



Proposal for a new Campbell-Cochrane Review within the Co-registered Developmental, Psychosocial and Learning Problems Group

Authors completing this form are also advised to note that whilst preparing their review they are required to read and follow:
'The Cochrane Handbook for Systematic Reviews of Interventions'
<http://www.cochrane.org/resources/handbook/index.htm>

Proposed Title (Using Standard Format)

Advocacy interventions to reduce or eliminate violence and promote the physical and psychosocial well-being of women who experience intimate partner abuse.

Contact Author Name: Jean Ramsay

Motivation for review

The World Health Organisation reports that 10% to 50% of women worldwide report having been assaulted physically or sexually by an intimate partner at some time in their lives, and when threats, financial and emotional abuse are included the prevalence rates are even higher. Abused women can suffer injury and long-lasting physical and emotional health problems. One form of intervention to assist these women is advocacy. Advocacy interventions aim to help abused women directly by providing them with information and support to facilitate access to community resources. However, before recommending them to health policy makers we need to know whether they improve the health and well-being of abused women. In other words, are advocacy interventions effective?

Has the review already been carried out or published? No.

If yes, where has it been published?

Description of proposal

For all points at which you are advised to see a section of the Cochrane Handbook for Systematic Reviews of Interventions, please consult:
<http://www.cochrane.org/cochrane/handbook/hbook.htm>

(a) Objectives of review (briefly stated)

To assess the effectiveness of advocacy interventions conducted within or outside of health care settings for

women who are experiencing or have previously experienced intimate partner abuse.

(b) Types of study

Any studies that allocated participants or clusters of participants by a random or a quasi-random method (such as alternate allocation, allocation by birth date, etc) to an advocacy intervention compared with usual care. For this review, we defined "usual care" as that care typically provided at that setting *or* that care with minimal additions in the form of an information card or leaflet listing the addresses and telephone numbers of local support agencies.

(c) Participants

Women aged 15 years and over (with no upper age limit) identified as having experienced intimate partner abuse.

(d) Interventions and specific comparisons to be made

Any advocacy intervention compared to usual care.

(e) Outcomes

Primary outcomes

Incidence of abuse

Forms of abuse may include:

- (i) physical
- (ii) sexual
- (iii) emotional
- (iv) financial

Abuse may be assessed using self-report measures (scales such as Index of Spouse Abuse, Women's Experience of Battering, Conflict Tactics Scale, or a single question about continuing abuse) or from the recording of abuse in medical or police records.

Psychosocial health

- (i) quality of life (measures such as SF-36)
- (ii) depression (measures such as Center for Epidemiologic Studies Depression Scale)
- (iii) anxiety (measures such as Spielberger's State-Trait Anxiety Inventory)

Secondary outcomes

Physical health

- (i) deaths, all-cause and partner abuse-related (documented in medical/police records/regional and national databases)
- (ii) physical injuries, such as fractures and bruises (self-reported or documented in medical and dental records)
- (iii) any chronic health disorders, such as gynaecological problems, chronic pain and gastrointestinal

- disorders (self-reported or documented in medical and dental records)
- (iv) any general measures of physical health (measures such as Daily Symptoms Questionnaire)
- (v) pre-term birth (self-reported or documented in medical records)

Psychosocial health

- (i) post-traumatic stress (measures such as Impact of Events scale)
- (ii) self efficacy (measures such as Generalized Perceived Self-Efficacy Scale)
- (iii) self-esteem (measures such as Rosenberg Self Esteem Scale)
- (iv) perceived social support (measures such as Sarason's Social Support Questionnaire)
- (v) alcohol or drug abuse (measures such as Addiction Severity Index, Alcohol and other Drug Abuse Scale)
- (vi) attempted suicide (self-reported or documented in medical records)
- (vii) self-harm (self-reported or documented in medical records)
- (viii) impact on relationships (self-reported)

Socio-economic outcome measures

- (i) income
- (ii) housing
- (iii) participation in education
- (iv) participation in work

'Proxy' or intermediate outcome measures (including take-up of referrals to other agencies)

- (i) the use of safety behaviours (e.g. use of coded telephone messages to a friend, keeping clothes at a friend's house, hiding emergency money)
- (ii) the use of refuges/shelters
- (iii) the use of counselling
- (iv) calls to police
- (v) police reports filed
- (vi) protection orders sought
- (vii) maintenance of family ties (i.e. children staying with mother)

We recognise that post-intervention changes in some of these proxy measures may be associated with both 'positive' and 'negative' health outcomes for abused women and require careful interpretation. For instance, increased refuge/shelter usage may reflect proactive behaviour on the behalf of abused women but it may also reflect an escalation of violence that has led to the women needing to seek safety. Where authors report any adverse outcomes from interventions, such events will be recorded and are discussed in a narrative summary.

(e) What subgroup analyses do you intend to undertake?

We plan to perform subgroup analyses for the following: single component interventions versus multi-component interventions, and interventions set in health service settings versus non-health service settings.

