

1.

- Identify problem
- Consider context
- Consider population (e.g., size, gender, previous education)
- Consider KT barriers (uptake & implementation)
- Consider IPV/CM-specific barriers
- Assess resources (e.g., time, money)

Institutional support (e.g., investment; approval; culture) is a potentially promising facilitator of KT.

Negative attitudes or uncertainty can impede uptake. IPV/CM knowledge can be discomfoting or even traumatizing (especially for past or current victims).

SET GOALS

2.

- Consult literature
- Consider goal/intervention fit
- Consider context
- Consider population
- Consider & address KT barriers
- Incorporate IPV/CM-specific components
- Consider resources

Use or adapt existing interventions (if possible).

Promising components include ongoing/repeat “boosters” to help sustain change and interaction-oriented KT (exchange with experts and/or between recipients) to facilitate engagement and uptake.

Include component(s) to monitor recipients’ reactions and ensure supportive responses (e.g., IPV/CM resources).

CHOOSE INTERVENTION

3.

- Consult literature
- Consider goal/intervention/evaluation fit
- Consider utility of evaluation:
 - to organization
 - to literature/future implementers
- Consider resources

Use or adapt valid measures (if available).

Consider a design that can distinguish the effectiveness of different intervention components and/or modes of delivery.

When possible, examine long-term effectiveness and health-related outcomes. Reports should be detailed re: context, intervention, methods and findings. Collect and report data regarding feasibility and affordability.

CHOOSE EVALUATION