



## Call for Abstract Submissions

**Submission Deadline: Friday, January 13, 2017 11:59pm Pacific**

### Conference Overview:

Domestic and sexual violence (D/SV) are widespread and serious issues that affect health and well-being across the lifespan. This conference addresses domestic and sexual violence including teen dating violence/adolescent relationship abuse and reproductive coercion as well as other forms of violence that often overlap with D/SV including child abuse and trauma, human trafficking, elder abuse and bullying. In addition to its health consequences, D/SV is a significant risk factor for lifelong and intergenerational health and social problems. Because survivors as well as perpetrators visit health providers for care for themselves and their families, health visits are a great opportunity to support survivors and provide education on healthy relationships. Health care and public health professionals are in a unique position to serve as key players in a coordinated, multi-sector response to D/SV and other forms of interpersonal violence. Likewise, DSV and other community advocates are also in a unique position to focus survivor health and support primary prevention. This conference highlights the great work being done across the country to address the intersecting issues of health, domestic/sexual violence and violence as a social determinant of health.

The National Conference on Health and Domestic Violence is a biennial event put on by the [National Health Resource Center on Domestic Violence](#) (HRC). For almost two decades, the National Health Resource Center on Domestic Violence has supported health care professionals, domestic violence experts, survivors, and policy makers at all levels as they improve health care's response to domestic violence. The HRC is funded by a grant from the Family Violence Prevention & Services Program, Family & Youth Services Bureau, Administration for Children and Families, U.S. Department of Health and Human Services, and is a member of the Domestic Violence Resource Network.

### Conference Purpose:

The National Conference on Health and Domestic Violence provides valuable professional education on the latest research, practice, policy and advocacy responses to domestic and sexual violence (D/SV) for all domestic/sexual violence advocates and health care professionals including physicians, dentists, nurse practitioners, nurses, physician assistants, emergency medical services personnel, dental hygienists, psychologists, mental and behavioral health providers, social workers, physical and occupational therapists, public health personnel, researchers, alternative health care providers, health care administrators, health policy makers, health profession students, survivors and other community stakeholders.





Specialized pre-conference institutes will take place on September 26, 2017 followed by the two-day conference on September 27<sup>th</sup> and 28<sup>th</sup>, 2017. The Conference includes an exhibit hall for vendors and opportunities for professional networking.

### Conference Goals:

The goal of the 8<sup>th</sup> Biennial National Conference on Health and Domestic Violence is to advance the field of health care's response to domestic and sexual violence. The conference will examine:

- Health impacts, co-occurring issues, health care responses, and policy implications related to survivors, children, perpetrators, and communities affected by D/SV;
- The intersectionality<sup>1</sup> of factors relevant to domestic and sexual violence - i.e., how the categories of race, class, culture, ethnicity, religion, physical/cognitive ability, age, gender, sexual identity, immigration status, language, and geographic settings and communities interconnect with one another to reveal the complexity of personal experiences and to inform program strategies;
- Innovative practices, programs, and partnerships among health systems, providers, public health programs, legal/government systems, social service agencies, domestic/sexual violence programs, and advocates that improve patient safety and health status at the local state, national, and international levels;
- Recent research and evaluation about risk and protective factors, physical/mental health effects, health and advocacy-based innovations, and prevention; and
- Health and domestic violence policy implications regarding identification, intervention and primary prevention.

<sup>1</sup> Intersectionality is a term, first coined by Kimberlé Crenshaw, that refers to a theoretical approach and prism through which we can understand that people live layered lives derived from their identities, social history and the structures of power and oppression. The intersections of various identities produce substantively distinct experiences. Engaging with an intersectional analysis enables one to shape effective interventions, analyze social problems fully and promote more inclusive advocacy.

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## **ABSTRACT SUBMISSION GUIDELINES**

This Call for Submissions seeks abstracts that highlight research reports, practice innovations, advocacy initiatives, educational advances, and/or community programs that address one or more aspects related to D/SV.

### **Who Should Submit:**

Advocates for survivors of domestic/sexual violence  
Dentists  
Health policy leaders  
Health professional students  
Mental and behavioral health providers  
Nurses, Nurse midwives, Nurse Practitioners  
Physicians  
Physician assistants  
Researchers, evaluators  
Social workers  
Survivors  
Other health care providers and allied professionals

### **Session Types:**

**Innovative Program/Promising Practice Report:** Presentation of an innovative program/promising practice issue, concept, strategy or program. Single presenter preferred and a maximum of two. Twenty minute presentation, with 5 minute question/answer/discussion period (25 minutes total).

