

Family abuse – key points

- ► Family violence includes:
 - child abuse,
 - ▶ intimate partner violence,
 - ▶ elder mistreatment.
- ▶ Estimating the true prevalence of family abuse is challenging, because it occurs in the privacy of the home and not all cases come to medical or professional attention.
- ▶ All forms of family abuse can have serious physical and mental health consequences.
- ▶ It is important that the family physician be alert to signs that might suggest family violence and understand approaches to managing the problem.

Essentials of family medicine [edited by] Philip D. Sloane [et al.]. – 6th ed.







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Family abuse – disclaimer

▶ Please check your own country's recommendation regarding family violence!

Child abuse – key points

- Child abuse includes:
 - physical abuse,
 - sexual abuse,
 - psychological abuse,
 - ▶ neglect.
- ▶ Child maltreatment often presents with symptoms of inattention, school failure, disruptive symptoms, anxiety, depression, failure to thrive, and a broad range of somatic symptoms (ranging from the physical pain of a broken bone to psychogenic symptoms such as recurrent abdominal pain).

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Intimate partner violence (IPV) – key points

- ▶ Intimate partner violence includes physical violence, sexual violence, stalking and psychological aggression (including coercive tactics) by a current or former intimate partner (i.e., spouse, boyfriend/girlfriend, dating partner, or ongoing sexual partner).
- ► A common problem with serious physical and mental health consequences for victims and their children.
- Although women are most commonly affected, IPV affects both men and women and occurs in married and unmarried couples, affecting both heterosexual and same-sex couples.

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Intimate partner violence (IPV) – key points

- ► The Centers for Disease Control and Prevention (CDC) defines IPV according to the following categories:
 - Physical violence;
 - Sexual violence;
 - Stalking;
 - Psychological/emotional violence.

Intimate Partner Violence Surveillance: Uniform Definitions and Recommended Data Elements, Version 2.0

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IPV - physical violence

- **Physical violence** is defined as the intentional use of physical force with the potential for causing death, disability, injury, or harm.
- ▶ Physical violence includes, but is not limited to: scratching, pushing, shoving, throwing, grabbing, biting, choking, shaking, hair-pulling, slapping, punching, hitting, burning, use of a weapon (gun, knife, or other object), and use of restraints or one's body, size, or strength against another person.
- ▶ Physical violence also includes coercing other people to commit any of the above acts.

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IPV - sexual violence

- ▶ Sexual violence is defined as a sexual act that is committed or attempted by another person without freely given consent of the victim or against someone who is unable to consent or refuse.
- ▶ It includes forced or alcohol/drug facilitated penetration of a victim; forced or alcohol/drug facilitated incidents in which the victim was made to penetrate a perpetrator or someone else; nonphysically pressured unwanted penetration; intentional sexual touching; or non-contact acts of a sexual nature.
- Sexual violence can also occur when a perpetrator forces or coerces a victim to engage in sexual acts with a third party.

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IPV – stalking

- ➤ Stalking is a pattern of repeated, unwanted, attention and contact that causes fear or concern for one's own safety or the safety of someone else (e.g., family member, close friend).
- Criteria for stalking victimization: Victim must have experienced multiple stalking tactics or a single stalking tactic multiple times by the same perpetrator and
 - ▶ felt fearful or
 - believed that they or someone close to them would be harmed or killed as a result of the perpetrator's behavior

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IPV - psychological aggresion (1)

- ▶ Psychological/emotional violence is use of verbal and non-verbal communication with the intent to:
 - harm another person mentally or emotionally and/or
 - exert control over another person.
- In some cases may not be perceived as aggression because they are covert and manipulative in nature.
- Is an essential component of IPV.
- Frequently co-occurs with other forms of IPV and research suggests that it often precedes physical and sexual violence in violent relationships.
- ▶ Acts of psychological aggression can significantly influence the impact of other forms of intimate partner violence (e.g., the fear resulting from being hit by an intimate partner will likely be greater had the intimate partner previously threatened to kill the victim).

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IPV - psychological aggresion (2)

- ▶ The impact of **psychological aggression** by an intimate partner is every bit as significant as that of physical violence by an intimate partner.
- ▶ Further work needs to be done related to the measurement of psychological aggression, particularly how to determine when psychologically aggressive behavior crosses the threshold into psychological abuse.
- Psychological/emotional abuse can include, but is not limited to, humiliating the victim, controlling what the victim can and cannot do, withholding information from the victim, deliberately doing something to make the victim feel diminished or embarrassed, isolating the victim from friends and family, and denying the victim access to money or other basic resource.

