

Intimate Partner Violence: When Home is Not Safe

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OBJECTIVES

- Define Intimate Partner Violence and understand its prevalence and impact among adolescent and adult women
- Recognize symptoms of Intimate Partner Violence in patients presenting for gynecologic care
- Implement strategies for creating a safe and supportive office environment for the disclosure of Intimate Partner Violence
- Increase patient access to support services and resources

DISCLOSURE

I have no disclosures related to the content of this presentation

Intimate Partner Violence

...refers to behaviour within an intimate relationship that causes physical, sexual or psychological harm, including acts of physical aggression, sexual coercion, psychological abuse and controlling behaviours. This definition covers violence by both current and former spouses and partners.



World Health Organization

INTIMATE PARTNER VIOLENCE

- Physical violence is when a person hurts or tries to hurt a partner by using physical force.
- Sexual violence is forcing or attempting to force a partner to take part in a sex act, sexual touching, or a non-physical sexual event (e.g., sexting) when the partner does not or cannot consent.
- Stalking is a pattern of repeated, unwanted attention and contact by a partner that causes fear or concern for one's own safety or the safety of someone close to the victim.
- Psychological aggression is the use of verbal and non-verbal communication with the intent to harm a partner mentally or emotionally or to exert control over a partner.

cdc.gov





The National Intimate Partner and Sexual Violence Survey

The National Intimate Partner and Sexual Violence Survey (NISVS) is an ongoing survey that collects the most current and comprehensive national- and state-level data on intimate partner violence, sexual violence, and stalking victimization in the United States. CDC developed NISVS to collect data on these important public health problems and enhance violence prevention efforts.

Prevalence of IPV

- Statistics among adolescents
 - 1 in 12 experienced physical dating violence
 - 1 in 12 experienced sexual dating violence
- LGBTQ+ experience higher rates
- Long-term effects

Power and Control

Economic abuse	Creating financial dependence
	Taking her money
	Forcing her to have to ask for money whenever she needs anything.
Using Privilege	Treating her like a servant
	Having the last word about everything
	Defining and rigidly adhering to men's and women's traditional roles
Intimidation	Making her afraid using looks, gestures
	Destroying property
	Displaying weapons
Isolation	Controlling and limiting what she does, whom she sees, where she
	goes
	Preventing her from seeing friends and family

Impact of IPV







- MENTAL HEALTH CONSEQUENCES



- SOCIAL AND ECONOMIC IMPACT

Recognizing Symptoms of IPV in Patients



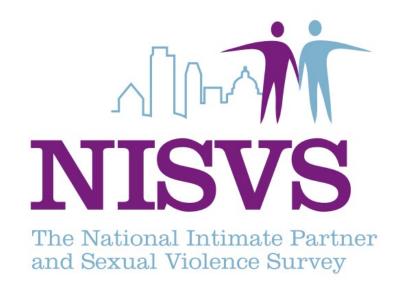




- COMMON PHYSICAL SIGNS

- BEHAVIORAL SIGNS

- VERBAL CUES



It is important for service providers to screen for multiple forms of IPV, including psychological aggression, because individual forms or polyvictimization may have unique and cumulative health effects

Screening for IPV



- SCREENING TOOLS AND QUESTIONNAIRES

- WHEN AND HOW TO SCREEN



Intimate Partner Violence

The Clinician's Guide to Identification, Assessment, Intervention, and Prevention

Elaine J. Alpert, MD, MPH

PHYSICIAN'S APPROACH TO DOMESTIC VIOLENCE

- R Remember to ask routinely about partner violence (past and present) in your own practice
- **A Ask** directly about violence with questions such as "At any time, has a partner hit, kicked, or otherwise hurt or frightened you?" Interview your patient in private at all times.
- **D Document** information about "suspected domestic violence" or "intimate partner violence" in the patient's chart, and file reports when required by law.
- A Assess your patient's safety. Is it safe to return home? Find out if any weapons are kept in the house if the children are in danger, and if the violence is escalating.
- **R Review** options with your patients. Know about the types of referral options (e.g., shelters, support groups, and legal advocates).

