



Progress Update

November 2012

This document updates the [2011 Progress Update](#), and forms the basis of PreVAiL's Mid-Term report to CIHR's Institute for Gender and Health. It is structured according to PreVAiL's achievements in developing research capacity, advancing knowledge and knowledge translation and exchange (KTE).

Capacity development

PreVAiL's 20+ trainees and emerging investigators have been productive and successful. Some have completed their degree programs or fellowships and moved into junior faculty positions, or other related employment. Highlights include:

- Dr. **Camille Burnett** successfully defended her doctoral dissertation at Western University under the supervision of Dr. **Marilyn Ford-Gilboe** and is now Assistant Professor and Roberts Scholar in the Department of Family, Community and Mental Health Systems at the University of Virginia's School of Nursing.
- Dr. **Nicole Pitre** earned her PhD and is now an Assistant Professor in the Faculty of Nursing at the University of Alberta. Nicole is planning another research project with Dr. **Tracie Afifi** and a group of researchers, where she will be the Principal Investigator (PI). She has also been working with Dr. **Kathy Hegadoren** as a co-investigator on research focusing on the relationship between trust and oxytocin levels.
- **Sara Crann** has been working on one of the PreVAiL qualitative resilience studies with her advisor Dr. **Paula Barata** and has submitted her manuscript, *Pathways to Resilience in Survivors of Intimate Partner Violence*. This was part of a group of studies that was looking at the meanings, perceptions, and experience of resilience in different populations.
- Dr. **Danielle Davidov**, working with Dr. **Jeff Coben** at the West Virginia University (WVU) Injury Control Research Center (ICRC), received funding from the National Institute on Minority Health and Health Disparities for her project *Exploration of the Relationship between Intimate Partner Violence and Health Disparities among Underserved Women in Rural Appalachia*.
- **Natalia Diaz-Granados** has been a consultant for the Pan-American Health Organization (PAHO) where she co-facilitated the PAHO-Open Society Foundation Project Workshop. She has also published a paper titled *What is resilience?* in the *Canadian Journal of Psychiatry* and submitted or presented several others.
- Dr. **Abby Goldstein**, an Assistant Professor at the University of Toronto, reports that the May 2011 PreVAiL Trainee Workshop was a wonderful opportunity to connect with others and led to a collaboration on a secondary analysis paper with 4 other PreVAiL trainees. The paper examines childhood maltreatment, alcohol use disorders, and treatment utilization in a national sample of emerging adults and is under revision for the *Journal of Studies on Alcohol and Drugs*.

- Dr. **Andrea Gonzalez** published several papers during 2012 including one titled *Neuropsychology and physiology as intervening variables between early life adversity and current maternal functioning*. Dr. Gonzalez, along with others also received a grant of nearly \$70,000 for her work on the maternal history of child maltreatment. She has just been offered a position at McMaster University in the Department of Psychiatry and Behavioural Neurosciences as an Assistant Professor to begin January 1, 2013.
- **Melissa Kimber** received a Doctoral Fellowship Award and recently had a manuscript, co-authored with her PreVAiL workshop group, accepted to the *Journal of Studies on Alcohol and Drugs*. She has also submitted an independent study on intimate partner violence risk among immigrant and non-immigrant men and women in Canada to the *Journal of Global Public Health*. It is currently under review.
- **Kat Kolar** has been working in collaboration with the SHOUT homeless youth clinic in Toronto on a project for street youth resilience. The study was presented in newsletter form to street youth and also at a meeting with SHOUT staff. She has also submitted a report titled *Resilience, Mental Health and Youth in Conflict with the Law: A Literature Review* to the Department of Justice, Canada, and has a paper published in the *Journal of Youth Studies*.
- Dr. **Jen MacGregor** won the 2012-13 Ontario Women's Health Scholar Post-Doctoral Fellowship Award to complete a project entitled "*The Gendered Imperative of Personal Health Management*". Dr. MacGregor continues to work with Drs. Nadine Wathen and Anita Kothari at Western University on KTE projects.
- **Anita Morris** is now in the final stages of completing her PhD with Dr. **Kelsey Hegarty**. Her thesis is titled *Safety and resilience at home: voices of children from a primary care population; a qualitative study of a primary care population of children and their mothers who have experienced family violence*. She has also been appointed as Co-chair, Post-graduates in Primary Care Research, University of Melbourne, 2011/2012.
- Dr. **Diane Neal** is a team member of the Mental Health Engagement Network (MHEN) project, a partnership between Lawson, TELUS Health and Canada Health Infoway. She gave a talk with her colleague Dr. Lynne Williams (University of New Mexico – Los Alamos and Kaplan University) on health information and privacy at the Lawson Mental Health Group Retreat Day. She is also working on a project funded by the Ontario Trillium Foundation titled *Plain language visual thesaurus*.
- **Leslie Roos** is currently working on a Latent Analysis Project with mentors Drs. **Afifi** and **Jitender Sareen** looking at how a wide range of childhood adversities (poverty, caretaker incarceration, caregiver mental illness, abuse, neglect, IPV etc.) may cluster to form latent classes predictive of adult incarceration using the NESARC database.
- **Cody Shepherd** is currently a trainee co-investigator on the British Columbia (BC) Healthy Connections Project, the first Canadian implementation and evaluation of Nurse-Family Partnership (NFP) led by Drs. **Charlotte Waddell**, **Harriet MacMillan**, **Susan Jack** and Debbie Sheehan (previously with Hamilton Public Health Services). Mr. Shepherd plays a key role synthesizing the US NFP research evidence for senior policy-makers across BC and helping to prepare an evaluation proposal to the Ministries of Health and of Children and Family Development.



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- Dr. **Shannon Sibbald** has completed her post-doctoral fellowship with Drs. **Kothari** and **Wathen** in PreVAiL's KTE theme, and is now a research associate working with PreVAiL. She has published several peer-reviewed articles in the past year and is currently working on PreVAiL's partnership report.
- **Rae Spiwak** has been working in collaboration with Drs. **Sareen, Afifi**, Shiva Halli and **Claudia Garcia Moreno** on a paper titled *The relationship between physical intimate partner violence and sexually transmitted infection among women in India and the United States* which is a PreVAiL-funded project.
- Dr. **Masako Tanaka**, a post-doctoral fellow with Dr. **Harriet MacMillan**, has a lead role in PreVAiL's work with the World Health Organization (WHO)-Violence Prevention Alliance's (VPA) Research Agendas Project (RAP) Group, including launching and managing an international research priority setting process for violence prevention in low, middle and high-income countries (see page 8 for a complete description).

