Domestic Violence Intervention
A Trauma-Informed Approach

Every patient encounter has the opportunity

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Missing opportunities…
Objective of Today

1. Enhance your knowledge base on the issue of DV & health consequences; recognition of common injury patterns/behaviours
2. Share how you can incorporate violence prevention into your medical practice; differential diagnoses
3. Provide and Recommend Response/Referral & Resources Options
DEFINITION

*a complicated phenomenon that cannot simply be narrowed to one form of abuse

Domestic Violence is the **intentional** attempt, act or intent of someone within a relationship, where the relationship is characterized by intimacy, dependency or trust, **to gain power and control** over another.

Through neglect, intimidation, threat, coercion, inducement of fear or by inflicting pain.
Prevalence & Trends
Police-Reported Cases in Alberta:

*Conservative Figures*

- Third highest rate of police-reported family & intimate partner violence in Canada
- Four out of five victims of intimate partner violence were women:
  - The rate of physical assaults increased since 2014; the rate of reported intimate partner sexual violence was 7% higher and 15% higher than in 2010
- Third highest rate of family violence against seniors; women were most often victimized by a spouse, while men were most often victimized by an adult child
- Adult victims of childhood physical and/or sexual abuse had a higher prevalence of self-reported mental or psychological limitations than non-victims (10% versus 4%), and were more likely to report poor physical health (14% versus 9%)

Source: Statistics Canada.  
"Family violence in Canada: A statistical profile, 2015" 
by Marta Burczycka and Shana Conroy  
Canadian Centre for Justice Statistics. Release date: Feb 16, 2017
• Almost one in ten Aboriginal people reported having experienced both physical & sexual abuse before they turned 15.
• Aboriginal women were about three times as likely to report being a victim of spousal violence as non-Aboriginal women, while Aboriginal men were twice as likely as their non-Aboriginal counterparts.
• Half of Aboriginal victims of spousal violence reported experiencing what may be considered the most severe forms of spousal violence (i.e., having been sexually assaulted, beaten, choked or threatened with a gun or knife).

Domestic Conflict in 2015

7 of every 100 calls we received were related to domestic conflict

TOTAL DOMESTIC CONFLICT CALLS: 18,993
SEX OF VICTIMS: 20% man, 80% woman

TOTAL DOMESTIC VIOLENCE CALLS: 3,282

2015 calls compared to the average:

- 10% all domestic conflict calls
- 24% involving physical violence
- 23% involving property theft or damage

If you experience any of these in your relationship, ask for HELP!

fear, physical assault, intimidation, powerlessness, threats, isolation,
threats, sexual assault, no access to money, deprived of food, water or basic care

24 hour Family Violence Helpline: 403-234-7233 - CPS Non-Emergency Line: 403-266-1234
If in immediate danger: 9-1-1
CPS responds to over 18,000 domestic conflict calls each year:

- Verbal altercation/police presence requested
- Property stolen or damaged
- Other offences committed (non-violent)
- Violence towards a person

For perspective:
That's more than 2x the number of break and enters and 3x the number of stolen vehicles reported last year.

There were 3,870 domestic conflict calls in 2016 where violence had occurred.

So far in 2017:

- 34% domestic violence calls, compared to the 5-year average
- Domestic property crimes, compared to the 5-year average: 3%
- Total domestic conflict calls, compared to the 5-year average: 1%

One third of domestic violence victims are between the ages of 18 and 29.
‘P.R.A.I.S.E’

- Prevalence of Abuse and Intimate Partner Violence Surgical Evaluation (P.R.A.I.S.E.): rationale and design of a multi-center cross-sectional study
  BMC Musculoskeletal Disorders 2010, 11:77
  http://www.biomedcentral.com/1471-2474/11/77

- Prevalence of abuse and intimate partner violence surgical evaluation (PRAISE) in orthopaedic fracture clinics: a multinational prevalence study
  Lancet 2013; 382: 866–76Published OnlineJune 12, 2013
  http://dx.doi.org/10.1016/S0140-6736(13)61205-2
Intimate Partner Sexual Violence

- common expression of partner violence
  - likely to be raped many times
- more likely to experience **forced oral & anal sex**
  - physical violence also possible
- More often includes as **strangulation** as a means of overpowering the victim
‘Women also reportedly face intimate partner sexual assault at a rate 36 times higher than men, and remain at higher risk of family-related homicide relative to men’