(f) Other information relevant to this proposal

Review author team and area of expertise

	Name	Area of expertise <i>(please indicate the background and skills of each review author and the expertise they bring to the review team e.g. content, methodology; statistics)</i>

Contact author:	Jean Ramsay	Content specialist, review methodology
Co-author(s) :	Yvonne Carter	Content specialist, review methodology
	Sandra Eldridge	Statistical expertise, review methodology
	Leslie Davidson	Content specialist, review methodology
	Gene Feder	Content specialist, review methodology
	Kelsey Hegarty	Content specialist, review methodology
	Carol Rivas	Content specialist, review methodology
	Angela Taft	Content specialist, review methodology
	Alison Warburton	Content specialist
	Danielle Dunne	Content specialist, review methodology

Do you or your co-authors have any interests in this topic that could be perceived as conflicts of interest?

Campbell-Cochrane Reviews should be free of any real or perceived bias introduced by the receipt of any benefit in cash or kind, any hospitality, or any subsidy derived from any source that may have or be perceived to have an interest in the outcome of the review. It is a matter of Cochrane Collaboration policy that direct funding from a single source with a vested interest in the results of the review is not acceptable. See

<http://www.cochrane.org/docs/commercialsponsorship.htm>

No

If 'yes', what are they?

Is this review the subject of specific funding and/or does it need to be finished within a specific timeframe? If yes, please give details.

Roles and responsibilities

TASK	WHO HAS AGREED TO UNDERTAKE THE TASK?
Draft the protocol and edit	Jean Ramsay , Gene Feder , Yvonne Carter, Leslie Davidson, Kelsey Hegarty, Angela Taft & Alison Warburton
Edit protocol	Jean Ramsay & Gene Feder.
Develop a search strategy and search data bases	Jean Ramsay, Carol Rivas & Danielle Dunne
Select which trials to include (2 people + 1 arbiter in the event of dispute)	Jean Ramsay, Carol Rivas, Danielle Dunne & Gene Feder
Extract data from trials (2 people)	Jean Ramsay, Carol Rivas & Danielle Dunne
Enter data into RevMan (Cochrane software)	Jean Ramsay
Carry out the analysis	Jean Ramsay
Interpret the analysis	Jean Ramsay & Gene Feder
Draft the final review	Jean Ramsay
Edit review	Jean Ramsay, Sandra Eldridge, Gene Feder, Yvonne Carter, Leslie

	Davidson, Kelsey Hegarty Angela Taft & Alison Warburton
Statistical guidance	Sandra Eldridge

Other information

- Have you or a co-author written a systematic review before?..... Yes
- If yes, was it a Campbell and/or Cochrane Review?..... Yes
- Have you attended a Campbell or a Cochrane Review training workshop?..... Yes
- If yes, which one?...Developing a protocol for a review, and Introduction to analysis.....
- If no, do you require assistance in planning to? No
- What type of computer do you use?..... PC
- Do you have a copy of the Cochrane Handbook for Systematic Reviews of Interventions (<http://www.cochrane.org/resources/handbook/index.htm>) Yes
- Do you have a copy of RevMan 5, the latest version Cochrane Review Manager software? Yes
- If yes, do you already have a Reviewer ID from another Group and if so, what is it? Yes JR01
- Do you have access to a statistician (**strongly recommended**)? Yes
- Do you predominantly speak / write in a language other than English? No
- Do you have access to electronic databases relevant to your review topic (eg MEDLINE, PubMed, *The Cochrane Library*, *PsycINFO*)? Yes
- Do you have access to a medical / University library: Yes
- If yes, can you order journal articles not held in the Library? Yes
- Have you experience of searching databases yourself? Yes
- Do you have access to reference management software (eg Procite, EndNote, Reference Manager): If yes, which software, and what version? Reference Manager version 11..... Yes

Provisional dates for submission of drafts to editorial base

(A) Draft REVIEWEnd December 2008

Agreement to Editorial Review and Publication in The Cochrane Library

By completing this title registration form, you agree to submit a draft protocol within 6 months. If there is no correspondence from you during this period, or no draft protocol has been received, the Review Group reserves the right to de-register the title or transfer the title to a new author.

By completing and returning this form, you are accepting responsibility for maintaining and updating the review in accordance with Cochrane Collaboration policy, i.e. you will be responsible for ensuring the review is updated at least every two years. If you are unable to update this review the Review Group reserves the right to transfer the review to a new author.

The support of the editorial team in producing your review is conditional upon your agreement to publish the protocol and finished review, together with subsequent updates, in The Cochrane Library and the Campbell C2-RIPE. By completing and signing this form you undertake to publish firstly in The Cochrane Library (concurrent publication in other journals may be allowed in certain circumstances with prior permission of the editorial team.).

I understand the long-term commitment necessary when undertaking this review.

Form completed by: Date:

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	Hide email address	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Hide mobile ph.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Bulk mailings accepted:	None <input type="checkbox"/> From primary entity (the CDPLPG) only <input type="checkbox"/> From affiliated entities in the Cochrane Collaboration only <input type="checkbox"/> All <input checked="" type="checkbox"/>		