Best wishes to "graduated" PreVAiL trainees **Camille Burnett, Orion Garland, Pamela Ponic** and **Shannon Sibbald**, who have completed their studies and moved to new endeavours. Trainee-led publications and presentations are highlighted in Appendix 1. We are especially gratified to see a new collaboration among the emerging investigator group arising from discussions at the May 2011 PreVAiL Trainee Workshop, which has led to a paper currently being revised for publication.

Advancing knowledge

New Funding to PreVAiL Teams and Members (Details in Appendix 1)

Dr. **Ford-Gilboe** leads a team including PreVAiL members Dr. **Colleen Varcoe** (co-PI), Drs. **MacMillan, Neal** and **Wathen** (co-Investigators (co-Is) on a CIHR-funded grant entitled "*Effectiveness of an internet-based decision aid in enhancing safety behaviours, reducing exposure to violence and improving mental health among women experiencing intimate partner violence*" (2012-2017, \$1,250,000). The project presents an opportunity for international comparisons, since the online decision aid, which will be adapted to the Canadian context, was developed and is being tested by Dr. Nancy Glass in the US, as well as in Australia (led by PreVAiL member Dr. **Kelsey Hegarty**) and in New Zealand.

Dr. **Gene Feder** leads a team including Dr. **MacMillan** on a knowledge synthesis project funded by the UK National Institute of Health Research's Public Health Research programme (2013-2014 £191,222), entitled: *An overview of interventions aimed at improving outcomes for children exposed to domestic violence: systematic review, evidence synthesis & research recommendations*.

As described in the next section, a specific research activity undertaken by PreVAiL was to develop and test a new intervention for intimate partner violence (IPV), delivered within the context of home visitation, conducted under the auspices of a US Centers for Disease Control and Prevention (CDC)-funded Injury Control Research Center (ICRC) center grant led by PreVAiL co-PI Jeff Coben at West Virginia University (WVU). In 2012, WVU submitted a competitive renewal application to the CDC for an additional five years of funding as an ICRC. This application described and highlighted the collaborative development of PreVAiL and the subsequent implementation of PreVAiL activities. The application was successful, resulting in an additional \$4.1 million in funding being



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directed to the injury prevention and control activities organized within the WVU program (for additional details, click [here](#)). Further, as a direct result of PreVAiL, the WVU ICRC recognized the need to enhance their community engagement, knowledge translation, and partnership development initiatives. Special emphasis was placed on these activities within the “Outreach Core” of the ICRC, and PreVAiL theme 3 researcher Dr. **Kothari** was engaged in this process as a collaborating Co-Investigator (co-I), working with the WVU team over the next five years to help evaluate and strengthen the planned partnership/knowledge translation activities.

PreVAiL Projects – completed and in progress

Research Priority-Setting Process

We used a modified Delphi consensus development process to determine PreVAiL’s research priorities in the areas of CM, IPV and resilience. Two online survey rounds were conducted in late 2010, followed by a Discussion round, including finalization at the May 2011 team Meeting. A manuscript with more broadly applicable priorities was published in [BMC Public Health](#) (see Appendix 1: List of Publications). Specific PreVAiL priorities in each theme area, and for cross-cutting themes, are found in Appendix 2. Research sub-teams are forming to address these priorities.

Nurse-Family Partnership (NFP)-IPV Intervention Projects

The randomized controlled trial (RCT) testing the NFP-Intimate Partner Violence Intervention (NFP-IPVI – see [BMC-Health Services Research](#)) developed by the CDC- WVU ICRC funded team led by Drs. **MacMillan, Coben, David Olds** and **Susan Jack** has completed recruitment at 15 US NFP sites. Follow-up with participants will continue to the one-year point, and hopefully beyond, pending new funding. Concurrently, a seed-funded evaluation of the integrated KTE approach is being conducted. Dr. Jack reports that in-depth qualitative interviews have been conducted with 25 key NFP stakeholders who were actively engaged in planning and implementing the NFP-IPVI trial. Data are currently being analyzed to understand the processes involved in evaluating novel interventions within the context of an evidence-based home visitation program, factors that influence health service delivery agencies’ decisions to participate in research, and how agencies respond to the challenges of implementing a new intervention within existing clinical services.

In a related activity, in 2011, following several years of development work, we launched the BC Healthy Connections Project — the first Canadian implementation and evaluation of the NFP. This 5-million-dollar five-year project is funded by the BC Ministries of Health and Children and Family Development and is being conducted in close collaboration these Ministries and with five participating Health Authorities across the province. We will evaluate NFP’s impact and outcomes using rigorous randomized-controlled trial and qualitative interview methods. The primary outcome indicator by which we will judge NFP’s success in BC will be the prevention of childhood injuries. The BC Healthy Connections Project involves nine PreVAiL members: Drs. **Charlotte Waddell** and **MacMillan** are the Nominated Principal Investigators; Dr. **Jack** is a Co-Principal Investigator; Drs. **Michael Boyle, Lil Tonmyr** and **Colleen Varcoe** are Co-Investigators; Dr. **Andrea Gonzalez** and **Shepherd** are trainee Co-Investigators; Dr. **Olds** is a Consultant. This project will also allow us to provide unique training opportunities for graduate students and emerging



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investigators in child health, violence prevention, public policy and population health. The trial, including the newly-developed and tested IPV component, is scheduled to begin in early 2013.

Secondary Data Analysis Projects

These five peer-reviewed, seed-funded projects have been completed, and stand as follows:

Project title	PreVAiL members	Status (Fall 2012)
<i>Understanding child maltreatment, intimate partner violence, and substance use disorders in a nationally representative adult sample</i>	T Afifi, J Sareen (with G Asmundson and J Henriksen)	Completed – 2 journal articles; 1 presentation (Appendix 1)
<i>A longitudinal study of children exposed to both child maltreatment and intimate partner violence.</i>	JL Edleson (with L Kiesel)	Completed – 1 journal article; 2 presentations (Appendix 1)
<i>The relationship between childhood sexual abuse and HIV infection among women in India.</i>	Spiwak, R Afifi T, Garcia-Moreno C, Sareen J (with S Halli)	Completed – 1 journal article (Appendix 1)
<i>Abuse during pregnancy and pregnancy as a result of forced sex in migrant women</i>	A Gagnon	Completed – manuscript in progress
<i>Neighborhood- and individual-level alcohol consumption and risk of intimate partner violence in low and middle-income countries [note: change in focus from original proposal]</i>	M Boyle, N Diaz-Granados	Completed – submitted to peer-reviewed journal (Nov 2012)

Second round of seed funding

Focusing on the identified PreVAiL Research Priorities (Appendix 2), a second round of seed funding will be launched in late 2013.

