

Understanding Domestic Violence:

Why should medical students care,
what should they know and do?

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- Why should medical students care?
- What should medical students know?
- What can medical students do?



Why Care: Prevalence

- Estimating exact prevalence is difficult because shame leads to under-reporting
- Domestic violence is one of the foremost causes of serious injury to women ages 15 to 44, accounting for about 30 percent of all acute injuries to women seen in emergency departments

Wilt, S., & Olson, S. (1996). Prevalence of domestic violence in the United States. *Journal of the American Medical Women's Association*, 51, 77–82.

- an estimated 5.3 million IPV victimizations occur among U.S. women ages 18 and older each year. This violence results in nearly 2.0 million injuries, more than 550,000 of which require medical attention.

National Center for Injury Prevention and Control. *Costs of Intimate Partner Violence Against Women in the United States*. Atlanta (GA): Centers for Disease Control and Prevention; 2003.

Why Care: It Happens Here

- In 2009, SafeHouse provided services for 4,576 residents of Washtenaw County
 - 8,111 nights spent in shelter (3,242 adults – 4,869 children)
 - 1,834 crisis calls answered
 - 2004: 6,407 unduplicated service recipients when SafeHouse had twice the staffing

Why Care: Physical & mental health impact

- Violence causes trauma. Without proper support, the result can be
 - Hallucinations, delusions and dissociation
 - Depression, suicidal tendencies
 - Chronic anxiety
 - Hostility
 - Chronic fatigue syndrome
 - Eating disorders
 - Migraines
 - STDs
 - Substance abuse disorders
 - Indigestion, diarrhea, chronic irritable bowel syndrome
 - Self-injury
 - Cognitive impairments
 - Disease
 - Disability and premature death.

Witness Justice. *Trauma – the “Common Denominator,”*

http://download.ncadi.samhsa.gov/ken/pdf/NCTIC/The_Science_of_Trauma.pdf.

Family Violence Prevention Fund, *National Consensus Guidelines on Identifying and Responding to Domestic Violence Victimization in Health Care Settings*. <http://www.endabuse.org/userfiles/file/Consensus.pdf>

Why Care: health impact on pregnancy

"Six percent of all pregnant women are battered and pregnancy complications, including low weight gain, anemia, infections, and first and second trimester bleeding, are significantly higher for abused women, as are maternal rates of depression, suicide attempts, and substance abuse."

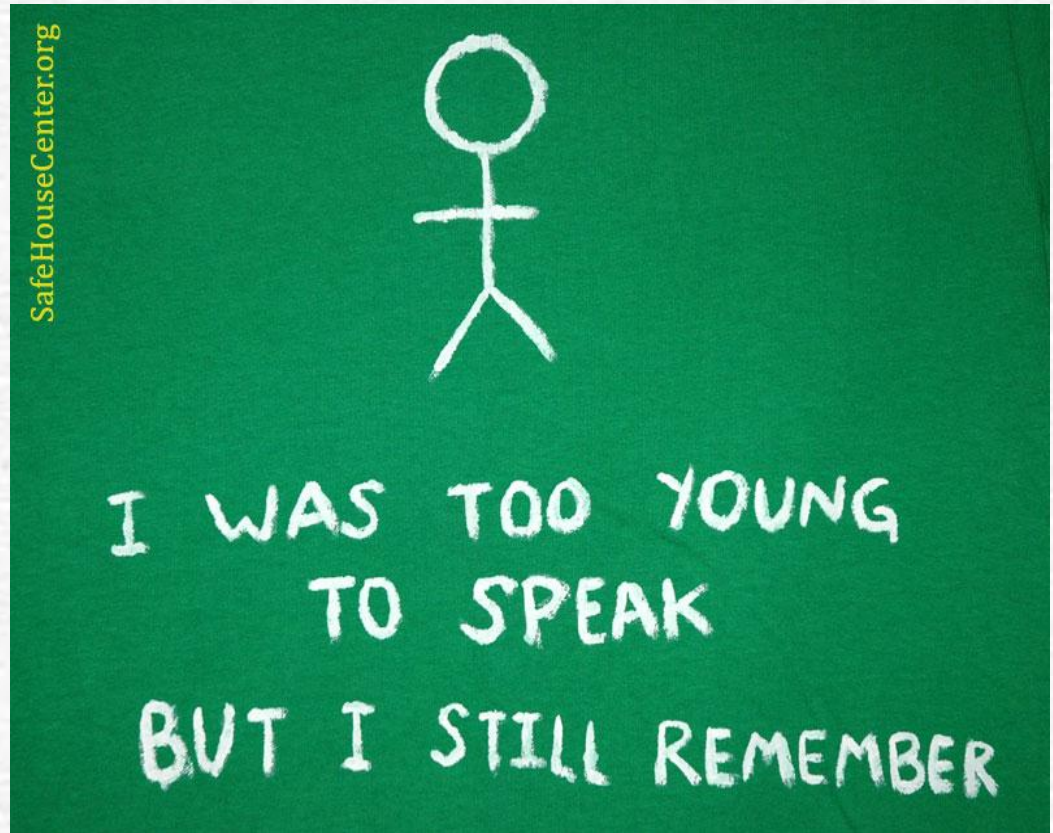
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Why Care: Effect on children

