PRIMARY CARE: DOMESTIC VIOLENCE AND ABUSE (DVA)

A DISCUSSION OF THE CHALLENGES FACED DURING THE COVID-19 PANDEMIC

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PRIMARY CARE: DOMESTIC VIOLENCE AND ABUSE

- 1. How to identify patients who might be at risk of DVA
- 2. How to ask about DVA in lockdown
- 3. How to Safety Net
- 4. How to Access Support

2013 CROSS GOVERNMENT DEFINITION OF DOMESTIC VIOLENCE AND ABUSE

- ► Any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality.
- ► The definition includes 'honour' based violence , female genital mutilation and forced marriage.
- ► (Note Theresa May's bill extends this definition to include financial and non physical manipulative behaviours)

How to identify patients who might be at risk of DVA

Remember that DVA is no respecter of gender, age, sexuality, socio-economic status etc.

Consider situations such as:

- an elderly patient isolating with a son or daughter
- a disabled patient back with family
- a student in a controlling religious community
- an individual who you know has been struggling is now even more isolated with their controlling partner.

In particular: think about households isolating with children.

How to identify
Patients who might be at risk of DVA

Look for Clues in the Medical Summary

Victims / Survivors will often have normalised the abusive relationship, so health presentations will commonly be as "Conversion" symptoms.

In particular think about asking the question where the medical summary contains a past history of:

- Mental Health Presentations:
 - Alcohol / drug dependence
 - Depression and suicidality
 - Post traumatic stress disorder
- Recurrent unexplained physical symptoms in any system:
 - Migraine, bowel disturbance, atypical chest pain etc
 - Urogynaecological in women including recurrent STI, UTI, dyspareunia and dysfunctional uterine bleeding

How to identify Patients who might be at risk of DVA

Consider the reason given for requesting a consultation:

- Has the consultation been requested by the patient or another (possibly controlling) household member?
- Perpetrators will often request a consultation for themselves to discuss mental health issues such as depression, anxiety or anger management.

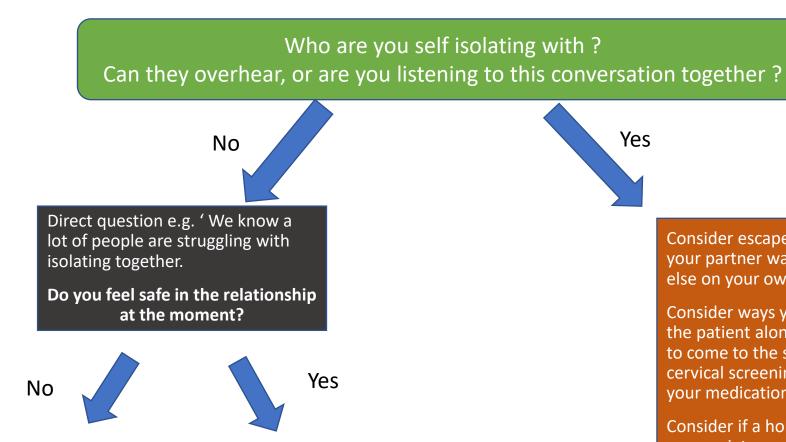
How to ask about DVA in lockdown

1.Asking if the perpetrator can overhear may well escalate the risk to the victim

2. The question needs to be direct and to include the words 'safe' or 'frightened'.

3.On the plus side, being in lockdown may allow the question to be asked more freely

How to ask about DVA in lockdown



Remember:

Disclosure is a

process – not a

one off event

Move to

safety

Netting

Consider escape response e.g. 'if you or your partner want to talk about anything else on your own please call back '

Consider ways you might be able to see the patient alone e.g. "would you be able to come to the surgery as we are restarting cervical screening / we need bloods for your medication review"

Consider if a home visit might be appropriate-may be worth liaising with Health Visitor / School if children in the house, or District nurses if elderly.

How to ask about DVA in Lockdown



Validate the Response.



The perpetrator may have been saying for many years that no one will believe you and there is no help available

How to Safety Net

Assess immediate risk with 3 Questions:

- What are you afraid might happen?
- What has the abuser threatened?
- What about threats to the children?

If the perpetrator has threatened to kill the patient/children/themselves then there is a significant risk of homicide and the Police should be contacted directly on 999

As a rule survivors will have been living with the situation for some time and will underplay the risk.



If the risk is not immediate, but there is potential for the situation to escalate or change:

- Offer a referral to the local Support Service and complete a minirisk assessment (next slide)
- Inform the patient about the 'Silent Solution'.
 - When you call 999 the operator will ask which emergency service is required.
 - o If you can't answer you will be transferred to a silent solution system.
 - o You will then hear an automated message which will ask you to press 55.
 - o If you press 55 your call will be transferred to your local Police Force.
- **Suggest a code word** that can be used when calling the surgery or support worker. If the patient becomes fearful for the safety of themselves or the family they should have a code word e.g. blue and if they phone and use this word the support system will alert the police.
- Advise about the safelives website .
 https://www.womensaid.org.uk/covid-19-coronavirus-safety-and-support-resources/

How to Safety Net

Southside IRIS Mini Risk Assessment

Tick the box if the factor is present. Use the comment box to expand on the answers	YES	NO	Don't Know	Comments
Have you separated or tried to separate from the abuser ?				
Does the abuser constantly text, call, stalk or harass you ?				
Are you pregnant or recently had a baby				
Is the abuse happening more often?				
Does he/she try and control everything you do?				
Does the abuser do anything of a sexual nature				
In the last 3 months has there been an incident that has resulted in injury?				

How to Access Support For Survivors:



BANES

- IRIS Referral form on Ardens
- Advocate Educator:
 - Jo Cosgrove 07929 350497 (M); <u>Jo.cosgrove@south-side.org.uk</u>; <u>Jo.cosgrove@nhs.net</u>

Wilts

- Splitz- Referral forms on website https://splitz.org
- Wilts SPA team available 8am-5pm 01225 775276.

Police on 101

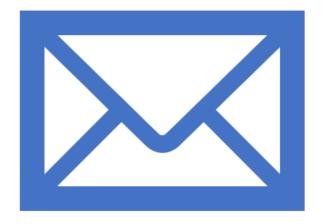
Social Services Teams -Adult and Children

Womens Aid

https://www.womensaid.org.uk/covid-19-coronavirus-safety-and-support-resources

How to Access Support For Perpetrators

BANES: RSVP 01225329411



National helpline – RESPECT 0845 1228609

SUMMARY OF KEY POINTS • Have DVA on your radar

- Check for clues in medical summary
- Who made the appointment and what reason was given?
- Asking when perpetrator present is likely to escalate risk
- Ask a direct question about safety / fear
- Validate response
- Safety net with 3 questions to assess immediate risk
- Offer referral to local support service
- Inform about silent support on 999 and consider code word
- Help is Available

Useful follow up;

https://www.womensaid.org.uk/covid-19-coronavirus-safety-and-support-resources

Nadine Burke-Harris, TED-talk 2014 'How childhood trauma affects health across a lifetime