

ReJudge Study: Reducing rates of non-medically indicated CS through an Open Access multi-media evidence and behavioural change programme for lawyers and judges

Creating the ReJudge survey and workshop

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Background

One of the originally planned data collection methods for the ReJudge project was on-line interviews with lawyers and judges using vignettes as a means of changing attitudes and beliefs. As the project evolved, it became evident that a face to face workshop involving both those in the legal and the medical profession might be more useful. This session briefly describes how the content of the workshop and of the related before and after survey were developed from the reviews and interviews that preceded it

Aim

To develop tools for testing in a ReJudge workshop and before and after survey, and to determine the acceptability and feasibility of using the survey and the insights from the workshop in future education and training

Theoretical perspective/frameworks

The Theory of Reasoned Action), the WHO Behavioural Insights programme, and the Kirkpatrick criteria for educational programmes.

Methods

The key behavioural drivers and mental models developed from the review phase of ReJudge were synthesised together. They were then mapped against the interview data. The mapping exercise was used to develop the survey tool, and two vignettes, one for the survey and one for the workshop.

Results

The survey comprised the following sections: *Demographics: (Lawyer or doctor)/Knowledge about the legal system in India/ Knowledge about maternity care/ Views on why rates of caesarean section might be high in some parts of India/ Views on fear of litigation*. It also included a section on the time it took to complete, and comprehensibility/ completeness.

Three educational seminars were developed to address knowledge about the legal system in India in relation to reproductive rights, and about the evidence on relevant medical practice (Kirkpatrick level 1).

The vignettes were written as evolving clinical cases, ending in potential litigation. They addressed all the mental models arising from the prior data collection, and were presented in sections, building up to the decision about litigation. A facilitators plan was created for the workshop, designed to generate discussion between medical and legal attendees as the story of the case, and of the decisions made by key players at each stage (Kirkpatrick levels 1 and 2).

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