**Scientific Report:** Presentation of results of a research-based scientific study. Single presenter. Ten minute presentation, with 5 minute question/answer/discussion period (15 minutes total).

**Symposium:** An in-depth discussion of a single key issue, area or concept related to health and domestic and sexual violence. Symposia should utilize appropriate adult education techniques, with an emphasis on discussion and participant interaction. One lead presenter and a maximum of three additional presenters are suggested (80 minutes total).

**Workshop:** A skills-focused session designed to teach, enhance or strengthen specific practical skills of participants. Workshops should incorporate participatory and up to date adult educational techniques such as problem-based or team-based learning, with an emphasis on interactive learning and skills practice. One lead presenter and a maximum of three additional presenters are suggested (80 minutes total).





**Poster:** A visual presentation of the results of a research-based scientific study or an innovative program/promising practice. Posters will be available for viewing during the entire Conference. Single presenter. Presenters will be asked to be available for informal discussion with participants during Poster Session presentation times at the Conference.

### Subject Categories:

For all submissions, select two distinct Subject Categories in order of preference.

1. **Adolescents:** Short and long term health effects of domestic or sexual violence on adolescents' physical and mental health and social/emotional development. Model or innovative health care responses focused on intervention or prevention. Anticipatory guidance regarding healthy relationships.
2. **Advocacy and Survivor Perspectives:** Survivor perspectives on health care interventions, including personal experiences; D/SV program/shelter-based health care programs; and model health care-based advocacy programs.
3. **Children:** Short and long term health effects of exposure to domestic and sexual violence and impact of trauma on children. Appropriate health care and public health responses including anticipatory guidance about violence prevention; overlap with child abuse, trauma and neglect; ethical and legal issues, and strategies to promote improved maternal and child health.
4. **Social Determinants of Health:** Dynamics, responses, protective factors, health care utilization, community-based and indigenous health care, and public health responses, as they relate to the intersections of race, ethnicity, immigration status, physical/cognitive ability, class, gender, sexual identity, survivors of D/SV, and geography (rural, urban, frontier, etc.).
5. **Assessment and Intervention:** Evaluated and/or innovative strategies to address victimization and/or perpetration, including assessment tools and intervention methods.
6. **Educating and Engaging Providers:** Evidence-based or innovative approaches to education for health care providers, health professional students and policy makers.
7. **Health Impact of D/SV Across the Lifespan:** Research and/or programs that impact physical, reproductive and mental health of survivors and/or perpetrators, and the relationship to co-occurring issues including but not limited to: obesity; heart disease; diabetes; cancer; tobacco or substance abuse; HIV/AIDS; STIs and unplanned pregnancy; injury; and health care utilization and access to care.
8. **Health Policy and Systems Change:** Health policy and practice initiatives, including legal, ethical, business and service delivery issues related to HIPPA, health information technology, the Affordable Care Act, and/or state, provincial, regional or local regulations.
9. **Community and Public Health Prevention Programs:** Model or promising population/public health programs or prevention focused initiatives, such as health promotion strategies that utilize media or innovative messaging; initiatives engaging men and boys; and other social norms changing programs including community-based, faith-based, school-based and health education and behavior programs.





10. **Research:** Reports outlining study design, methods, and results of research related to health and D/SV.
11. **Technology:** Advances and critical issues in telemedicine; electronic medical records and data management; use of technology to assist survivors, health care providers, and others; and how technology is used by perpetrators.
12. **Special and Emerging Topics:** Other topics not previously listed that are related to the Conference theme or to the field in general.

### Selection Criteria:

Abstracts that do not adhere to the submission guidelines or relate to the Conference goals will not be accepted for review.