Resilience theme research projects

The nine qualitative studies (listed below) on resilience in vulnerable groups are nearing completion. Two studies focusing on resilience of homeless youth and the elderly are now published. Three studies on understanding factors associated with resilience among gay men, South Asian women and women in subsidized housing are submitted for publication (Appendix 1). Primary care youth and migrant new mother interviews are completed and manuscripts are being prepared for submission. Two studies on mothers with HIV in India and First Nations are in progress. Several of these studies (homeless youth, elderly, gay men, South Asian women and migrant new mothers) have been presented at scientific meetings.

Study 1: South Asian immigrant women (Dr. Farah Ahmad)

Study 2: Homeless youth (Dr. Patricia Erickson)

Study 3: Gay men (Dr. John Oliffe)

Study 4: Mothers exposed to IPV in India (Dr. Prabha Chandra)

Study 5: A First Nations community (Dr. Sareen)

Study 6: Elderly w/ CM experience (Dr. Donna Stewart)

Study 7: Australian youth in a primary care population (Dr. Hegarty)

Study 8: Abused women applying for subsidized housing (Dr. Barata)

Study 9: IPV-exposed migrant women post-birth (Dr. Gagnon)



New resilience theme links and projects include:

- Dr. **Pat Erickson** and PreVAiL trainee **K. Kolar** are involved in a project for street youth resilience with the SHOUT homeless youth clinic in Toronto. A newsletter was prepared to share the study results with street youth. Also, a meeting was held with SHOUT staff to share results. 2010-2011.
- Dr. **Christine Wekerle** is working with Dr. Masood Zangeneh, Editor-in-Chief, International Journal of Mental Health and Addiction to develop the International Society of Child and Adolescent Resilience - a multi-disciplinary and multi-sector platform for scholarly interchange on the topic of resilience. The Society supports a knowledge dissemination website (www.is-car.ca) and various knowledge products, including a journal (International Journal of Child and Adolescent Resilience) that is accepting on-line submissions for its quarterly 2012-2013 publishing program. This is the first journal dedicated to the topic of resilience.
- Drs. **Herrman and Stewart** with trainee member **N. Diaz-Granados** and colleagues are completing a systematic review of evidence from observational studies for interventions promoting resilience among adults with a history of child maltreatment or intimate partner violence.

KTE theme research projects

PreVAiL Partnership Evaluation Project

PreVAiL employs an integrated KTE approach to ensure that research priorities and projects reflect existing and emerging needs in practice in policy, and that findings can be shared and discussed among networks of stakeholders through our existing 19 national and supra-national partner organizations, and the expanding networks linked to us by these partners and our researchers. The **Partnership Evaluation Project**, led by Drs. **Kothari, Sibbald** and **Wathen** aims to identify the quality of partnerships within the PreVAiL network, and their evolution over time, as well as the capacity of partner organizations to utilize research. To address the first objective, the Partnership Indicators Questionnaire (PIQ) which assesses key partnership indicators, coupled with semi-structured interviews, are being deployed twice over a 5-year period. To determine partners' capacity for research utilization, a worksheet has been provided that serves as a self-assessment of organizations' capacity to acquire, assess, adapt and apply research (the *Is Research Working for You?* tool), and members of the KTE Theme group have offered to work with individual partner organizations to enhance this capacity.

Phase 1 of the project is now complete, and we are grateful to the 36 PreVAiL members who completed the PIQ at the May 2011 meeting, and the 19 PreVAiL partners (representing 18 of the 19 partner organizations) who consented to a follow-up interview. Highlights of Phase 1 include:

- 74% of partners interviewed report high (21% participated in >6 of 8 formal activities) or moderate (53%; 3-6 activities) involvement in PreVAiL's formal activities, which included team meetings, teleconferences and the Delphi research priority-setting process; five (n=25%) report a low involvement (< 3 events). Only one partner did not participate in any PreVAiL activities and one partner participated in all eight. This does not include informal, individual-level interactions.



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- PreVAiL is perceived as a community, and our members, and their commitment to violence prevention, are essential to its success. Partners spoke highly of the benefits of PreVAiL meetings for networking, linkages and meeting international researchers. Partners often turned to PreVAiL when they needed information; they valued the ability to ‘call on’ PreVAiL researchers for information, and “felt liberated to ask for advice”.
- Nearly all see PreVAiL as a network that shares knowledge and most viewed face-to-face meeting as the most effective and appreciated method of sharing information, but noted the utility of the Team Newsletters, topic-specific teleconferences, and one-off conversations with researchers. PreVAiL is seen to have “opened lines of communication” and provided connections with researchers.
- However, we may also be missing out on some potential benefits to partner organizations, especially in terms of developing more practical outcomes, recommendations and resources, and focusing our communication efforts in more targeted ways. Several of our partners felt that since PreVAiL’s work is research-focused, it can be difficult to translate and apply for organizations.

KTE Knowledge Synthesis Projects

In early 2012, PreVAiL trainee Dr. **MacGregor**, with PreVAiL researchers Drs. **Kothari** and **Wathen**, began two knowledge synthesis projects funded by a PreVAiL KTE Seed Grant.

KTE Review 1: Knowledge Translation in the Area of Intimate Partner Violence and Child Maltreatment: An Integrative Review

This review is a response to the paucity of work focused on translating IPV and CM evidence into policy and practice. Its purpose is to obtain a concrete picture of the state of IPV- and CM-specific KT research, and to highlight ways in which this literature can inform the design of future IPV and CM KT initiatives. The search phase of the project is complete; next steps include applying inclusion criteria to determine the set of articles to be included in the analysis and synthesis phase. A manuscript will be submitted to the *Journal of Interpersonal Violence* by January, 2013.

KTE Review 2: Knowledge Translation in Community-Based Settings

Because little IPV- and CM-specific KT has been conducted, and community-based organizations play an important role in the health system with respect to IPV/CM prevention and intervention, this review will be useful in guiding the development of IPV/CM interventions that are appropriate for the unique community-based context. The researchers are currently building and refining the search strategy, with subsequent integrative review steps to follow.

Networking and Knowledge-Sharing

PreVAiL has published 29 peer-reviewed papers, with an additional nine submitted manuscripts; 11 of these 38 papers were led by PreVAiL Trainees. In addition, our members have given 26 peer-reviewed conference presentations, and 36 invited/keynote presentations (see Appendix 1).



Networking – Leveraging Partnerships for New Collaborations

WHO-VPA Research Priority Setting Project

PreVAiL, as a member of the [WHO VPA](#), has taken a lead role in the new RAP Group including launching and managing an international research priority setting process for violence prevention in low, middle and high-income countries. PreVAiL members involved include Drs. **Kathy Hegadoren**, **Chris Mikton**, and **Lil Tonmyr**, as well as Dr. **MacMillan**. As well, PreVAiL Post-Doctoral Fellow Dr. **Tanaka** has led the implementation of the data collection process, and reports that 280 participants from countries in all economic levels completed the first part of the VPA Survey in November 2011. Preliminary results were presented at the VPA Munich Meeting in April 2012, and draft reports were submitted to the Public Health Agency of Canada. The RAP Group is developing the second part of the Survey for completion by the same 280 participants in early 2013.

