

# Screening for Intimate Partner Violence

AUDREY JIRICKO, MD



# Definition of Intimate Partner Violence (IPV)

A serious **preventable** public health problem

Includes:

Physical violence

Sexual violence

Stalking and Psychological aggression

by a current or former intimate partner

**Breaking  
Bias**

# WHY DOES HE DO THAT?

INSIDE THE MINDS

of ANGRY and

CONTROLLING MEN

Lundy Bancroft



# Health Risks - Intimate Partner Violence

- Depression
- PTSD
- Anxiety disorder
- Suicidal behavior
- Poor self-esteem
- Substance use disorders
- Eating disorders/obesity

(Trickett P, 2005) (Sickel AE, 2002;7) (JC., 2002;359) (JM., 1999;14) (Campbell JC, Mental and physical health effects of intimate partner violence on women and children., 1997) (Silverman ME, 2010;13)

# Health Risks - Intimate Partner Violence

- Sexually transmitted infections
- Pelvic inflammatory disease
- Pregnancy problems – preterm birth, low birth weight, teen pregnancy
- Unintended pregnancy
- Neurological disorders
- Gastrointestinal disorders
- Chronic pain

(Wingood GM, 2001) (Letourneau EJ, 1999:9)

(El-Mohandes AA, 2011;15) (Kiely M, 2010;115)

(Shah PS, 2010;19) (Hathaway JE, 2000;19)

(Campbell JC, 1997;20) (Coker AL, 2000;9)

(Coker AL D. K., 202;23)

# Cost of IPV

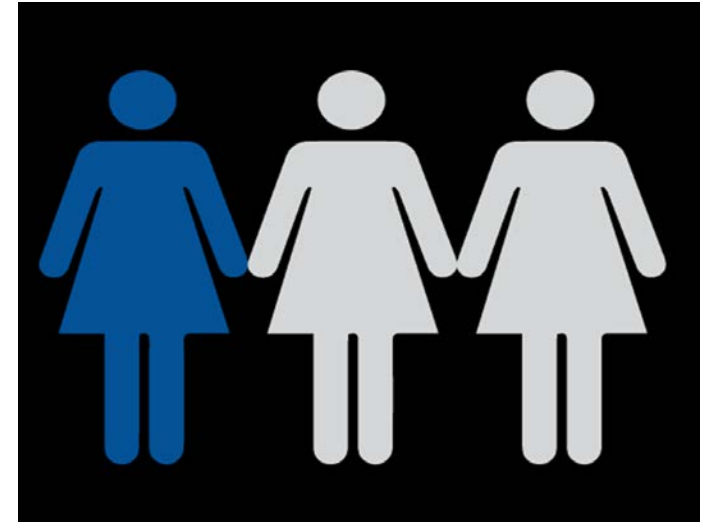
Group Health Cooperative Seattle (2005)

## Costs aggregated over 3-year period

- \$4,826 never-abused women
- \$6,931 women with emotional abuse only
- \$9,210 women with physical and emotional abuse
- \$9,673 women with physical, sexual, and emotional abuse



U.S. Preventive Services Task Force (USPSTF) recommends clinicians **screen** women of childbearing age (14-46) for intimate partner violence and provide or refer women who screen positive to intervention services.  
(Grade B Recommendation 2013)



# Recommend screening all women of childbearing age

- American Academy of Family Physicians
- American Academy of Neurology
- American Academy of Pediatrics
- American Association of the Colleges of Nursing
- American College of Emergency Physicians
- **American College of Obstetricians and Gynecologists**
- American Medical Association
- American Psychiatric Association
- National Association of Social Workers
- U.S. Preventive Services Task Force



## Start conversation, Review health impact, Refer to resources



# Screening for IPV

- Consider posting signs indicating “we respect privacy/confidentiality and speak with each patient alone for at least part of the visit”  
<https://nchdv.confex.com/nchdv/2012/webprogram/Paper10560.html>
- Post signs in restrooms -Utah Domestic Violence Coalition LinkLine, Futures Without Violence cards, Power and Control Wheel
- **Only screen when patient is alone**



**Framing statement: “1 in 3 women in Utah experience very unhealthy relationships with an intimate partner in their lifetime. Since this can affect health (and children’s health) and identifying the problem and offering resources can decrease violence and improve health outcomes, we ask all female patients about this issue.”**