Culturally Sensitive Care

- Importance of cultural competence
- Tailoring care to diverse populations

Create a Safe and Supportive Office Environment

Space

- Privacy
- Safe



ACOG COMMITTEE OPINION

Number 825

Committee on Health Care for Underserved Women

This Committee Opinion was developed by the American College of Obstetricians and Gynecologists' Committee on Health Care for Underserved Women in collaboration with committee members Colleen McNicholas, DO, MSCI, Serina Floyd, MD, MPH, and Melissa Kottke, MD, MPH, MBA.

Caring for Patients Who Have Experienced Trauma

Safety Planning with Patients

- Developing a safety plan

- Resources for creating a plan



Safety Plan List

- Birth certificates, Social Security cards, and passports or immigration papers for you and your children
- Health insurance cards for you and your children
- Financial records, including recent bank statements and stocks or mutual fund records
- Housing documents, such as rental agreements, mortgage statements, or the title or deed

- Your most recent credit report
- The title or lease paperwork for your car
- Statements for any retirement plans
- The past two years' tax returns
- Court papers or orders
- Driver's license or photo ID

Referrals to Support Services



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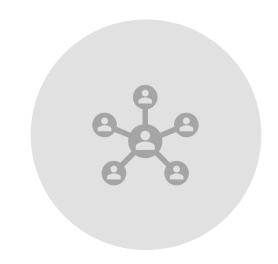
- Types of support services available

- How to make effective referrals



Collaboration with Community Resources





- PARTNERING WITH LOCAL ORGANIZATIONS

- BUILDING A REFERRAL NETWORK

Special Considerations

- Pregnant women
- Adolescents

Legal and Ethical Considerations

- Reporting laws
- Ethical dilemmas (patient autonomy)

Enhancing Patient Access to Services





- IMPROVING ACCESS TO RESOURCES

- TECHNOLOGY AND TELEHEALTH OPTIONS

Resources for Patients

- Helplines and hotlines

- Support groups and shelters

- Telehealth services

- Online resources and apps

Resources for Healthcare Providers

- Professional organizations
 ACOG
- CDC
- Educational materials and tools



The American College of Obstetricians and Gynecologists

WOMEN'S HEALTH CARE PHYSICIANS

COMMITTEE OPINION

Number 518 • February 2012

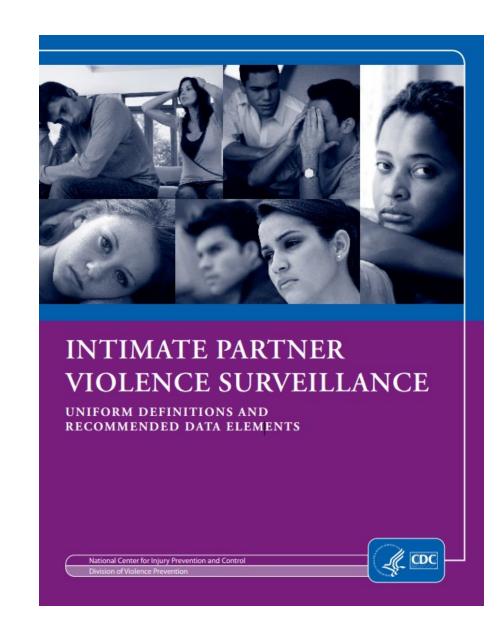
Committee on Health Care for Underserved Women

This information should not be construed as dictating an exclusive course of treatment or procedure to be followed.

Intimate Partner Violence

Reaffirmed in 2022





Resources

NATIONAL DOMESTIC VIOLENCE HOTLINE

1-800-799-SAFE

Resources

RAINN

Rape Abuse & Incest National Network

1-800-656-HOPE

Resources

- National Coalition Against Domestic Violence <u>www.ncadv.org</u>
- National Network to End Domestic Violence <u>www.nnedv.org</u>
- Office on Violence Against Women www.usdoj.gov/ovw
- National Resource Center on Domestic Violence www.nrcdv.org



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We'll take your questions at the break...