Improving Surveillance

One of the identified priority areas for PreVAiL is to “integrate violence questions in national and international surveys, and administrative data” (Appendix 2) so as to enhance epidemiological data. One early success in this area is reported by PreVAiL partner Dr. **Tonmyr** from the Public Health Agency of Canada, who indicates that PreVAiL was instrumental in ensuring the inclusion of question on child maltreatment in forthcoming cycles of the Canadian Community Health Survey. Dr. Wendy E. Hovdestad, from the Public Health Agency of Canada’s Health Surveillance and Epidemiology Division reports that “the benefit [of PreVAiL involvement] was at the early stage, pulling together research for building the argument for why childhood maltreatment questions should be asked, and at the later stage of exactly what questions should be asked.”

New Linkages

New links forged through PreVAiL have directly led to collaborations between researchers and partners, and between agencies. For example:

- Dr. **Tonmyr** of the Public Health Agency of Canada reports that a commentary titled “*Exploring the complex links between violence, mental health, and substance abuse – from correlates, through risk factors, towards causal pathways*” co-authored by another PreVAiL partner, Dr. **Mikton** from WHO, and published in the online journal *Advances in Mental Health* (2012), would not have been written without the PreVAiL link.
- Through the link with PreVAiL partner **Sandra Wright**, Dr. **Sareen** was invited to participate in a conference co-sponsored by the Coalition on Community Safety, Health and Well-being on “Strengthening Resiliency in Aboriginal Youth”. Corinne Isaak, from the Cree Nations Tribal Health Centre, is conducting interviews for the PreVAiL resilience theme among the Swampy Cree First Nation, and will also participate in the conference (link to conference information on the PreVAiL website, [here](#)).
- PreVAiL members Drs. **Jane Barlow**, **Feder**, **MacMillan** and **Wathen** forged new international research collaborations and applied for three knowledge synthesis grants from two UK health research funding agencies. These proposals brought Canadian members together with new British and Australian collaborators. One grant was successful, one was not, and a third is awaiting decision (see Appendix 1).



New and Noteworthy

The new WHO Guidelines for the Health Sector Response to Intimate Partner and Sexual Violence Against Women will be available in early 2013. The expert review panel was chaired by PreVAiL member Dr. **Feder** under the leadership of PreVAiL partner Dr. **Garcia-Moreno** of the WHO's Gender, Violence and HIV/AIDS Division. **Ms. Alessandra Guedes**, Regional Advisor, Intra-Family Violence, PAHO and PreVAiL partner also participated in the review. Drs. **Hegarty and MacMillan** served on the expert panel, and Dr. **Wathen** was an external reviewer.

In a related item, Drs. **Wathen** and **MacMillan** were invited to write an editorial in the Journal of the American Medical Association, commenting on a newly published RCT of screening for IPV in health settings that replicated their previous findings of no benefit of screening. The editorial, titled "*Health care's response to women exposed to partner violence Moving beyond universal screening*" was published in the [August 15, 2012 issue of JAMA](#) and states: "*In summary, there are now 2 large-scale trials specifically evaluating partner violence screening that have remarkably consistent results: universal screening does not improve women's health or life quality or reduce re-exposure to partner violence. It is time to enact an approach in which individual women are assessed according to their presenting histories, which include symptoms and risks.*"

Drs. **Stewart, MacMillan** and **Wathen** were invited to prepare a position paper on IPV for the Canadian Psychiatric Association. The paper will be published in a forthcoming issue of the *Canadian Journal of Psychiatry*.

PreVAiL co-PI Dr. **Helen Herrman** leads a team of Australian researchers and partners in a new project entitled *Improving mental health for young people living in out of home care* recently funded by the Australian National Health and Medical Research Council (NHMRC). We are exploring links between this project and Canadian Resilience Theme activities.

PreVAiL researcher Dr. **Sherry McKee** is PI of the newly announced Yale-Specialized Center of Research on Women's Health. The Center is funded by a \$6 million, five-year grant from the National Institutes of Health Office of Research on Women's Health, and the National Institute on Drug Abuse (NIDA) and will develop gender-sensitive treatments to aid women in quitting smoking. For more information, see the story by Yale University news [here](#).

On March 22, 2012, Dr. **MacMillan** was awarded the prestigious Research and Program Excellence Award from the Child Welfare League of Canada. Click [here](#) for the full [Press Release](#).

Dr. **Charlotte Waddell** has completed a recent policy-relevant research project at the request of the British Columbia Ministry of Children and Family Development. The project involved an assessment of potential indicators of children's social and emotional wellbeing that could be used in public health monitoring. Indicators of exposure to child maltreatment were featured in the report, led by Dr. Waddell and co-authored by PreVAiL members Mr. **Shepherd** and Dr. **Boyle** (with A. Chen) entitled: "Creating comprehensive children's mental health indicators: Canadian prospects" which is forthcoming in the *Canadian Journal of Community Mental Health*.

Dr. **Afifi** with Drs. **Sareen** and **MacMillan** published (July 2, 2012) a study in the journal Pediatrics, which found that "[h]arsh physical punishment in the absence of child maltreatment is associated with mood disorders, anxiety disorders, substance abuse/dependence, and personality disorders in a general population sample." The study received significant media coverage, with online stories in



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such major venues as [USA Today](#) and [Time Magazine](#) receiving hundreds of thousands of social media responses on Facebook and Twitter. The original journal article can be accessed [here](#).

PreVAiL researchers Drs. **Barlow** and **MacMillan** were co-authors along with Dr. Robanne Hibbard on the new clinical report for the American Academy of Pediatrics (AAP) Committee on Child Abuse and Neglect (COCAN) on [Psychological Maltreatment](#), released July 30, 2012. The American Academy of Child and Adolescent Psychiatry (AACAP) Child Maltreatment and Violence Committee were also co-authors. One of the AACAP Child Maltreatment and Violence Committee members included Dr. **Michael De Bellis**, a PreVAiL member. Media reports covering this release include [CBC News](#), [CTV News](#), the Canadian Press, [US News & World Report](#), and dozens of others in Canada and internationally. The pdf of the full AAP article can be found [here](#).

PreVAiL Researcher Dr. **Hegadoren**, and trainee Dr. **Nicole Pitre**, are evolving their work on mothering after IPV experiences, including enhancing an existing community-based IPV awareness program to include a component on mothering after leaving an abusive relationship (launch early 2013).

