

intimate relationships and there is a presence of male victimisation.

986 SEX DIFFERENCES IN INTIMATE PARTNER AGGRESSION IN GHANA

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Background The United Nations identifies male-dominated Africa as one of the worst regions for a woman to live globally, in terms of intimate partner aggression (IPA). There have been efforts the past two decades, to empower women through education and employment. Previous research though has typically focused on males' physical aggression to understand the sex differences in IPA resulting in the lack of understanding of the nature of sex the differences in IPA in male-dominated Africa. This current study explored sex differences in IPA in forms of aggression typically used in intimate relationships in both males and females in Ghana with the DIAS-Adult instrument.

Methods 602 males and 602 females in heterosexual intimate relationship aged above 21 years in Ghana filled in a questionnaire measuring victimisation from and perpetration of aggressive behaviour in intimate partner relationships using the Direct Indirect Aggression Scales for Adults (DIAS-Adult, Österman & Björkqvist, 2009). The age difference between males (mean age 44.8 yrs., SD 13.4) and females (mean age 43.4 yrs., SD 13.6) was not significant. The subscales measure victimisation from and perpetration of physical, socially manipulative aggression, non-verbal, cyber and economic aggression. The alpha scores for the 10 subscales were all above .68.

Results Results show that females scored significantly higher than males on being perpetrators of physical, socially manipulative aggression, nonverbal and cyber aggression. Males scored significantly higher than females on being victimised by their partner of physical, socially manipulative aggression, nonverbal and cyber aggression.

Conclusions The findings suggest that developmental efforts to empower women might be enabling females become more independent, allowing them to redefine their roles in the society, however, this may also be having unintended negative effect on female aggression in intimate relationships.

987 SRI LANKAN GENERAL PRACTITIONERS' (GPs) KNOWLEDGE, ATTITUDES, AND SKILLS ON GENDER-BASED VIOLENCE

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Background As family physicians, General Practitioners (GPs) have a high capacity to identify and assist the survivors of gender-based violence (GBV). However, in Sri Lanka, GPs are not trained to provide GBV services. This study aimed to assess Sri Lankan GPs' knowledge, attitudes and skills on GBV, in order to identify their training needs.

Methods We conducted a postal survey between 1st June and 31st July 2015 with all the registered full-time GPs in Sri Lanka (n = 526). An anonymous self-administered structured questionnaires was used to assess GPs' knowledge, attitudes, responsibility,

and self-reported practices on GBV. Out of the 526 GPs, 124 returned completed questionnaires. We analysed data using SPSS version 20 statistical software.

Results Of all the GPs included in the study (n = 124), 70.5% were male, 80.2% were more than 45 years old, and 83.5% were practicing as GPs for more than 5 years. The mean score for GPs' GBV knowledge was 20.8% (Standard Deviation (SD) = 5.52). The mean score for attitudes on GBV was 60.35% (SD = 15.13), and for perceived responsibility to assist GBV survivors was 61.57% (SD = 13.50). The mean score for the self-confidence to identify and manage GBV was 75.28% (SD = 20.50). When asked, 56.1% reported that they see a GBV survivor very rarely, and only 8.3% reported that they see a GBV survivor at least once a week; it is known that one in three Sri Lankan women experience GBV. Of all, 77.2% of the GPs believed that they should intervene to prevent GBV because it is a health issue, while only 56.1% believed that GBV is a human rights violation.

Conclusion GPs have a high self-confidence to identify and assist GBV survivors. However, their knowledge on GBV is less. Possibly because of that, in actual practice, GPs rarely identify GBV. Although, several GPs identify GBV as a health problem, almost 45% of the GPs do not see GBV as a human rights violation. Improving GP's knowledge on GBV might improve their response for GBV.

988 INTIMATE PARTNER VIOLENCE AND NETWORKING: WHAT ROLE FOR HEALTH SERVICES? STRATEGY IN COIMBRA

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Background Violence by intimate partners (IPV) can be prevented and its impact reduced. This calls for to deal with violence from a public health perspective, according the ecological model, associated to a multidisciplinary and multisectoral networking approach. In Coimbra various sectors are working together from 2000, in tackling the problem of IPV. Health sector is an active and valuable ally in the global response to violence and brings a variety of advantages and assets to this work, from primary to tertiary prevention, including programs for victims and perpetrators.

Description of the problem IPV is a serious problem that occurs in all countries, among heterosexual or same-sex couples. The consequences are profound, extending beyond the health and

happiness of individuals to affect the well-being of entire communities.

