This previous research suggests that general practice may be an appropriate setting in which to identify potential male victims and perpetrators of DV A. Yet we know little about the nature, impact, or extent of male patients' experiences and perpetration of abuse. The current study aims to improve the response to male patients who have experienced or perpetrated domestic violence and abuse.

**Key Messages: Hermes**

HEalth professionals Responding to MEEn for Safety (HERMES): feasibility of a general practice training intervention to improve the response to male patients who have experienced or perpetrated domestic violence and abuse. Primary Healthcare Research & Development.

From peer reviewed journal article:

**Williamson, E.** Jones, S.K., Ferrari, G., Debbonaire, T., Feder, G., Hester, M (2014)

**Key Findings**

- The HERMES training was well received by clinicians who would like it to be incorporated within the IRIS model.
- Practitioners reported feeling significantly better prepared to address the issue with male patients after the training than before.
- Whilst only 5 male patients contacted a specialist provider following identification there was an increase in the number of male patients identified as a victim and/or perpetrator following the intervention.

**For commissioners/providers of DVA training**

- The needs of male victims, and male perpetrators of DVA should be addressed in wider DVA training within general practice.
- This should include addressing the specific concerns of clinicians relating to men and DVA which have emerged from the wider literature and identified within this research study:
  - feeling adequately prepared to address the issue;
  - feeling more comfortable knowing, they did not have to differentiate between victims and perpetrators;
  - having knowledge about referral agencies;
  - dispelling perceptions related to DVA regarding age and sexual orientation.

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For clinicians

- Men have identified GPs as people they may disclose experiences of DVA to. Tailored training can help GPs to feel more confident in responding in these situations.

- An agreed and consistently applied standard for clinical coding for DVA should be discussed and adopted within the practice.

For DVA researchers

- More research is required to establish how male victims and perpetrators are accessing and using support services following identification and referral.

- The barrier of time constraints within general practice need to be considered in relation to the development of DVA training packages.

Future research by PROVIDE team

Researchers from the PROVIDE team are planning to explore further some areas highlighted for further research within this study, including:

- To test the HERMES intervention as part of an enhanced IRIS intervention.

- To examine in more detail the ways in which DVA is recorded within the medical record.

Outputs

The following resources are outputs to the research and can be accessed from the PROVIDE website:

- HERMES training material
- HERMES flow-chart
- Double sided RESPECT referral card
- Provide Intervention Measure (PIM)