Plans going forward

- Second call for seed-funded projects, targeting PreVAiL priorities (Appendix 2)
- Continue progress on existing and recently funded projects (as above)
- Look for new opportunities to advance PreVAiL Research Priorities (Appendix 2)



Appendix 1: List of Grants, Publications & Presentations

Grant Proposals (PreVAiL members in bold) (7)

Waddell, C., MacMillan, H.L., Jack, S. (co-PIs), Boyle, M., Tonmyr, L., Varcoe C. (co-Is); Gonzalez A., Shepherd, C (trainees) and Olds, D. (consultant). *British Columbia (BC) Healthy Connections Project: Scientific evaluation.* BC Ministry of Health and Children and Family Development. (2011-2016, \$5M).

Coben, J. (PI), Kothari, A. (Co-I) et al. *West Virginia University Injury Control Research Center (renewal).* Centers for Disease Control and Prevention. (2012-2017, USD\$4.1M)

Ford-Gilboe, M. Varcoe, C, Wuest, J., Currie, LM, Glass, NE, Hodgins, MJ, **MacMillan, HL,** Noh, MS, **Neal, DR,** Scott-Storey, K, **Wathen, CN.** Effectiveness of an Internet-Based Decision Aid in enhancing safety behaviors, reducing exposure to violence and improving mental health among women experiencing intimate partner violence. CIHR Operating Grant. 2012-2017. (2012-2017, \$1.25M).

Feder, G., MacMillan, HL et al. An overview of interventions aimed at improving outcomes for children exposed to domestic violence: systematic review, evidence synthesis and research recommendations. UK National Institute of Health Research (NIHR) Public Health Research programme. £191,222 (~CAD\$300,000). 2013-2014 (18 months).

Paul, M, **Barlow, J,** Humphreys, C, MacDonald, G, **Wathen, CN,** McIntosh, E. Scoping review of activities, initiatives and interventions for children and young people, who have experienced domestic abuse, to prevent them becoming victims or perpetrators of relational abuse. Submitted to UK National Institute of Health Research (NIHR) Public Health Research programme (2011/12). [Not funded.]

Barlow, J, Gardner, F, Montgomery, P, Sidebotham, P, Paul, R, **MacMillan, HL,** McIntosh, E, **Wathen, CN.** Systematic Review of the Effectiveness of Psychosocial Interventions for Maltreated Children and Adolescents. Submitted to UK National Institute of Health Research (NIHR) Health Technology Assessment Programme. [Pending decision.]

Morrow, M., **MacMillan, HL,** Anderson, N. et al. Pathways to equity: Exploring resilience in the fields of gender, violence and mental health. Canadian Institutes of Health Research (CIHR) Operating Grant: Programmatic Grants in Health and Health Equity (2010-07-02): Letter of Intent. (\$15,000) [Full proposal not funded]

Publications (29)

MacMillan H, Waddell C. (in press) Home visitation in the prevention of child maltreatment: An evidence-based overview. *World Perspectives, International Society for Prevention of Child Abuse and Neglect.*

MacMillan HL, Wathen CN. Child Sexual Abuse of Girls. (in press). In: **Riecher- Rössler A, García-Moreno C,** editors. *Violence against Women and Mental Health. Key Issues Ment Health.* Vol. 178. Basel, Karger; 2013. p. 1–11.

Waddell C, Chen A, **Shepherd CA, Boyle M.** (in press). Creating comprehensive children's mental health indicators: Canadian prospects. *Can J Commun Ment Health.*

Pitre N, Hegadoren KM, Kushner K. (in press). The search for safety, control and voice for mothers living with the legacy of childhood violence experiences: A critical feminist narrative inquiry. *Advanced Nursing Science.* [Trainee-led]



- Afifi TO**, Henrikse CA, Asmundson GJG, **Sareen J**. Childhood maltreatment and substance use disorders among males and females in a nationally representative sample. *Can J Psychiatry*. 2012; 57(11).
- Afifi TO**, Henriksen CA, Asmundson GJG, **Sareen J**. Victimization and perpetration of intimate partner violence and substance use disorders in a nationally representative sample. *J Nervous Mental Dis*. 2012; 200:684-691.
- Davidov DM**, Frost SS, **Jack SM**, **Coben JH**. Mandatory reporting in the context of home visitation programs: intimate partner violence and children's exposure to intimate partner violence. *Violence Against Women*. 2012;18(5):595-610. **[Trainee-led]**
- Davidov DM**, Nadorff MR, **Jack SM**, **Coben JH**. Nurse home visitors' perceptions of mandatory reporting of intimate partner violence to law enforcement agencies. *J Interpers Violence*. 2012; 12:2484 -2502. **[Trainee-led]**
- Davidov DM**, Nadorff MR, **Jack SM**, **Coben JH**. Nurse home visitors' perspectives of mandatory reporting of children's exposure to intimate partner violence to child protection agencies. *Public Health Nurs*. 2012;29(5):412-423. **[Trainee-led]**
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Technical Reports (4)

- Stewart, DE, MacMillan, HL., Wathen, CN.** (forthcoming). *Intimate partner violence [Position paper]*. Canadian Psychiatric Association. Ottawa, CPA.
- Hamilton H, and **Erickson P.** Prepared with assistance of Kolar, K. *Resilience, Mental Health, and Youth in Conflict with the Law: A Literature Review.* Department of Justice, Canada. 2012.
- Wathen CN.** *Health Impacts of Violent Victimization on Women and their Children: Research Report.* Department of Justice, Canada. 2012.
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Submitted manuscripts (9)

- Ahmad F,** Rai N, Petrovic B, **Erickson P, Stewart DE.** Achieving survivorship after domestic violence: Voices of South Asian immigrant women. *Soc Sci Med.*
- Diaz-Granados N, Herrman H, Stewart DE.** Do clinical interventions for adults exposed to intimate partner violence or child maltreatment enhance resilience? A systematic review. *Psychiatr Serv.* **[Trainee-led]**
- Diaz-Granados N,** Yuen T, **Stewart DE.** Protective factors for intimate partner violence in low and middle income countries : a review. *Violence Against Women.* **[Trainee-led]**
- Diaz-Granados N,** Yuen T, **Mikton C, Garcia-Moreno C, Stewart DE.** Risk factors for intimate partner violence in low and middle income countries: a systematic review. *J Commun Health.* **[Trainee-led]**



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Goldstein AL, Henriksen C, **Kimber M**, **Pitre N**, **Davidov D**, **Afifi T**. Childhood maltreatment, alcohol use disorders, and treatment utilization in a national sample of emerging adults. *J Stud Alcohol Drugs*. [Paper arising from May 2011 PreVAiL Trainee Workshop]

Kiesel LR, **Piescher KN**, **Edleson JL**. The Relationship Between Intimate Partner Violence Exposure, Child Maltreatment, and Academic Performance. *Child Maltreat*.

