local Safeguarding Children's Boards.

Survey Monkey is being utilized for this phase of the study. The survey content and design is being developed in consultation with the consultation groups and the survey tool is being piloted. It identifies any relevant local interventions and collects data on objectives, format, context, content, target groups, methods of delivery, uptake, funding and evaluation. The data collected is be analysed using SPSS and open-ended questions will be analysed thematically. The framework provided by the key research questions is being used to structure analysis of survey data.

Phase 3: Consultation – This is taking place through both individual interviews and group discussions in the consultation groups. All discussions use a semi-structured interview schedule designed in accordance with the framework supplied by the key research questions. Interviewees and consultation group participants are being provided with appropriate information about the study beforehand and discussions recorded with their consent.

Individual interviews are being undertaken with approximately 12/15 key informants from the policy, campaigning, education, health and voluntary sectors in England and Wales who have been identified with the assistance of the consultation groups and from the researchers' networks. Additionally, telephone interviews are being held with a small number of key informants from North America and Australia where interventions are well developed in comparison with the UK. Since the area addressed by this scoping study is broad, covering a range of stakeholders, the study benefits from the advice of 3 consultation groups convened at 3 key stages: at the outset; at completion of the mapping study and to contribute to the final knowledge synthesis. They contribute to refining the research questions, identifying key search terms and relevant literature; identifying relevant networks for distribution of the mapping survey and are providing comment on the findings of this phase. Their views and experience are being fed into the review along with the findings of the individual interviews. They play a key role in considering whether the interventions identified as most effective are compatible with UK policy and practice.

The Consultation Group for Education is addressing the evidence on educational programmes and is being convened by the PSHE Association (see section below on Public Participation for further details of consultation group membership). The Consultation Group for Media and Community Initiatives is examining the community education campaigns, social marketing campaigns, and the use of a range of media including TV, radio and the Internet, and is being convened by Women's Aid. The third group will be a Young People's Consultation Group. Up to 12 young people aged 16-24 are being recruited from an already established youth participation group in a Midlands city that has experience of being consulted on related issues. This group are providing young people's perspectives on key questions to be addressed, the scope of the study and on emerging findings. The consultation group meetings are recorded with participants' permission and transcripts

produced from both these meetings and the individual consultation interviews are being analysed using the key questions framework prior to synthesis.

Synthesis: The realist methodology adopted here emphasises the value of combining a range of stakeholder perspectives and our mixed knowledge approach allows us to draw on different types of evidence to bring these perspectives together. The findings from all three phases of the review are being mapped together graphically across all the key questions and sub-questions to illustrate commonalities and differences between the data sets, and identify where particular strategies have been used successfully with particular groups of children and young people. The resulting evidence statements are being presented in appropriate formats to the Consultation Groups and are being used as the basis for the final consultation exercises. Techniques such as infographics63 or vignettes may prove useful for summarising complex data for stakeholders. The GRADE tool as adapted by Lewin et al.69 is being used to assist in developing recommendations that include consideration of such factors as ease of implementation and how pate to existing policies, values and practice. We are also identifying the underlying theoretical rationale for programme components that seem to work, paying attention to the theoretical explanations for why certain programme components are likely to work in some contexts and not in others. Where the evidence of effectiveness and/or acceptability is weak or non-existent, we are working with the consultation groups to identify priorities for future research.

Outputs: In addition to producing a final report, we are producing a range of publications for peer reviewed professional and research journals and outputs tailored for practitioner and policy audiences. The team has extensive experience of writing for diverse audiences and we are structuring evidence statements for specific stakeholders. The consultation groups and partner organisations are assisting with dissemination and papers will be delivered at conferences for practice, research and policy audiences.

Socioeconomic position and inequalities: The review highlights the role of gender in relation to the design, content and targeting of preventive programmes and the consultation groups includes researchers with expertise in this field. Additionally, we have ensured that the Young People's Consultation Group includes both boys and girls in order that their views can be captured and contrasted. While focusing on the general population, the review also aims to identify any preventive programmes that have proved effective with particularly disadvantaged groups including children and young people excluded from school; children and young people with disabilities; BME children and Young people; teenage mothers and looked after children and young people. These groups may be particularly vulnerable to the impact of domestic violence and may be likely to miss out on mainstream provision of preventive initiatives.