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Elder mistreatment – key points

► Elder mistreatment is:

- intentional actions that cause harm or create a serious risk of harm (whether or not harm is intended) to a vulnerable elder by a caregiver or other person who stands in a trust relationship to the elder or
- failure by a caregiver to satisfy the elder's basic needs or to protect the elder from harm.
- ► Elder mistreatment includes physical abuse, psychological abuse, sexual abuse, financial exploitation, and neglect.
- Elder mistreatment has been linked to adverse health outcomes, including increased depression, hospitalizations, nursing home placement, and mortality.

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USPSTF recomendation

Population	Recommendation	Grade
Women of reproductive age	The USPSTF recommends that clinicians screen for intimate partner violence (IPV) in women of reproductive age and provide or refer women who screen positive to ongoing support services. See the Clinical Considerations section for more information on effective ongoing support services for IPV and for information on IPV in men.	В
Older or vulnerable adults	The USPSTF concludes that the current evidence is insufficient to assess the balance of benefits and harms of screening for abuse and neglect in all older or vulnerable adults. See the Clinical Considerations section for suggestions for practice regarding the I statement.	ı

Screening for Intimate Partner Violence, Elder Abuse, and Abuse of Vulnerable Adults US Preventive Services Task Force Final Recommendation Statement JAMA. 2018;320(16):1678-1687. doi:10.1001/jama.2018.14741

USPSTF recomendation - RF

- ► Factors that increase risk of IPV: exposure to violence as a child, young age, unemployment, substance abuse, marital difficulties, and economic hardships.
- ▶ USPSTF did not identify any risk assessment tools that predict greater likelihood of IPV in populations with these risk factors.
- ▶ Risk factors for elder abuse include isolation and lack of social support, functional impairment, and poor physical health.
- ► For older adults, lower income and living in a shared living environment with a large number of household members (other than a spouse) are associated with an increased risk of financial and physical abuse.

Screening for Intimate Partner Violence, Elder Abuse, and Abuse of Vulnerable Adults US Preventive Services Task Force Final Recommendation Statement JAMA. 2018;320(16):1678-1687. doi:10.1001/jama.2018.14741

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USPSTF recomendation - Screening Tests

- ▶ The following instruments accurately detect IPV among adult women:
 - ► Humiliation, Afraid, Rape, Kick (HARK);
 - ▶ Hurt, Insult, Threaten, Scream (HITS);
 - Extended-Hurt, Insult, Threaten, Scream (E-HITS);
 - Partner Violence Screen (PVS);
 - ▶ Woman Abuse Screening Tool (WAST).

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HARK

Many different questions can be used to explore.

The HARK questions are one model, developed for use in general practice.

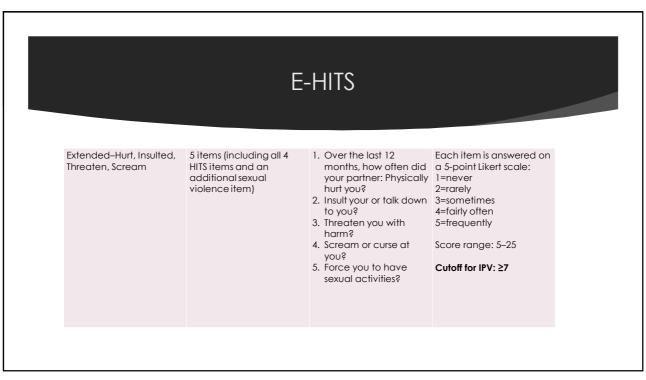
- · H HUMILIATION
 - In the last year, have you ever been humiliated or emotionally abused in other ways by your partner or ex-partner
- · A AFRAID
 - In the last year, have you been afraid of your partner or ex-partner?
- R RAPE
 - In the last year have you been raped or forced to have sexual activity of any kind
- K KICK
 - In the last year, have you been kicked, hit slapped or otherwise physically hurt by your partner

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HITS

HITS Tool for Intimate Partner Violence Screening: Please read each of the following activities and fill in circle that best indicates the frequency with which you partner acts in the way depicted. How often does your partner? Rarely Sometimes Fairly often Never Frequently 1. Physically hurt you \mathbf{o} \mathbf{o} \mathbf{o} \mathbf{o} \mathbf{o} 2. Insult or talk down to you \mathbf{o} 3. Threaten you with harm \mathbf{o} o o o \mathbf{o} 4. Scream or curse at you \mathbf{o} \mathbf{o} o Scoring Each item is scored from 1-5. Thus, scores for this inventory range from 4-20. A score of greater than 10 is considered positive.