MacMillan HL, **Tanaka M**, **Vaillancourt T**, **Duku E**, **Boyle MH**. Child physical and sexual abuse in a community sample of young adults: Results from the Ontario Child Health Study. *Child Abuse Negl*.

Oliffe JL, **Han CSE**, **Sta. Maria E**, **Lohan M**, **Howard T**, **Stewart D**, **MacMillan H**. Gay Men and Intimate Partner Violence: A Gender Analysis. *Sociol Health Illness*. 2012 Aug.

Spiwak R, **Afifi T**, **Halli S**, **Garcia-Moreno C**, **Sareen J**. The Relationship Between Physical Intimate Partner Violence and Sexually Transmitted Infection among Women in India and the United States. *J Interpers Violence*. [Trainee-led]

Peer-reviewed presentations (26)

Oliffe JL, **Han CSE**, **Sta. Maria E**, **Howard T**, **Stewart D**, **MacMillan H**. Connecting masculinities and resilience among gay men who experience intimate partner violence. 7th annual International Conference on Sociology. Athens, Greece, 2013 May.

MacMillan HL, **Tanaka M**, **Wathen CN**. An Update on Guidelines to Respond to Intimate Partner Violence and WHO's VPA Research Priorities: What's Known and What's Next? 5th World Congress on Women's Mental Health. Lima, Peru, 2013 Mar.

Stewart DE, **MacMillan HL**, **Herrman H**, **Rondon M**. Moving the Agenda Forward on IPV: Voices From PreVAiL [Symposium]. 5th World Congress on Women's Mental Health. Lima, Peru, 2013 Mar.

Hegadoren KM, **Lasiuk G**, **Norris C**, **Chivers-Wilson K**. The Impact of Intimate Partner Violence on Immigrant Women's Health. *International Council of Women's Health Issues*. Bangkok, Thailand, 2012 Nov.

Hegadoren KM, **Lasiuk G**, **Pitre N**, **Norris C**. Exploring the relationship between oxytocin and trust in women who have experienced interpersonal violence. *Advancing Excellence in Gender, Sex and Health Research Conference*. Montreal, Quebec, 2012 Oct.

Wathen CN, **Sibbald SL**, **Kothari A**, **MacMillan HL**. Evaluating Researcher-Knowledge User Partnerships in an International Research Network on Violence, Gender and Mental Health. *Advancing Excellence in Gender, Sex and Health Research Conference*. Montreal, QC, 2012 Oct.

Jack SM, **Ford-Gilboe M**, **MacMillan H**. Using qualitative research to develop context specific interventions to address family violence. *XIXth ISPCAN International Congress on Child Abuse and Neglect*. Istanbul, Turkey, 2012 Sep.

Hegadoren KM, **Lasiuk G**, **Norris C**. The personal costs of distrust for women who experience interpersonal violence. *XIII Pan American Nursing Research Colloquium*. Miami, USA, 2012 Sep.

Hegarty KL, **Feder GS**, **Taft A**, **MacMillan HL**, **Wathen CN**. Methodological and ethical issues in randomised controlled trials of health care interventions for women survivors of IPV (workshop). *The 6th Biennial National Conference on Health and Domestic Violence*. San Francisco, CA, 2012 Mar.

Afifi TO, **Henriksen C**, **Asmundson GJG**, **Sareen J**. Victimization and perpetration of intimate partner violence and substance use disorders in a nationally representative sample. *Poster*



- presented at the 2011 Canadian Psychiatric Association Conference (CPA). Vancouver, BC, 2011 Oct.
- Kolar K.** Contexts of Resilience Among Toronto Street-Involved Youth: An Exploration of Experiences of Suicidality and Self-Harm. *Canadian Association for Suicide Prevention 2011 National Conference*. Vancouver, BC, 2011 Oct. **[Trainee-led]**
- Mehta P, **Stewart D, Gagnon AJ.** Resilience to violence in migrant women post-birth. *Canadian Public Health Agency Conference*. 2011 Jun.
- Mehta P, **Stewart D, Merry L, Gagnon AJ.** Abuse during pregnancy in international migrant women to Canada. *Canadian Public Health Agency Conference*. 2011 Jun.
- Ahmad F.** Resilience among South Asian immigrant women: A study with survivors of domestic violence. *Webinar by the CIHR STIHR on Social Aetiology of Mental Illness (SAMI)*. 2011 May.
- Mehta P, **Stewart D, Merry L, Gagnon AJ.** Abuse during pregnancy in international migrant women to Canada. *13th Annual Metropolis Conference*. Vancouver, BC, 2011 Apr.
- Williams G, **Tonmyr L, Jack S, Fallon B, MacMillan H.** Determinants of out-of-home placement in a sample of infants investigated by Child Welfare. *Poster session presented at the 5th Annual PHAC Science & Research Forum*. Gatineau, QC, 2011 Mar.
- Ahmad F, Rai N, Erickson P, Stewart DE.** Resilience among South Asian immigrant women: A study with survivors of domestic violence. *Conference Promoting Health Equity: Action on the Social Determinants of Health*. Ryerson University, Toronto, 2011 Feb.
- Coben J, Herrman H, MacMillan HL, Stewart D, Wathen N.** The PreVAiL Research Network. *CIHR Institute for Gender & Health Innovations in Gender, Sex & Health Research Conference*. Toronto, ON, 2010 Nov.
- MacMillan HL, Wathen N, Stewart D.** PreVAiL - Child Maltreatment and Intimate Partner Violence (IPV). *CIHR Institute for Gender & Health Innovations in Gender, Sex & Health Research Conference*. Toronto, ON, 2010 Nov.
- Kolar K, Erickson P, Stewart D, Ahmad F.** Intersections of Resilience and Youth Homelessness: “Stronger in which sense? In your ability to defend yourself?”. *Rethinking Homelessness – Theoretical and Methodological Challenges*. Université du Québec à Montréal, Canada, 2010 Oct. **[Trainee-led]**
- Williams G, **Tonmyr L, Jack S, Fallon B, MacMillan HL.** Determinants of out-of-home placement in a sample of infants investigated by child welfare. *Congrès Association des centres jeunesse*. Quebec, Montreal, 2010 Oct.
- Stewart, D.** Resilience in the Elderly. *2nd Annual Resilience Conference*. Halifax NS, 2010 Jun.
- Stewart, D.** National Psychiatric Association Policies on the Reporting of Child Sexual Abuse. *American Psychiatric Association Annual Meeting*. San Francisco, 2009 May.
- MacMillan HL,** Discussant. In Symposium: Rhodes AE, Wekerle C, Katz LY, Gonzalez A, MacMillan HL. Maltreated Children and their Outcomes: Longitudinal Research in Canada. *Joint Annual Meeting of the American Academy of Child and Adolescent Psychiatry and the Canadian Academy of Child and Adolescent Psychiatry*. Toronto, Ontario, 2011 Oct.
- Jack SM, Ford-Gilboe M, Davidov D, McNaughton D, MacMillan HL** for the NFP IPV Research Team. Identifying and Responding to Intimate Partner Violence: Developing a Training Curriculum for Nurse Home Visitors. *18th Conference of the Nursing Network on Violence Against Women*. Charlottesville, Virginia, 2012 Mar.



