





Intimate partner violence

Intimate partner violence (IPV) is violence perpetrated by a current or former partner. It is a major national health and welfare issue that can have lifelong impacts for victims and perpetrators. It is also a highly gendered issue with many more women being victims than men. Globally, one third of all women are a victim of IPV at some point in their lives, and, in Australia, on average one woman is killed by her partner every week. GPs play a critical role in the identification, management and referral of patients affected by intimate partner violence, and it is an important topic for supervisors to discuss with registrars.

TEACHING AND LEARNING AREAS 	<ul style="list-style-type: none"> • Epidemiology of, and high-risk groups for, domestic and family violence • Signs and symptoms of IPV in general practice • How to opportunistically ask about IPV in routine consultations and other appropriate clinical scenarios • How to respond to a disclosure of IPV • The 5 R's – recognize, respond, risk assess, review, refer • Safety and risk assessment • Safety planning – immediate and future • Mandatory reporting • Support services – Victims Support Scheme • Managing patients who are perpetrators of IPV • Appropriate documentation • Local support and referral sources 				
PRE-SESSION ACTIVITIES	<ul style="list-style-type: none"> • Read the 2014 AFP article Family violence across the life cycle 				
TEACHING TIPS AND TRAPS 	<ul style="list-style-type: none"> • It is essential to opportunistically raise the issue of IPV to increase rates of identification - on average, a full-time GP sees around 5 women a week who have been subjected to IPV in the past 12 months • In general, women are open to being asked about IPV • Appropriate times to ask about IPV include antenatal visits, mental health consultations and women's health checks • Ask accompanying partners to wait in the waiting room before asking about IPV • Always respect a women's wishes and never pressure her to leave her partner • Leaving and planning to leave is the riskiest time for being killed • Violence often starts or escalates during pregnancy • Assess whether the perpetrator has access to a weapon • The patient is the expert in their own safety and their assessment of the situation should be taken into account when making a professional judgement about risk • The safety of children should always be carefully assessed • Apart from the Northern Territory there is no mandatory reporting of IPV. If a woman is in imminent danger and declines a referral to the police, legal advice should be sought from your MDO and she should be referred to the police to safeguard her wellbeing 				
RESOURCES 	<table border="1"> <tbody> <tr> <td data-bbox="335 1731 430 1877">Read</td> <td data-bbox="430 1731 1497 1877"> <ul style="list-style-type: none"> • WHO resource Understanding and addressing violence against women • RACGP Family Violence Toolkit • Chapter 2 & 3 RACGP White Book • It's time to talk GP toolkit </td> </tr> <tr> <td data-bbox="335 1877 430 1937">Watch</td> <td data-bbox="430 1877 1497 1937"> <ul style="list-style-type: none"> • Dr Jennifer Neil GPSA webinar 2020 </td> </tr> </tbody> </table>	Read	<ul style="list-style-type: none"> • WHO resource Understanding and addressing violence against women • RACGP Family Violence Toolkit • Chapter 2 & 3 RACGP White Book • It's time to talk GP toolkit 	Watch	<ul style="list-style-type: none"> • Dr Jennifer Neil GPSA webinar 2020
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FOLLOW UP/ EXTENSION ACTIVITIES 	<ul style="list-style-type: none"> • The PACTS package has 6 learning modules available • Undertake a role play with the registrar so they can practice asking using the LIVES approach to a disclosure of IPV: <ul style="list-style-type: none"> Listen – listen to her story, don't rush or pressure her to disclose Inquire - about needs and concerns; remain patient-centred Validate – assure her that it is not her fault and that violence is never ok Enhance safety – Assess her safety and safety plan with her Support – Connect her to information and local services 				



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Clinical Reasoning Challenge

Melissa is a 34-year-old female who presents with chronic headaches to your practice. You have seen her numerous times and have fully investigated her headaches. Despite your best efforts she isn't getting better so you wonder if there is something else going on. She does not have any children.

QUESTION 1. What are some questions that you might use to determine if her symptoms are due to intimate partner violence? List as many as appropriate.

QUESTION 2. Melissa admits that things have been very difficult with her husband. What are FOUR types of abuse that you will ask her about?

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QUESTION 3. What are the MOST IMPORTANT questions to ask to assess her safety? List as many as appropriate.

QUESTION 4. You decide to safety plan with Melissa. What are FIVE things that you will discuss with Melissa to enhance her safety?

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ANSWERS

QUESTION 1

What are some questions that you might use to determine if her symptoms are due to intimate partner violence? List as many as appropriate.

- How are things at home?
- Do you feel safe at home?
- How are things with your partner?
- What happens when you argue?
- Are you afraid of your partner?
- In my practice I see a lot of women who are subjected to violence at home, is this happening to you?

QUESTION 2

Melissa admits that things have been very difficult with her husband. What are FOUR types of abuse that you will ask her about?

- Physical abuse
- Emotional/psychological abuse
- Sexual abuse
- Technology abuse
- Financial abuse
- Coercive control

QUESTION 3

What are the MOST IMPORTANT questions to ask to assess her safety? List as many as appropriate.

- Has he ever strangled you?
- Has he ever used a weapon? Is there a weapon in the house?
- Are you pregnant?
- Have you left him or are planning to leave?
- Is the violence escalating?

QUESTION 4

You decide to safety plan with Melissa. What are FIVE things that you will discuss with Melissa to enhance her safety?

- Safe location and method of travel if needing to urgently leave
- Bag of clothes kept somewhere safe
- Money and important documents or copies kept somewhere safe
- Access to a spare set of car keys
- Let friend or family member know what is happening and make code word with them
- Call 000 in an emergency
- Phone numbers for domestic violence support services