#### Abstracts will be reviewed and scored based on:

1. Relevance to the goal of the Conference
2. Organization and clarity
3. Description of objectives, content and teaching methodologies to address the educational needs of participants
4. Special consideration will be given to abstracts that address or marginalized communities using an intersectional analysis.
5. Additional review criteria by session type include:
  - **Innovative Program/Promising Practice Report:** Content about innovative programs/promising practice issues, concepts, strategies or programs that present new and effective ways to improve the health care response to D/SV.
  - **Scientific Report:** Content that is scientifically based, accurate, current, and objective.
  - **Symposium:** Session provides an in-depth exploration of a key issue, area or concept related to health and domestic/sexual violence.
  - **Workshop:** Ability to enhance or strengthen specific practice, research, or policy skills of participants. Workshops should utilize adult learning theory, incorporate up to date educational techniques (e.g. problem-based or team-based learning), and be interactive and participatory.
  - **Poster:** A visual presentation of the results of a research-based scientific study or an innovative program/promising practice.

**Please note:** The Abstract Selection Committee typically receives many more submissions than can be accepted. Submissions for oral presentation are very competitive, with workshop and symposium submissions being most competitive. In order to accommodate the largest number of excellent abstracts, the Committee may need to allocate a shorter time period than requested or to accept an abstract as a poster rather than as an oral presentation. During the application process, applicants will have the opportunity to state their willingness to reformat the





presentation if requested. Applicants will be given an opportunity to update the description, learning objectives and speaker(s) as appropriate.

### Information Required for Submission:

1. **Title** (*limit 50 words*)
2. **Short description** (*limit 80 words*)
3. **Theme and purpose** (*for Workshop or Symposium only – limit 250 words*)
4. **Two to three learning objectives** Describe, as measurable outcomes, what participants are expected to achieve as a result of attending your presentation. The objectives should complete the sentence: “At the end of this session, participants in attendance will:” (*limit 50 words*)
5. **Presenter(s) contact information** Provide the following information for each presenter: full name, degrees/credentials, position title, organization, mailing address, phone number, fax number, email address
6. **Short biography for each presenter** (*limit 100 words*)
7. **CV/Resume for each presenter** (*1-6 pages*)
8. **List of co-authors** (*if applicable*) List names of co-authors associated with your research or project who will not be serving as presenters
9. **Conflict of Interest declaration** Each presenter will receive an email prompting them to complete their own disclosure form. The abstract submission cannot be concluded until each disclosure form has been submitted.

**Abstract text** (*choose one Session Type and corresponding criteria*):

We recommend you copy and paste your abstract and other lengthy information as Plain Text from a word processor such as Microsoft Word or Word Pad. Please note that formatting commands (*italics, bold, tables, bullets, etc.*) and symbols may not transfer.

### Innovative Program/Promising Practice Report (25 minutes) (*limit 400 words*)

Include information under each of the following specific category headings:

- **Objectives:** Describe the objectives or purpose of presentation.
- **Background:** Provide an overview of the issue, and the practice or policy needs addressed by the program.
- **Program Description:** Describe the intervention or program.
- **Results:** Describe the experience, results or outcomes of the program.
- **Discussion and Recommendations:** Discuss the implications of the program or promising practice. What are the lessons learned and logical next steps for this program or practice, or for others that share similar characteristics? What makes this program unique or pioneering in the field?
- **Presentation Methodology:** Describe anticipated presentation methods if the abstract is accepted.





### **Scientific Report (15 minutes) (limit 400 words)**

**Note: Preference will be given to reports of research that has been completed by the abstract submission deadline.**

Include information under each of the following specific category headings:

- **Objectives:** Describe the research question(s) or study objectives.
- **Background:** Provide an overview of the issue, including a brief summary of related research and/or scholarship in the field, along with other relevant information.
- **Methods/Design:** Describe the study setting and location, research design, sample size, description of subjects or participants, inclusion/exclusion criteria, data collection methods, analysis plan, and other relevant information.
- **Results:** Describe key findings. Interim results may be included for studies that are in-progress at the time of submission. **NOTE: Studies that are in-progress at the time of abstract submission must be complete on or before September 26, 2017. Submissions that indicate that results will be presented, yet provide little or no interim data, will not be accepted.**
- **Discussion and Recommendations:** Discuss the strengths and limitations of the study, implications for further research, policy or practice, and recommendations. Include clinical or programmatic applications, and other relevant information.
- **Presentation Methodology:** Describe anticipated presentation methods if the abstract is accepted.