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Jack SM, Ford-Gilboe M, MacMillan HL for the NFP IPV Research Team. Clinical Supervision of Nurses Working with Women Exposed to Intimate Partner Violence. *18th Conference of the Nursing Network on Violence Against Women*. Charlottesville, Virginia, 2012 Mar.

MacMillan HL, Wathen CN and the McMaster Violence against Women Research Program. Ethical issues in conducting randomized controlled trials in intimate partner violence prevention. In: Hegarty KL, Feder GS, Taft A, MacMillan HL, Symposium entitled Methodological and ethical issues in randomized controlled trials of health care interventions for women survivors of IPV. *National Conference on Health and Domestic Violence*. San Francisco, California, 2012 Mar.

Invited presentations (36)

Kothari A. Nurturing Knowledge Translation in an International Network: It Ain't Easy! University of Melbourne, General Practice and Primary Health Care Academic Centre. 2012 Sep.

MacMillan HL. Discussant for Presentation, Parent Mediated Child Abuse Prevention by Richard Barth, PhD. *Kempe 40th Anniversary Scientific Symposium, The Kempe Center for the Prevention and Treatment of Child Abuse and Neglect*. Denver, Colorado. 2012 May.

Edleson, JL. The Relationship Between Intimate Partner Violence Exposure, Child Maltreatment, and Academic Performance. *Invited Presentations to Ohio Supreme Court Training Program*. Columbus, Ohio, 2012 Sep. Akron, OH, 2012 Apr.

Tanaka M, MacMillan HL on behalf of the WHO Violence Prevention Alliance (VPA) Research Agenda Project Group. Setting a Global Violence Prevention Research Agenda on behalf of the VPA. *WHO VPA Annual Meeting*. Munich, Germany, 2012 Apr.

MacMillan HL, Mikton C. Prevention of Child Maltreatment and Associated Impairment: An Evidence-based Overview. *World Health Organization Violence and Injury Prevention Webinar*. 2012 Jan.

MacMillan HL. Prevention of Child Abuse and Neglect: An Evidence-based Overview. *Canadian Forces Expert Panel on Family Violence Presentation*. Canadian Forces Base, Esquimalt, British Columbia, 2012 Jan.

Waddell C. Scientific Evaluation of Nurse-Family Partnership in British Columbia. *Presentation, First Ministers' Mental Health Summit*. Winnipeg, MB, 2012.

Waddell C, Geber J. Scientific Evaluation of Nurse-Family Partnership in British Columbia. *Presentation, Cross-Governmental Knowledge Exchange Event, Province of BC*. Vancouver, BC, 2012.

Waddell C. Nurse-Family Partnership in British Columbia: A Case Study in Research-Policy Collaboration. *Presentation, Health Research Day*. Simon Fraser University, Burnaby, BC, 2012.

Waddell C. Children's mental health in Canada: Meeting the needs of the one and the many. *Presentation, Invitational Children's Mental Health Forum, CIHR*. Winnipeg, MB, 2012.

MacMillan HL. Prevention of Child Maltreatment, facilitator at PreventViolence: *Communication and Technology for Violence Prevention: A Workshop, Institute of Medicine*. Washington DC, 2011 Dec.

MacMillan HL. Child Maltreatment: Implications for Mental Health and Approaches to Prevention. *Pediatric Grand Rounds*. Credit Valley Hospital, Mississauga, Ontario, 2011 Oct.

Wathen CN. Plenary Panel: Integrating Gender and Sex in KT Strategies. *CIHR-Institute for Gender and Health Hosted Chairs, Teams and Centres Meeting*. Ottawa, ON, 2011 Oct.



- MacMillan HL.** Nurse Home Visiting to Prevent Intimate Partner Violence and Child Maltreatment: A Randomized Trial. *Presentation at World Health Organization Global Campaign for Violence Prevention.* Cape Town, South Africa, 2011 Sep.
- Gagnon A, Stewart D.** Resilience to Intimate Partner Violence (IPV) in Migrant Women Post-Birth. *Workshop on Age and Generation in Migration Contexts.* Glendon College, York University, 2011 Apr.
- MacMillan HL.** Child Sexual Abuse: Implications for Mental Health and Approaches to Prevention. *4th World Congress on Women's Mental Health.* Madrid, 2011 Mar.
- Stewart D.** Psychological Resilience and Women's Mental Health. *4th World Congress on Women's Mental Health.* Madrid, 2011 Mar.
- Waddell C.** Nurse-Family Partnership: Exploring the options for Canada. *Presentation, Provincial-Territorial Annual Forum, Public Health Agency of Canada.* Ottawa, ON, 2011.
- Waddell C, Shepherd CA.** Scientific Evaluation of Nurse-Family Partnership in British Columbia. *Presentation, Provincial Advisory Committee, BC Healthy Connections Project.* Vancouver, BC, 2011.
- Waddell C.** Scientific Evaluation of Nurse-Family Partnership in British Columbia. *Presentation, BC Ministry of Children and Family Development.* Victoria, BC, 2011.
- MacMillan HL.** Keynote Speaker – Approaches to Child Abuse and Neglect: Current Evidence and Clinical Implications. *Jewish General Hospital Centre for Child Development and Mental Health.* Montreal, Quebec, 2010 Dec.
- Lacroix J** from PHAC-FVPU, G Blackwell from FVI and Justice Canada and **N Wathen.** The work of FVPU and PreVAiL, and our partnership. “*Dejeuner Causerie*” event of the [International Centre for the Prevention of Crime \(ICPC\)](#). Montreal, QC, 2010 Nov.
- MacMillan HL.** An Overview of PreVAiL. *The ISPCAN Working Group on Child Maltreatment Data Meeting at the Annual ISPCAN Meeting.* Oahu, Hawaii, 2010 Sep.
- Wathen CN.** Making research useful: strategies for mobilizing evidence. *Office of Drugs and Alcohol Research and Surveillance Seminar Series.* Health Canada, Ottawa, ON, 2010 Sep.
- MacMillan HL.** An Overview of Child Maltreatment: Implications for Child Development and Approaches to Prevention. *Early Brain and Biological Development: A Science in Society Symposium hosted by the Alberta Family Wellness Initiative.* Banff, Alberta, 2010 Jun.
- Stewart D.** The Social Ecology of Resilience. *The Australian Women's Health Conference.* Tasmania, 2010 Jun.
- MacMillan HL.** Prevention of Family Violence: The Challenges of Linking Policy with Evidence. *Distinguished Lecture Series, Lady Davis Institute for Medical Research, Jewish General Hospital and McGill University.* Montreal, Quebec, 2010 Apr.
- MacMillan HL.** Approaches to Prevention of Intimate Partner Violence: What's the Evidence? *Visiting Professor Grand Rounds.* Department of Psychiatry, University of Manitoba, 2010 Apr.
- MacMillan HL.** Asking about Family Violence in Mental Health Assessments. *Visiting Professor Workshop.* University of Manitoba, 2010 Apr.
- Stewart D.** Pathways to Resilient Outcomes. *The Latin American Congress of Women's Health.* Medellin, Colombia, 2010 Mar.
- MacMillan HL.** Home Visiting and Prevention of Child Maltreatment: What's the Evidence? *McGill Infant Mental Health Day.* Montreal Quebec, 2010 Jan.



