

Domestic Violence and Healthcare Providers From feeling helpless to helping

Creagh Boulger, MD, FACEP, FAIUM

Associate Director, Division of Ultrasound
Associate Professor
Department of Emergency Medicine
The Ohio State University Wexner Medical Center

THE OHIO STATE UNIVERSITY
WEXNER MEDICAL CENTER

MedNet21
Center for Continuing Medical Education

 Becky is a 55 year old female. She and her family have been patients of yours for more than a decade. You have noticed Becky has called in several times for work excuses and has gained about 20 pounds. She seems much less engaging than usual. • Carrie is a 23y single female she is entering her 3rd trimester of pregnancy. You notice she has had several ER visits for fetal checks during this pregnancy including a couple of falls.

1 in 4

Pandemic within a pandemic





The Cost

- 8 Million work days lost
- •\$8.3 billion/year
- Lost Jobs



The Health

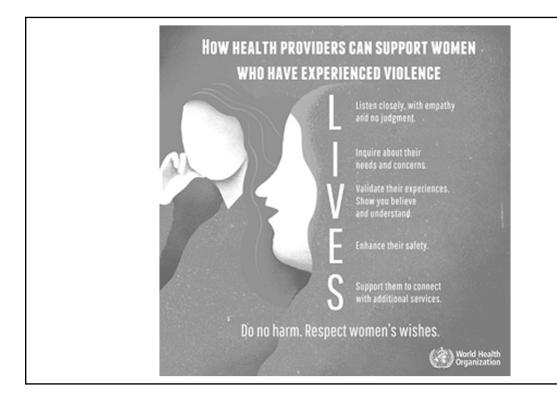
- STIs often untreated or delayed diagnosis
- Depression
- Suicide
- Pregnancy loss
- Addiction



Subtle Signs

- Frequent falls or injuries "clumsy"
- Non specific abdominal pain
- New or increased alcohol or substance use
- Poor sleep
- Chronic Pain
- Somatization

- High Stress
- Delays in care
- Petechiae
- Subconjunctival Hemorrhage
- Defensive wounds (mid arm)
- Burns



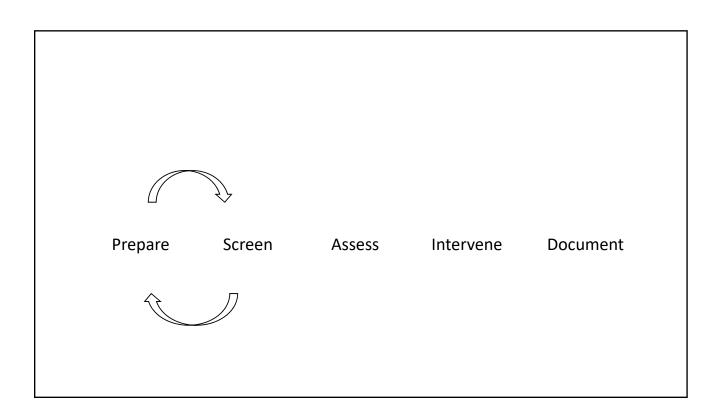
If you are in a safe environment write your name with a BLACK marker if you are not RED