- Children who witness domestic violence may suffer: PTSD, nightmares, depression, learning difficulties, aggressive behavior and substance abuse.



U.S. Department of Health and Human Services. *Mental Health: A Report of the Surgeon General*.

<http://www.surgeongeneral.gov/library/mentalhealth/home.html>

Family Violence Prevention Fund, *National Consensus Guidelines on Identifying and Responding to Domestic Violence Victimization in Health Care Settings*.

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Why Care: Economic Costs

- The costs of intimate partner rape, physical assault, and stalking exceed \$5.8 billion each year (2003 \$)
- nearly \$4.1 billion is for direct medical and mental health care services.
- nearly \$1.8 billion is indirect costs of lost productivity and earnings

National Center for Injury Prevention and Control. *Costs of Intimate Partner Violence Against Women in the United States*. Atlanta (GA): Centers for Disease Control and Prevention; 2003.

http://www.cdc.gov/ncipc/pub-res/ipv_cost/ipvbook-final-feb18.pdf

CDC, Intimate Partner Violence: Consequences,

<http://www.cdc.gov/violenceprevention/intimatepartnerviolence/consequences.html>

Why Care: Battered Women Need Your Help

- On Sept 15, 2009, there were 9,280 unmet requests for domestic violence services
- In Michigan on that single day, there were 350 unmet requests for services
- Nationwide in 2009, “programs reported letting go or not replacing 1,989 positions because of lack of funding.”

Why Care: Mandatory Reporting

- MCL 750.411 (Act 328 of 1931)
a hospital to which 1 or more persons come or are brought suffering from a wound or other injury inflicted by means of a knife, gun, pistol, or other deadly weapon, or by other means of violence, has a duty to report that fact immediately, both by telephone and in writing, to the chief of police or other head of the police force of the village or city in which the hospital or pharmacy is located, or to the county sheriff if the hospital or pharmacy is located outside the incorporated limits of a village or city. The report shall state the name and residence of the person, if known, his or her whereabouts, and the cause, character, and extent of the injuries and may state the identification of the perpetrator, if known.