Clinical Implications & Strategies for Intervention

‘Domestic Violence is a health issue’

Recognize, Educate, Respond and Refer…then Respect the Choice They Make

IF YOU DON’T THINK OF THE DIAGNOSIS, YOU CANNOT MAKE THE DIAGNOSIS
Recognize: ‘Intersections of Harm & Health’

1. DV leading to adverse health effects
2. DV worsening already compromised health and
3. A woman’s illness increases their dependency on abusive partners, thereby lengthening the duration of the intimate partner violence exposure’

10.1177/1077801208324529 http://vaw.sagepub.com
Where adult abuse is occurring…

children are at increased risk of being abused

…and mothers of abused children are likely experiencing abuse as well
Recognize:

The interaction among genetics, physiology and experience

Felitti & Anda, 2010

www.acestudy.org
Impact: Later in Life

- Alcoholism and alcohol abuse
- Liver disease
- Smoking
- Chronic obstructive pulmonary disease (COPD)
- Unintended pregnancies
- Depression
- Fetal death
- Health-related quality of life
- Illicit drug use
- Ischemic heart disease
- Hypertension

- Risk for intimate partner violence
- Multiple sexual partners
- Sexually transmitted diseases (STDs)
- Suicide attempts
Recognize Injury Patterns and Patterns of Injury

Photos used with permission:
Domestic Conflict Unit DV Presentation-CPS

• Evidence of pulled hair

The “Shut-up” Blow

Injury Patterns Among Female Trauma Patients: Recognizing Intentional Injury
Crandall ML, Nathens AB, Rivara FP
J Trauma. 2004;57:42-45
Mild Traumatic Brain Injury

*L.O.C. not required

- One of the most undiagnosed, prevalent, and serious consequences of Intimate Partner Violence
- “Subtle Concussions”/ Soft Neuro Signs
- Second Impact Syndrome Risk
More than two-thirds of victims are strangled at least once

{ the average is 5.3 times per victim }

- Injuries identified in non-fatal strangulation cases were similar to injuries found in fatal IPV strangulation assaults (Hawley et al, 2001)

- under-assessed & under-appreciated by health care (Sheridan & Nash, 2007)

https://www.strangulationtraininginstitute.com/resources/library/strangulation-information-graphic/
EVALUATION of ACUTE ADULT, NON-FATAL STRANGULATION

1. Evaluate carotid and vertebral arteries for injuries
2. Evaluate bony/cartilaginous and soft tissue neck structures
3. Evaluate brain for anoxic injury

Bill Smock, MD and Sally Sturgeon, DNP, SANE-A
Office of the Police Surgeon, Louisville Metro Police Department

Endorsed by the National Medical Advisory Committee: Bill Smock, MD, Chair; Cathy Baldwin, MD; William Green, MD; Dean Hawley, MD; Ralph Riviello, MD; Heather Rozzi, MD; Steve Stapczynski, MD; Ellen Tailliaferro, MD; Michael Weaver, MD
Once Identified or Suspected

- **Complete** Physical Examination
- Ancillary lab tests are usually not helpful...though X-rays may show unsuspected old #s
- **Clinical Indicators from Medical Record:**
  - Previous medical visits for injuries that were unexplained or for which illogical explanations were provided
  - Extensive negative work-ups for functional complaints, such as chronic abdominal or pelvic pain...should prompt you to ask about DV
- **Thorough documentation** using correct forensic terminology
Indicators of violence alone are typically a poor way of determining the presence of violence or its adverse health consequences.
Indirect Question

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If you were experiencing violence in your home, would you know where to get help``
“We know that violence and the threat of violence in the home is a problem but many people of all ages are afraid or uncomfortable talking about it so I’ve started asking all my patients about it.

Abuse can take many forms: physical, emotional, sexual, financial, spiritual, neglect or stalking.

I’m asking so that I might provide some help to you and your family.

☐ Is there anyone close to you who sometimes make you feel unsafe or scared?
Clinicians should aim for a therapeutic relationship with survivors that does not demand disclosure or action, but instead empowers and educates the patient.