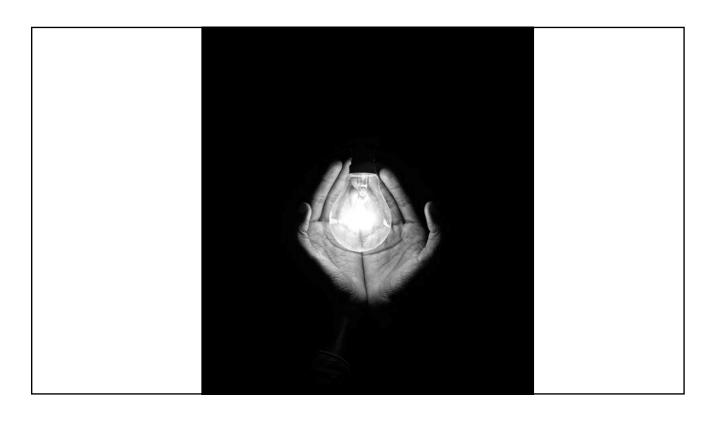












Have Resources

- The National Domestic Violence Hotline—A non-profit organization that provides real-time crisis intervention, information, and referrals
 as well as on-line resources.
- 1-800-799-SAFE (7233)
- The National Sexual Assault Hotline—A confidential, secure service that provides live help through the Rape, Abuse, and Incest National Network
 - 1-800-656 HOPE (4673)
- The National Coalition Against Domestic Violence—An advocacy organization working to prevent domestic violence and empower those
 affected.
- The Academy on Violence & Abuse—An interdisciplinary organization of healthcare professionals dedicated to making violence and abuse a core component of medical and related professional education and clinical care.
- Futures Without Violence (formerly Family Violence Prevention Fund)—Works to prevent violence within the home and in the community.
- The National Network to End Domestic Violence—A social change organization, is dedicated to creating a social, political, and economic environment in which violence against women no longer exists.
- The National Resource Center on Domestic Violence—A comprehensive source of information for those wanting to educate themselves and help others on the many issues related to domestic violence.
- US Department of Justice Office on Violence Against Women—The Office on Violence Against Women (OVW) provides federal leadership
 in developing the national capacity to reduce violence against women and administer justice for and strengthen services to victims of
 domestic violence, dating violence, sexual assault, and stalking.
- The Women's Law Organization—Provides legal advice and advocacy based on state statutes.



Domestic Violence and Healthcare Providers From feeling helpless to helping

Arianna Galligher, LISW-S

Associate Director
STAR Trauma Recovery Center &
Partial Hospitalization & Intensive Outpatient Programs
The Ohio State University Wexner Medical Center

MedNet21
Center for Continuing Medical Education



Leaving is complicated

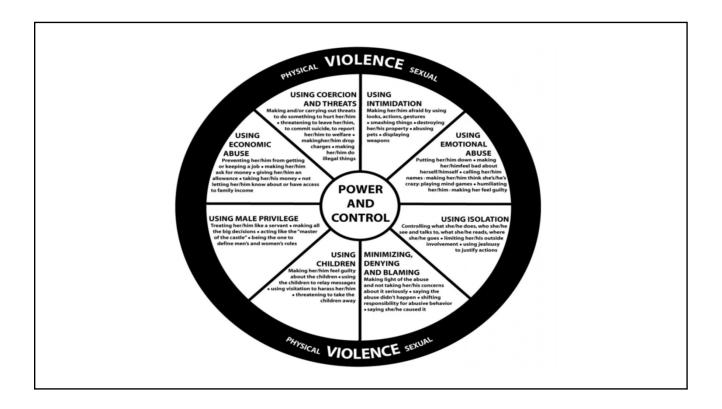
• On average, it takes 7 attempts before an individual is able to end an abusive relationship and stay away.



- For providers, <u>empathy</u> is key to maintaining compassion while someone is trapped in this pattern of leaving and returning.
- Challenge inaccurate and unhelpful beliefs:
 - The person doesn't want help
 - The person just wants attention
 - The person likes "playing the victim"
 - The person is at fault because they went back to a bad situation
 - The person is a "lost cause"



#WhyIStayed



Barriers to Leaving

- Fear that partner will find them, and that violence will escalate
- Lack of other support from family or friends
- Difficulty navigating the challenges of single parenting/fear of losing custody
- Fear that partner will hurt others/pets in order to punish them for leaving
- Lack of financial resources
- No safe place to go

Barriers to Leaving

- Belief that abuse is their fault
- Guilt that violence "goes both ways"
- Lack of knowledge of available resources for support
- Religious or cultural beliefs
- Belief that two parent household is preferable in spite of abuse
- Romanticizing the "good times"/clinging to hope that partner will change

How to Help

- Communicate and demonstrate compassion and non-judgment
- Let the person know:
 - That you care about them
 - That you're a safe person to talk to
 - That you respect them and their autonomy to choose what they want to do next
 - That you'll help them find resources and supports, regardless of whether they choose to stay or leave
- Help the person locate a safe, private way to communicate if they're in trouble
- Offer to help the person develop their own safety plan and/or escape plan