7. Outcome measures

The outcomes commonly used to measure the effectiveness of preventive interventions include children's knowledge of domestic abuse, their help-seeking, attitudinal change and behaviour change in young people's interpersonal relationships. It is important that outcomes for children and young people in their own right are examined rather than focusing on them only as adults in the making. There is very little evidence available concerning interventions that prevent children becoming victims or perpetrators of domestic abuse in later life. The longest follow-up study identified in this field has measured outcomes over 4 years₃. Consequently, the study examines evidence in relation to a range of outcomes with consideration of short, medium and long-term effects as well as reviewing the evidence available on cost-effectiveness

8. Ethical arrangements

Ethics approval has been granted by the University of Central Lancashire's Research Ethics Committee in relation to the involvement of young people in the Young People's Consultation Group. The young people participating in this group are members of an already established young people's participation group who are familiar with being consulted on a range of similar issues. They have been provided with age-appropriate information about the study and informed consent procedures will be utilised. The local organisation supporting this group have arranged for support and information to be provided in the case of any participant becoming distressed or disclosing any

personal experience of abuse that indicates that they or someone else may be at risk of harm. The young people are being reimbursed for their time and travel in accordance with the established procedures for this group.

9. Research governance

Study sponsor: University of Central Lancashire

10. Expertise

Professor Stanley and Dr Ellis are recognised UK experts in the prevention of the effects of domestic abuse on children. They have a history of collaboration in this area of research, as well as having independently conducted a range of studies in this field. Professor Stanley's work examines the effects of domestic abuse on children and the service response, she also researches children's safeguarding and children's mental health. She has conducted studies and reviews for a range of commissioners including the DH, DfE, SCIE and the NSPCC. She recently completed a research review on Children Experiencing Domestic Violence and she is a member of the Programme Development Group advising NICE on developing their Guideline on Interventions in Domestic Violence. She will direct the project taking lead responsibility for coordinating the various components of the review, management of the budget and reporting to the commissioners. She will supervise the work of the Research Fellow (to be appointed) based at UCLan.

Dr Jane Ellis is Senior Research Fellow UCALN. She undertook the first UK mapping study in this field followed by a study of school-based work to prevent domestic abuse in 2004 and has evaluated two programmes. She has provided consultancy on prevention to various organisations and is a member of the DfE Consultation Group on Violence Against Women and Girls. She will take responsibility for work on the literature review and work alongside the Nicola Farrelly on the mapping study and consultation.

Professor Soo Downe coordinates research in childbirth and health at UCLan. She has expertise in qualitative and quantitative systematic reviews, and has developed new approaches to assessing the quality of qualitative studies for inclusion in such reviews. She works on the integration of mixed methods in reviews and primary research to accommodate complexity. She will advise on and oversee the literature review taking particular responsibility for quality control.

Dr Sandra Hollinghurst is Senior Lecturer in Health Economics at the University of Bristol specialising in the economics of primary and community health care. Currently she is working on a randomised controlled trial evaluating the effectiveness and cost-effectiveness of psychological intervention and specialist advocacy for women experiencing domestic abuse. She will take responsibility for assessing findings on cost-effectiveness.

Professor Sue Bailey is a Child and Adolescent Forensic Psychiatrist whose research addresses public mental health and public education aimed at enabling children to achieve resilience as well as young people with complex mental health needs. Now President of the Royal College of Psychiatrists, she was a member of NIHME Expert Group on Domestic Violence and Sexual Abuse and is currently undertaking a systematic review in this area. She will advise and facilitate access to a range of networks.

Nicola Farrelly Research Fellow at UCALN will take responsibility for the administration and analysis of the mapping study and will contribute to the work of the literature review and the Expert Consultation.

Team members meet regularly across the course of the study and communication is being assisted by email and telephone conferences. All team members are contributing to the design of the mapping and consultation phases, to synthesis, writing up and dissemination.

11. Members of the public

This application has been developed with input from two organisations that play an ongoing role in the study by convening and managing two Expert Consultation Groups. Representatives of a wide range of health, education, social care and voluntary sector organizations, as well as policy makers and research funders are included in both consultation groups. The Consultation Groups advise on the key questions and terms underpinning the study and assist with identifying grey literature as well as with the design and distribution of the Mapping Study. Members' views are also being elicited as part of the consultation phase of the review. The PSHE (Personal Social and Health Education) Association is convening and managing the Consultation Group for Education. Its members are those professionals most likely to be involved in delivering the preventive interventions addressed by this scoping study. This consultation group will elicit information and views on interventions delivered in educational settings. It includes representatives of the Association for Citizenship Teaching; School and Public Health Nurses Association; Association of Directors of Children's Services; government departments; key academics in this field and potential funders such as Comic Relief.