### **Symposium (80 minutes) (limit 400 words)**

Include information under each of the following specific category headings:

- **Objectives:** Describe the purpose and expected outcomes of the Symposium.
- **Symposium Overview:** Describe the issue(s) to be discussed, placing it/them in appropriate context considering the field in general and the Conference goal in particular. Include a summary, as appropriate, of relevant research and/or scholarship in the field.
- **Activities and Timeline:** Describe, in detail, what the conference participant will experience during the Symposium. What topics will be covered? How will participants engage with the material? Include a timeline of activities.
- **Presentation Methodology:** Describe anticipated presentation methods if the abstract is accepted.

### **Workshop (80 minutes) (limit 400 words)**

Include information under each of the following specific category headings:

- **Objectives:** Describe the purpose and expected outcomes of the Workshop.
- **Workshop Overview:** Describe the topics to be addressed, and the specific practice, policy or research skills that will be acquired or enhanced.





- **Activities and Timeline:** *Describe, in detail, what the conference participant will experience during the Workshop. What topics will be covered? How will participants engage with the material? Include a timeline of activities.*
- **Presentation Methodology:** *Describe anticipated presentation methods if the abstract is accepted.*

### Poster (limit 300 words)

Include information under each of the following specific category headings:

- **Objectives:** *Describe the objectives or purpose of the poster presentation.*
- **Background:** *Provide an overview of the issue, and the practice or policy needs addressed.*
- **Program Description or Study Design:** *Describe the intervention/program, or the research design, study setting and location, description of subjects or participants, and other relevant information.*
- **Results:** *Describe the experience, results or outcomes.*
- **Discussion and Recommendations:** *Discuss the implications of the work presented in the poster. What are the lessons learned and logical next steps?*

### Submission Deadline and Important Details for Applicants:

**The deadline to submit all proposals is: Friday, January 13, 2017, 11:59 pm Pacific**

Abstracts presented elsewhere may be submitted for consideration at this Conference, provided that full disclosure is made in the abstract submission materials. (Presenters are responsible for adhering to the submission exclusivity/primacy guidelines of outside entities.)

Accepted Scientific Reports and Innovative Programs/Promising Practice Reports will be grouped according to topic or theme by the Conference staff. Typically, three to four abstracts will be grouped for presentation in a single 80-minute session. Each session will be assigned a moderator to ensure time limits are followed.

Upon receipt of acceptance, you will be asked to confirm your participation by following the instructions contained in the acceptance letter from Futures Without Violence.

For each abstract that is selected, one presenter will be eligible for discounted registration to the Conference. Note: additional fees apply for the pre-conference institutes. A very small number of additional stipends to partially defray travel or hotel expenses will be available to presenters (based on financial need). A separate scholarship application will be available on the conference website when registration opens.

Notification of abstract acceptance and final assignment of poster and presentation will be made by early April 2017. Notification will be sent to the email provided in your submission.





You *must* confirm your intention to participate in the Conference by May 19, 2017

Although online submission is preferred, those with limited internet access may submit proposals in hard copy format. Please contact Melody Pagan for hard copy submission instructions:

Futures Without Violence

Attn: Melody Pagan

100 Montgomery Street, The Presidio

San Francisco, CA 94129-1718

Phone: (415) 678-5500 Email: [mpagan@futureswithoutviolence.org](mailto:mpagan@futureswithoutviolence.org)





### Ready to submit? Click below:

Once you have entered the title of your submission, you will be sent an email that includes a password-protected hyperlink. If you interrupt the submission process before finishing, you can resume at any time by clicking on the hyperlink in that email. To access help submitting an abstract online, [e-mail technical support](#). For urgently needed technical support, phone (401) 334-0220 between the hours of 8:30 am and 6:00 pm Monday through Friday, Eastern Time.

[Submit](#)

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### Login to Resume or Edit Submission:

If you have already submitted an abstract title -- and you wish to resume, edit, or withdraw that submission -- you can do so online up until the submission deadline. You can view your submitted abstract at any time, including after the submission deadline has passed. The confirming email mentioned above (from [NCHDV@confex.com](mailto:NCHDV@confex.com)) will contain a direct link to your submission. Alternatively, you may login and view your submission by visiting: <https://nchdv.confex.com/nchdv/2017/cfp.cgi>

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### Technical Support:

To access help submitting an abstract online, e-mail technical support: [nchdv@confex.com](mailto:nchdv@confex.com). For urgently needed technical support, call (401) 334-0220 between the hours of 8:30 am - 6:00 pm Eastern Time, Monday through Friday.

For password assistance, go to: <http://nchdv.confex.com/nchdv/reminder.cgi>