Results Our strategies are addressed to prevention (at all levels). We deal with violence taking steps to understand the range of factors that put people at risk for violence and protect them from experiencing or perpetrating violence. Our fundamental goal is to stop IPV before it begins. Networks “Violence’s Group: Information, Research, Intervention” (2002), “School Against Violence” (2007), along with the training of 480 professionals (health, other sectors) in our region (2009–2012), in the area of prevention of IPV, are examples of our networking strategy. The Family Violence Unit, UVF (2004) - CHUC, integrates both networks; of the 1400 cases (2/3 women, 1/3 men) at UVF, we did not record any murder to date. Our strategy is recognised at regional and national levels.

Conclusions We believe that prevent efforts associated to investigation and a networking strategy (from micro to macrosystem, throughout the life cycle), at individual, family, community, and political levels, are one of the keys to prevent IPV.

989 THE ONLINE SHELTER – WEB SERVICE FOR EVERYONE CONCERNED OF DOMESTIC VIOLENCE

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Background The Federation of Mother and Child Homes and Shelters is the national child welfare organisation with 30 member associations around Finland. The aim of the Federation is to support parenthood and families, to prevent violence in families and to safeguard the child’s right to safe development and childhood. The Online Shelter is a web service maintained by the Federation.

Description of the problem The Online Shelter was founded in 2001 and there are about 5000 visitors monthly. The Online Shelter is a web service for everyone concerned of domestic violence. The aim is that everyone has an equal possibility to get help and support for domestic violence. For example living in a small town can limit your possibility to get help. There is also lot of emotions, like shame and guilt, which are related to domestic violence and can affect your possibility to get help. When it comes to children and youth, internet is the place where they search for help. In these cases the online help can be the only possibility to find and get help.

Results The main aim of the Online Shelter is to offer preventative information about domestic violence and to strengthen people to search for help as early as possible. The Online Shelter provides different kind of help services and tools for surviving. The online chat is usually the first place where people tell about the violence in their lives. Safety is the most important thing in the discussions and it is important that people get the feeling that the chat raises their safety and encourages them to search help from the real time services.

Conclusions This presentation introduces the Online Shelters possibilities to help and give information about domestic violence. This presentation also gives some ideas how to work online, what are the main questions in the Online Shelters chats and what is the meaning of the online help.

990 PREDICTORS FOR PSYCHOLOGICAL DATING VIOLENCE VICTIMISATION AND PERPETRATION IN MALE AND FEMALE ADOLESCENTS

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Background Adolescent dating violence is an increasing public health problem, viewed in line with the ecological model of influence of different factor. Studies have found that 16% to 90% of adolescents have experienced some form of violence from a dating partner. The study objective was to examine the predictors for higher level of psychological dating violence victimisation and perpetration groups in male and female adolescents, such as: with substance use, self-esteem, hostility, conflict resolution skills, gender stereotypes and acceptance of violence.

Methods The convenient sample of 410 students from general/vocational high schools responded to a self-administered 7 scales questionnaire. Informed consent and parent consent were provided for adolescents below 18 years prior. The two groups were divided according to the level of prevalence of psychological victimisation and perpetration into mild and higher. The Cronbach’s Alpha of the scales varied from 0.72 to 0.80. Statistical analysis involved descriptive statistics and logistic regression.

Results A logistic regression analysis performed predicted that: lower self-esteem ($r = -0.077, p < 0.05$), hostility ($r = 0.028, p < 0.05$), and acceptance of violence ($r = 0.098, p < 0.05$) increase one time more the likelihood for psychological dating violence victimisation in male adolescents. Psychological dating violence victimisation in female adolescents was significantly predicted by: substance use ($r = 0.161, p < 0.05$) and acceptance of violence ($r = 0.226, p < 0.01$). Psychological dating violence victimisation in male adolescents is significantly distinguished by the predictors such as: substance use ($r = 0.188, p < 0.05$) and acceptance of violence ($r = 0.286, p < 0.01$), while in female adolescents is the acceptance of violence ($r = 0.349, p < 0.01$), increasing the likelihood for 1.4 for times more for psychological dating violence victimisation.

Conclusions Targeting various risk factors should anticipate analysis while designing violence preventive programmes and intervention targeting adolescents.

991 ARE ALCOHOL ABUSE AND MENTAL HEALTH PROBLEMS ASSOCIATED WITH EXPERIENCE OF INTIMATE PARTNER VIOLENCE AMONG PERSON WITH CHILDREN

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Background Intimate partner violence is a serious problem worldwide and has long been identified as a significant health endangering factor. This study aimed to investigate the associations of intimate partner violence with alcohol abuse and mental health problems among persons with children.

Methods We used population-based cross-sectional data from self-administered questionnaires collected in 2012–2013. The