Women's Aid is convening and managing the Consultation Group for Media and Community Initiatives. The organisation is in an ideal position to undertake this role having commissioned and delivered a range of such interventions and owning links with a wide range of other organisations with experience in this field. Membership of this Consultation Group includes representation from organisations such as Women's Aid, Zero Tolerance, Child Exploitation and Online Protection (CEOP) and ChildLine, who have commissioned media campaigns aimed at young people, as well as relevant experts and academics. Young people themselves are contributing to the review through a Young People's Consultation Group. Up to 12 young people aged 16-24 have been recruited from an established youth participation group with experience of being consulted on related issues. They are providing young people's perspectives on key review questions, the scope of the study and emerging findings.

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Appendix 1 PEAACH Search Strategy Search Terms:

Population	Intervention	Context	Outcome
Child\$ OR	Prevent\$ OR	Domestic ((abuse OR violen* OR batter*)) OR	Outcome OR
Young person	Educat\$ OR	Home AND ((abuse OR violen* OR batter*)) OR	Cost OR
OR			
Young adult OR	Train\$	family AND ((abuse OR violen* OR batter*)) OR	Cost analysis OR
Young people	Teach\$ OR	families AND ((abuse OR violen* OR batter*)) OR	Cost effectiveness
OR			OR
Adolescent OR	Media OR	gender AND ((abuse OR violen* OR batter*)) OR	Acceptabl\$ OR
Teenager\$ OR	Communit\$ OR	spous* AND ((abuse OR violen* OR batter*)) OR	Effective\$ OR
Youth\$	Campaign\$ OR	partner* AND ((abuse OR violen* OR batter*)) OR	Experience\$ OR
	Social Marketing OR	fiancé AND ((abuse OR violen* OR batter*)) OR	View\$ OR
	Public\$	cohabitant*AND ((abuse OR violen* OR batter*)) OR	Attitude\$ OR
	School	intimate AND ((abuse OR violen* OR batter*)) OR	Help seeking OR
	College	interpersonal AND ((abuse OR violen* OR	Protective
		batter*))OR	Behaviour\$
	School-based	dating AND ((abuse OR violen* OR batter*)) OR	Respectful rels*
	Promotion	date AND ((abuse OR violen* OR batter*)) OR	Healthy rels*
	Harm reduction	relationship ((abuse OR violen* OR batter*)) OR	Resources
	Instruction	marital AND ((abuse OR violen* OR batter*)) OR	
		Married AND ((abuse OR violen* OR batter*))	
		Conjugal AND ((abuse OR violen* OR batter*))	
		Perpat*	
		Victim*	

Database Search:

AMED; ASSIA; BNI; CINAHL; Current Contents Search® - Life Sciences and Clinical Medicine Edition; Current Contents® - Social and Behavioral Sciences; Embase; Education Resources Information Centre (ERIC); Evidence-Based Medicine Reviews (EBMR); Global Health; MEDLINE®; PsycARTICLES®; PsycBOOKS®, PsycINFO®, Social Policy and Practice, Social Work Abstracts, Sociological Abstracts, Studies on Women and Gender Abstracts, Australian Education Index, British Education Index, Women's Studies International; and the Centre for Reviews and Dissemination NHS EED (NHS Economic Evaluation Database). We will search relevant websites such as NICE; SCIE; WHO; National Resource Center on Domestic Violence (US); Domestic Violence Resource Center Victoria, Australia; Centre for Research on Violence against Women and Children (Canada).

Inclusion & Exclusion criteria:

Include	Exclude
1990 – 2012	
All languages – papers will be translated as required	
Peer-reviewed research papers	
Grey literature from UK only including local independent evaluations, national reports, technical reports and theses.	

Meta-analyses, research reviews, controlled In-house evaluations, internal audits studies, before-and-after studies, independent case evaluations and ethnographic studies Children and young people below the age of 18 Studies with minimal or no data relevant to children/young adults below 18 Studies assessing outcomes/experiences of interventions designed to help children/young Studies focused only on prevalence or people in the general population to avoid/deal outcomes of domestic abuse with domestic abuse both in their own and their Studies focused on prevention parents' interpersonal relationships programmes for adults who perpetrate Studies of interventions aiming to prevent children and young people becoming either/both victims or Studies focused only on interventions for perpetrators of domestic abuse children and young people who have Studies of preventive interventions targeting experienced domestic abuse girls/boys/both Studies focused only on child abuse and neglect or on bullying