MacMillan HL. An Overview of Child Maltreatment: Implications for Child Health and Approaches to Prevention. *Presentation at With the Child in Mind: Brain Development and Best Interests Decisions Community Forum.* Calgary, Alberta, 2009 Nov.

MacMillan HL. Preventing Family Violence and Improving Mental Health: The Challenges of Linking Practice with (Scientific) Evidence. *Presentation at Conference, With the Child in Mind: Brain Development and Best Interests Decisions: A Collaborative Education Project.* Calgary, Alberta, 2009 Nov.

MacMillan HL. Keynote Speaker – Child Maltreatment: Implications for Mental Health and Prevention. *Canadian Academy of Child and Adolescent Psychiatry Annual Conference.* Toronto, Ontario, 2009 Nov.

Stewart D. Fostering Resilient Outcomes in Mental Health. *President's Lecture at Canadian Psychiatric Association Annual Meeting.* Montreal, 2009 Sep.

Stewart D. National Psychiatric Association Policies on the Reporting of Child Sexual Abuse. *Latin American Psychiatric Association Annual Meeting.* Venezuela, 2009 Jun.

MacMillan HL, Tanaka M, Wathen CN. An Update on Guidelines to Respond to Intimate Partner Violence and WHO's VPA Research Priorities: What's Known and What's Next? *5th World Congress on Women's Mental Health.* Lima, Peru, 2013 Mar.

Stewart DE, MacMillan HL, Herrman H, Rondon M. Moving the Agenda Forward on IPV: Voices From PreVAiL [Symposium]. *5th World Congress on Women's Mental Health.* Lima, Peru, 2013 Mar.



Appendix 2: Summary of PreVAiL-Specific Research Priorities (by theme)

Guiding Principles:

- A true lifespan perspective, including assessment of outcomes of earlier exposures at subsequent life stages, inter-generational cycles of violence, etc.
- Attention to ensuring that CM and IPV are not studied in isolation, and a resilience framework is used, including exploration/examination of protective, as well as risk, factors
- Assessment of the applicability of interventions and intervention components across the spectrum of prevention opportunities (primary, secondary, tertiary) and for different places (low, middle and high income countries, resource-poor and –rich settings)
- Multiple and/or mixed methods will likely be appropriate for many of the theme-specific priorities, as will exploration of emerging techniques in such areas as secondary data analysis (quantitative and qualitative) and review/synthesis approaches (see the Projects Documents page in the Member Area of the PreVAiL Website)
- Truly integrated knowledge translation and exchange, especially the input of partners early in project planning, to ensure “real-world” (policy, practice and advocacy) relevance.

Resilience Priorities

1. Identify and examine the elements underpinning promising or successful interventions in resilience to a) discover the similarities, beliefs and values inherent in these interventions, so that they be building blocks for interventions for people who have experienced CM or IPV; b) determine the critical requirements for evidence-informed resilience interventions at individual, family, community and policy levels.
2. Explore the epidemiology of resilience for those exposed to CM and/or IPV.
3. Discuss with partners the development (and evaluation?) of interventions to promote resilience in those exposed to CM and/or IPV.

Child Maltreatment Priorities

1. Examine the elements underpinning promising or effective interventions (including programmatic, structural and policy-based approaches) in CM to identify common elements based on scientific evidence, so that they are building blocks of pilot work for specific interventions.
2. Adapt, Apply, Develop, Evaluate evidence-based CM interventions at occurrence, recurrence, and associated impairment stages. This includes ongoing evaluation to understand which interventions work in which settings/contexts.
3. Address gaps in the literature related to causal risk factors, indicators and protective factors for maltreatment, its recurrence and preventing its associated impairment across the lifespan. One aspect that will be worked on is how to describe “High Risk”.



Intimate Partner Violence Priorities

1. Stage 1: Examine the elements underpinning promising or successful models and/or programs in the health & inter-sectoral areas with a focus on: prevention of recurrence and impairment among those already exposed (secondary and tertiary prevention); evaluate existing services (in health and broader social service sector); elements specific to LMICs and other under-resourced areas and areas of multiple risk.
Stage 2: Develop and evaluate interventions based on these model elements taking a whole-family approach.
2. Examine the elements underpinning promising or successful models and/or programs in the health & inter-sectoral areas with a focus on primary prevention of exposures, including: elements specific to LMICs and other under-resourced areas and areas of multiple risk; multiply-marginalized or disadvantaged groups; social determinants lens, and with a key focus on those at risk to perpetrate.
3. Evaluate (broad) policy or structural interventions that may prevent IPV and/or its consequences, including consideration of: system-level change; interventions targeting individual and non-individual levels; intersectional approaches, and those that can be integrated with 1 and 2, above, or “stand-alone” analyses/evaluations.

Cross-Cutting Priorities

1. Integrate violence questions in national and international surveys, and administrative data.
2. Evaluate inter-relationships between CM, IPV and other forms of violence across the lifespan; consider a lifespan approach to violence exposures.
3. Assessment of factors that impact policy decisions including capacity to implement evidence-based CM and IPV prevention on a scale commensurate with these problems - especially in resource-poor settings - and how to increase this capacity.
4. Examine mechanisms (mediators/moderators) in the relationship between exposure to violence and mental health outcomes (including substance abuse) or the continuity of violence.
5. Develop and test models of coordinated care for victims of violence - across community and health settings and including inter-service and interdisciplinary coordination.

Research Process/Methods Priorities

1. Investigate approaches for developing the infrastructure necessary to conduct child maltreatment research including determining methods for collecting and collating datasets to link data (e.g. child welfare data and mental health data), use of information technology for tracking and integrating services and conducting pooled, meta and sub-group analyses to identify which interventions might be promising for which groups.
2. Determine ways to evaluate studies that do not meet the usual standards of evidence in Evidence-Based Medicine hierarchies (e.g. how to include observational and qualitative studies).