**Disclosure on reportable events: “By law, some things are required to be reported to police or DCFS such as:**

**If we are treating you for an injury today caused by someone else**

**If you tell me children are experiencing or witnessing abuse**

**If you tell me your partner has threatened you with a lethal weapon”**

## Screening Questions (written or verbal)

- Are you in a relationship now in which you are often *emotionally hurt* by your partner such as being frequently *insulted, put down, or controlled*?  
(No, Yes, Prefer not to answer, Already addressed with my provider)
- Are you in a relationship now in which you are *physically hurt* by your partner such as being *hit, shoved, slapped, kicked, or choked*?  
(No, Yes, Prefer not to answer, Already addressed with my provider)
- Are you in a relationship now in which you are *forced* by your partner to do anything *sexually* that you do not want to do?  
(No, Yes, Prefer not to answer, Already addressed with my provider)
- *[If no to all the above]* Have you ever been in a relationship with a partner who hurt you *emotionally, physically, or sexually* in any of these kinds of ways or who otherwise scared you?  
(No, Yes - but has been dealt with previously, Yes – and is something I may still be dealing with.

<https://www.cdc.gov/violenceprevention/pdf/ipv/ipvandsvscreening.pdf>

# Send Supportive Message

“You are not alone”

“You and your children do not deserve this”

“This is a safe place for you to get help”

“There is help available”

# What NOT to say.....

- "You should leave now."
  - Escape can be extremely difficult and dangerous
- Don't imply that leaving an abusive relationship is easy.
  - There are no quick, easy solutions.
- Don't recommend marital counseling to someone who is being physically or emotionally abused.
  - It can be dangerous for the victim.
- "How about I talk to your [abusive] partner for you?"
- "You should stay for your children's sake."

<https://www.futureswithoutviolence.org/userfiles/file/Fact%20sheet%20on%20Children%20Exposed%20to%20OIPV%202013.pdf>

## Document resource information given

- Domestic Violence Crisis Hotline (Link Line): **800-897-LINK (5465)**  
<http://udvc.org/>

- Referral to Advocate

UDVC member program/Social worker/Care manager RN/Mental Health Integration/Behavioral Health/EAP preferably trained in **trauma focused care** <http://trcutah.org>

- Statewide 24-hour Rape and Crisis Hotline: **1-888-421-1100**
- Utah 211: **2-1-1** <http://www.uw.org/211/resources/resources-by-county/>
- Patient Safety Plan [http://www.ncdsv.org/images/DV\\_Safety\\_Plan.pdf](http://www.ncdsv.org/images/DV_Safety_Plan.pdf)
- Shelter

Start conversation, Review health impact, Connect with resources





# iCentra/Cerner Electronic Health Record Needs (already accomplished in Epic)

- Confidential Note Type/Not in Patient Portal Note
  - These notes do NOT go to Patient Portal/Open Notes
  - Should NOT be released with Release of Information unless specific permission from patient
- Problem/Diagnosis (intimate partner violence, domestic violence, history of...)
  - The diagnosis/E codes/ICD-9 should NOT show up on the Problem/Diagnosis list in the Patient Portal/Open Notes
  - Should NOT appear in Billing
  - Should NOT be included in After Visit Summaries
  - Should NOT be included in Explanation of Benefits
- Photos
  - Intimate partner violence/sexual assault photos should be stored confidentially, not viewable in patient portal, not viewable to providers not directly involved in care and blocked from Release of Information

[https://www.ted.com/talks/leslie\\_morgan\\_steiner\\_why\\_domestic\\_violence\\_victims\\_don\\_t\\_leave](https://www.ted.com/talks/leslie_morgan_steiner_why_domestic_violence_victims_don_t_leave)

## Kaiser Family Violence Prevention

<https://www.youtube.com/watch?v=uocoMbCg9N8&feature=youtu.be>



# Outcomes Associated with Adverse Childhood Events (ACEs)

[“Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults,”](#)  
published in the *American Journal of Preventive Medicine* in 1998, Volume 14, pages 245–258.

Alcoholism and alcohol abuse  
**Chronic obstructive pulmonary disease (COPD)**  
Depression  
Fetal death  
Health-related quality of life  
Illicit drug use  
**Ischemic heart disease (IHD)**  
**Liver disease**  
Risk for intimate partner violence  
Multiple sexual partners  
Sexually transmitted diseases (STDs)  
Smoking  
Suicide attempts  
Unintended pregnancies  
Early initiation of smoking  
Early initiation of sexual activity  
Adolescent pregnancy

- <https://trcutah.org/aces-research-%26-resources>

## ADVERSE CHILDHOOD EXPERIENCES IMPACT ADULTHOOD

If ACEs could be eliminated...

61↑

Work productivity could increase by 61%.

67↓

Suicide & life dissatisfaction could decrease by 67%.

56↓

Anxiety could be reduced by 56%.

Source: <http://www.aceinterface.com>

CHILD ABUSE & NEGLECT ARE PREVENTABLE ACEs.