

and demographic and occupational characteristics of health-care providers. The findings have important implications for further training of specific healthcare providers with considerations to their ethnic belongings.

0322 **SCREENING FOR INTIMATE PARTNER VIOLENCE IN HEALTHCARE IN KANO, NIGERIA: EXTENT AND DETERMINANTS**

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**Introduction** The adverse health consequences of domestic violence have led to increased call to involve healthcare providers in the management of partner violence prevention through screening for it within the healthcare.

**Objective** To assess the extent and determinants of screening for Intimate Partner Violence (IPV) at Aminu Kano Teaching Hospital, Kano, Nigeria.

**Method** 274 healthcare providers responded to the domestic violence healthcare provider survey probing the frequency of screening for IPV, staff attitudes towards domestic abuse, perceived self efficacy in screening, availability of support networks and staff/patient safety in regard to IPV inquiry. t-Test and logistic regression were employed to study determinants of screening.

**Results** Majority of participants (74%) had not screened for IPV during the preceding 3 months. Male gender, being elderly and of Yoruba ethnicity increased the likelihood of screening. With increasing perceived efficacy and increasing blame of the victim for abuse, the likelihood of screening for IPV increased.

**Conclusion** Barriers to effective screening of IPV may emanate from the attitudes of healthcare provider towards IPV