Know: DV definition

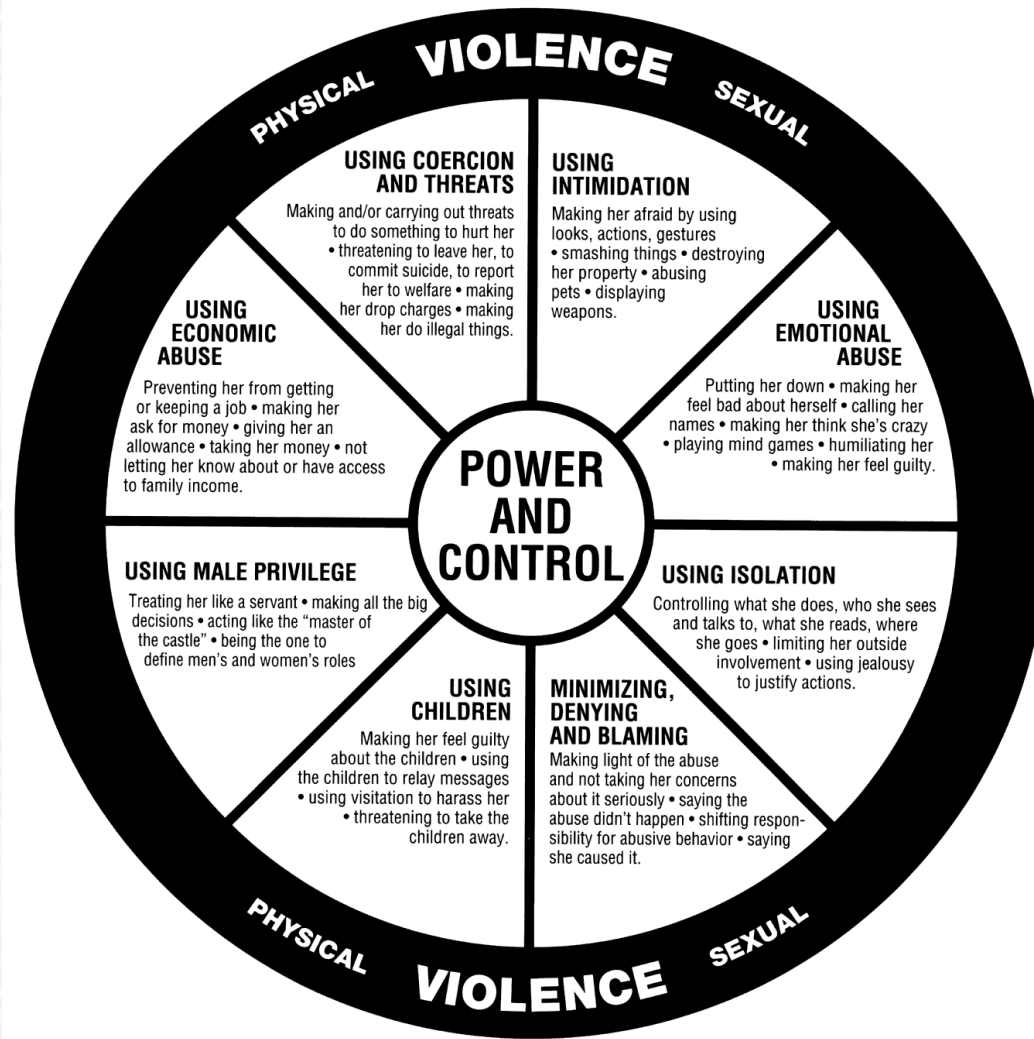
- Intimate partner violence is a pattern of assaultive and coercive behaviors that may include inflicted physical injury, psychological abuse, sexual assault, progressive social isolation, stalking, deprivation, intimidation and threats. These behaviors are perpetrated by someone who is, was, or wishes to be involved in an intimate or dating relationship with an adult or adolescent, and are aimed at establishing control by one partner over the other.