Disclosing Intimate Partner Violence to Health Care Clinicians -- What a Difference the Setting Makes: A Qualitative Study

Jane Liebschutz; Tracy Battaglia; Erin Finley; Tali Averbuch

BMC Public Health. 2008
Respond:

- Supportive not curative
- Validate their experience
- **Find out what they wish to do**
- Try to ascertain their level of risk for serious harm

"No one deserves to be abused"

"You’re not alone"

"You're not to blame"

"There is help"
Sharing of information without consent

**Imminent Danger:**
Three criteria need to be met…keep a high threshold

1. Serious bodily harm or death
2. Likely to happen soon
3. Clarity…knowledge of the intended victim(s)

**Mandatory Reporting:**
- GSW/Stabbing;
- Child Youth & Family Enhancement Act/
  Protection of Persons in Care
Refer:
On-Site &/or Community

Safety plans for you and your children:
- Keep emergency numbers safe.
- Be ready to leave quickly (e.g., car keys, documents, keys).
- Make a plan for your family’s safety.
- Change travel routes and routines.
- Let people know you are not feeling safe.
- Make your e-mail names anonymous.
- Change all your passwords.
- Turn off the location functionality on social networking sites.
# Domestic Violence

## What is Domestic Violence?

Domestic violence means the attempt, act or intent of someone within a relationship, where the relationship is characterized by intimacy, dependency or trust, to intimidate either by threat or by the use of physical force on another person or property. The purpose of abuse is to control and/or exploit through neglect, intimidation, inducement of fear or by inflicting pain. Abusive behaviour can take many forms including: verbal, physical, sexual, psychological, emotional, spiritual, economic and the violation of rights. All forms of abusive behaviour are ways in which one human being is trying to have control and/or exploit or have power over another.

## Domestic Violence Resources

Need text.

+ / - open and close headings

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<tr>
<th>Policies, Guidelines, Protocols, Procedures</th>
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<td>Education</td>
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<td>Environmental Scan</td>
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<td>Presentations, Conferences &amp; References</td>
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One phone call: **Even before they leave your office**
- 24/7
- 403-234-SAFE (7233)
- “Family Violence Help Line”
- Toll-free: 1-866-606-7233

- A “gateway” to the entire network of services and support.
- For victims, families &/or professionals
- Rural Referral available

**Website:**
[www.connectnetwork.ca](http://www.connectnetwork.ca)
Resources

Was this resource information helpful?

Aboriginal Services
Addictions
Basic Needs
Child and Youth
Community Resource Centres
Counselling
Domestic Violence Outreach Support
Financial Support
Gender and Sexual Diversity
Housing
Ethno-culturally Diverse Services
Legal

What If I’ve Been Sexually Assaulted?

We are here to help, please call us.

If you are experiencing or have questions about sexual abuse and sexual assault please call...

1.403.237.5888
1.877.237.5888
Toll Free in Alberta

If you are experiencing or have questions about domestic and relationship abuse please call...

1.403.234.7233
(SAFE)
1.866.606.7233
Toll Free in Alberta
CSART

http://insite.albertahealthservices.ca/11397.asp
Male Victims of Abuse

Male Domestic Abuse Outreach Program

Calgary Counselling Centre
Needs of colleagues

Workplace Health & Safety presentation on how to help a victim of DV
Defining Success

• Your job is not to ‘fix’ domestic violence nor ‘rescue’ and most importantly not to tell victims what to do
• You can help victims by understanding their situation and recognizing how abuse can impact health and risk behaviours
• Success is measured by your efforts to reduce isolation and improve options for safety

‘Ask, Listen, Believe & Give Options and then Respect the Choices They Make’
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<tr>
<th>Patients</th>
<th>Health System</th>
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<tr>
<td>• Reduces re-injury, pain &amp; suffering</td>
<td>• Cost saving: decreased use of services and/or aligned to appropriate service use</td>
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<td>• Breaks the cycle of intergenerational trauma, ACE’s</td>
<td>• Stronger partnerships, expanded referral networks</td>
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<td>• Demonstrates a support of healthy relationships</td>
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<td>• Promotes health (adult &amp; pediatric populations)</td>
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Questions?

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References


Other On-Line Resources

Older Adult Knowledge Network
How Canadian Law Addresses Elder Abuse

DV & Children Tutorial

Responding to Domestic Violence in Clinical Settings

http://www.dveducation.ca/

Behind Closed Doors
26 min video