Sherin KM, Sinacore JM, Li XQ, Zitter RE, Shakil A. HITS: a shortdomestic violence screening tool for use in a family practice setting. Fam Med 1998; 30(7):508-12.



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Partner Violence Screen 3 items that assess physical IPV in the last Each item is answered 1. Have you been hit, kicked, punched, or yes/no otherwise hurt by someone within the past year? If so, by year and current safety Cutoff for IPV: Affirmative response to ≥1 items whom? (assuming person harming or making the respondent feel unsafe is 2. Do you feel safe in your current relationship? a current or past partner) 3. Is there a partner from a previous relationship who is making you feel unsafe now?

WAST

Woman Abuse Screening Tool 8 items assess physical and emotional IPV

- 2. Do you and your partner work out arguments with...
 3. Do arguments ever result in Item 2 is answered with great
- you feeling down or bad about yourself?
- 4. Do arguments ever result in hitting, kicking or pushing? Items 4–8 are answered with
- 5. Do you ever feel frightened often, sometimes, or never by what your partner says or does?
- 6. Has your partner ever abused you physically?
- 7. Has your partner ever abused you emotionally?
- 8. Has your partner ever abused you sexually?

1. In general, how would you describe your relationship? Item 1 is answered with: A lot of tension some tension, or no tension

> difficulty, some difficulty, or no difficulty

Responses recoded such that higher score indicates higher frequency of experiences scores should be summed for individuals who answer all

Cutoff for IPV: None provided

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USPSTF recomendation - Interventions

- No studies definitively identified which intervention components resulted in positive outcomes.
- However, based on the evidence from 3 studies, effective interventions generally included ongoing support services that focused on counseling and home visits, addressed multiple risk factors (not just IPV).
- Studies that included only brief interventions and provided information about referral options were generally ineffective.

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WHO recomendation

- ▶ Health care providers should be alert to the clinical features associated with child maltreatment and associated risk factors and assess for child maltreatment without putting the child at increased risk.
- ▶ Health care providers should not use a universal screening approach (e.g. a standard instrument, set of criteria, or questions asked of all children in health care encounters) to identify possible child maltreatment.

WHO Guidelines for the Health Sector Response to Child Maltreatment, WHO 2019

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WHO recomendation

- ▶ Health care providers should consider exposure to child maltreatment when assessing children with conditions that may be caused or complicated by maltreatment, in order to improve diagnosis/identification and subsequent care, without putting the child at increased risk.
- ▶ Written information on child maltreatment should be available in health-care settings in the form of posters, and pamphlets or leaflets (with appropriate warnings about taking them home in case that could compromise safety).

WHO Guidelines for the Health Sector Response to Child Maltreatment, WHO 2019

WHO good practice statement

Health-care providers should seek explanations for any injuries or symptoms that may be caused by physical, sexual, emotional abuse or neglect from both the parent or the carer, and the child or adolescent in an open and non-judgemental manner.

Health care providers should:

- ▶ Be alert for an implausible, inadequate or inconsistent explanation for any of the alerting features. All of them can be a sign for child maltreatment however none of them provides sufficient proof for the occurrence of child maltreatment.
- ▶ Consider child maltreatment when maltreatment is one possible explanation for the alerting feature or is included in the differential diagnosis.
- Suspect child maltreatment when there is a serious level of concern about the possibility of child maltreatment.
- **Exclude** maltreatment when a suitable explanation is found for alerting features.

WHO Guidelines for the Health Sector Response to Child Maltreatment, WHO 2019

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WHO recomendation

https://www.who.int/publications/i/item/who-guidelines-for-the-health-sector-response-to-child-maltreatment

WHO Guidelines for the Health Sector Response to Child Maltreatment, WHO 2019

Domestic violence and COVID-19

What makes physical abuse more of a risk during coronavirus?

- Stay-at-home orders kids are at home, families may feel crowded, frustrated that they can't escape one another. At the same time, they're isolated from extended family and friends and can no longer participate in many enjoyable and relaxing activities.
- ▶ Threat of COVID-19 itself. People are afraid of catching it, especially if they are essential workers and cannot work from home. Families may have a relative who has COVID-19 and requires hospitalization, but they can't visit or provide support in person.
- ▶ Financial stress can factor in, too, especially if someone in the home has been furloughed or laid off.
- ▶ It's not clear if domestic violence would start for the first time under these circumstances. If a person has been abusive in the past, they might become more violent because of the added stressors.
- PTSD
- ▶ Alcohol
- **.**..

Coronavirus and Domestic Violence: What You Should Know. Jackie Campbell, Ph.D., R.N. Johns Hopkins Medicine, published July 6, 2020.