Family Violence Prevention Fund. *National Consensus Guidelines on Identifying and Responding to Domestic Violence Victimization in Health Care Settings.*

<http://www.endabuse.org/userfiles/file/Consensus.pdf>



Know: Power and Control Wheel



Know: DV can happen to

- Generally MEN'S VIOLENCE AGAINST WOMEN
- Among violent crimes against a spouse, 86.1% of the offenders were male; against a boyfriend or girlfriend, 82.4%*
- Teens
- Senior citizens
- All classes
- All races
- All religions
- Gays/lesbians
- Men in heterosexual relationships

•Bureau of Justice Statistics, *Family Violence Statistics* (2005, NCJ 207846)

<http://bjs.ojp.usdoj.gov/content/pub/pdf/fvs.pdf>

Know: Sexual Assault

Any sexual act committed without consent, through force, coercion or intimidation and/or when an individual is unable to freely and knowingly give consent

- Wives can be raped by husbands
- According to Michigan law, people who are drugged, incapacitated or under the age of 16 are deemed unable to give consent.

Know: DV is hidden

- Guilt
- Shame
- Denial
- Fear of retaliation
- Fear of blame
- Privacy



Do: Get More Information

- *National Consensus Guidelines on Identifying and Responding to Domestic Violence Victimization in Health Care Settings.* Family Violence Prevention Fund.

<http://www.endabuse.org/userfiles/file/Consensus.pdf>

- AMA resources on violence (reference cards, training materials, etc)

<http://www.ama-assn.org/ama/pub/physician-resources/public-health/promoting-healthy-lifestyles/violence-prevention/other-violence-abuse-resources.shtml>

Do: Universal Assessments

- Models developed to identify other chronic health problems can effectively be applied to IPV. Routine inquiry, with a focus on early identification of all victims of IPV whether or not symptoms are immediately apparent, is a primary starting point for this improved approach to medical practice for IPV.
- When victims or children exposed to IPV are identified early, providers may be able to break the isolation and coordinate with DV advocates to help patients understand their options, live more safely within the relationship, or safely leave the relationship.

Do: Universal Assessments

- Battered women report that one of the most important aspects of their interactions with a physician was being listened to about the abuse.
- Even if a patient chooses not to disclose being abused, the provider's inquiry can often communicate support and increase the likelihood of future discussion of the issue.



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Do: Universal Assessments

- Talk to the patient **ALONE** in a safe, private environment
- Ask simple, direct questions such as:
 - Because violence is so common in many people's lives, I've begun to ask all my patients about it routinely.
 - Are you in a relationship with a person who physically hurts or threatens you?
 - Did someone cause these injuries? Who?

Do: Universal Assessments

- Be aware of:
 - History suggesting domestic violence: traumatic injury or sexual assault; suicide attempt, overdose; physical symptoms related to stress; vague complaints; unexplained multiple or old injuries; problems or injuries during pregnancy; history inconsistent with injury; delay in seeking care or repeat visits.
 - Behavioral clues: evasive, reluctance to speak in front of partner; overly protective or controlling partner.
- Do not do assessment if there is no private space or concerns for safety
 - Note in chart that assessment was not done
 - Have info available and/or in discharge instructions

Family Violence Prevention Fund. Practitioner Reference Card (via AMA resources)

Family Violence Prevention Fund. *National Consensus Guidelines on Identifying and Responding to Domestic Violence Victimization in Health Care Settings.*

<http://www.endabuse.org/userfiles/file/Consensus.pdf>

Do: Universal Assessments

- Take DV history
- Assess Safety
- Document injuries (body map, photos)
- Discuss birth control:
 - Hidden or invisible birth control options like Depo-Provera, IUD, Implanon and emergency contraception to prevent future unwanted pregnancies
 - “Are you worried he will hurt you if you don’t do what he wants with the pregnancy?”

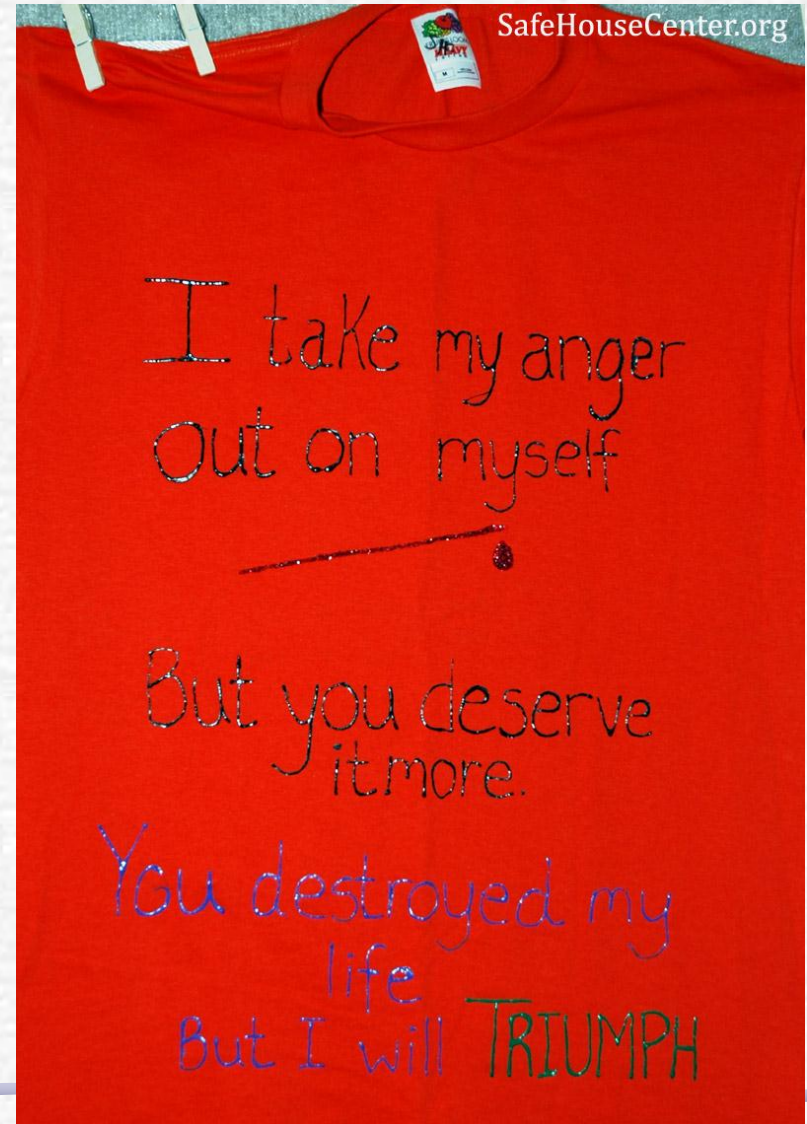
Family Violence Prevention Fund. Pregnancy Wheel (via AMA resources)

Family Violence Prevention Fund. *National Consensus Guidelines on Identifying and Responding to Domestic Violence Victimization in Health Care Settings.*

<http://www.endabuse.org/userfiles/file/Consensus.pdf>

Do: Universal Assessments

- Important Messages:
 - You are not alone
 - You are not to blame
 - There is help available
 - You [no one] deserves to be treated this way
- DV or SA means person is experiencing profound loss of control over life. Orders or appeals to authority will not be effective. Empower person by providing options and information so they can choose.



Do: Make Referrals

- Time and training limit what most doctors can do, so provide information and referrals
 - U of M ER and SafeHouse have an MOU – SafeHouse paged, will do assessment and offer services
- SafeHouse
 - Helpline: 734/995-5444 [You can call and say “this is a non-emergency request for information”]
 - Business line: 734/973-0242
 - Website: SafeHouseCenter.org
- National Hotline: 1-800-799-SAFE (7233)



SafeHouse Services

- 24-hour Help Line: 734-995-5444
 - Shelter
 - **SART (Sexual Assault Response Team)**
 - **DVRT (Domestic Violence Response Team)**
 - Medical Clinic
 - Counseling and Advocacy
 - Children's Programming
 - Legal Advocacy
 - Community Education and Social Change Advocacy
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Don't Give Up

