



ISMA
INDIANA
STATE
MEDICAL
ASSOCIATION

JUST ASK

ASK THE QUESTION **END THE SILENCE**

A reference guide to domestic violence intervention for Indiana physicians

Make information accessible

Make domestic violence information available to your patients confidentially. Restrooms are ideal locations for this information. Even when abusers accompany victims to appointments, they rarely go with them to the restroom. This information should include local shelter phone numbers and a safety plan. It should be printed on something small enough to be tucked inside a person's clothing. The ISMA offers small resource cards that provide local numbers, along with a safety plan. Plastic holders for the cards also are available from the ISMA.

Screen universally

Make a point to ask all patients if they have been physically abused. Explain that you routinely ask this question. You might say, "Because violence is so common, I routinely ask about it. Have you been hit, kicked or shoved by someone?"

However, a brief risk assessment may help you better assess a patient's safety using these five questions*:

1. Has the physical violence increased in frequency or severity over the past six months?
2. Has your partner ever used a weapon or threatened you with a weapon?
3. Do you believe your partner is capable of killing you?
4. Have you ever been beaten by your partner while you were pregnant?
5. Is your partner violently and constantly jealous of you?

A "yes" answer to at least three of these questions indicates that your patient is in danger. You may also want to follow up with the more detailed questions in the Danger Assessment Questionnaire.

**Snider et al. Intimate Partner Violence: Development of a Brief Risk Assessment for the Emergency Department. Academic Emergency Medicine 2009;16:1208-1216.*

Resources for doctors and patients

Adult Protection Services

State hotline
City/County Building
(800) 992-6978

Indiana Coalition Against Domestic Violence

(317) 917-3685
24-hour hotline: (800) 332-7385

Appoint a staff member to assist

Designate one of your staff members as a domestic violence coordinator for your office. After you identify victims and their at-risk children, this person can provide a copy of the Danger Assessment Questionnaire. Your assistant also can help patients in filling out the form and ensure that it becomes a part of the patient's record.

Document injuries

Document all injuries every time you see a patient. Always document the patient's story and your opinion, even if a patient denies being abused. Identify the abuser by name and address if possible. Photograph all injuries. This information can later be used in court to establish a pattern of abuse. This is one of the most important things physicians can do to help domestic violence victims.

Supply safety information

Give identified victims safety information before they leave your office. This should include local shelter phone numbers and a safety plan. It may also include the National Domestic Violence Hotline number, (800) 799-SAFE (7233). Note in the record that the patient was given this information.

Make reports

Physicians are required by law to report child and dependent adult abuse. Report child abuse to county Child Protection Services offices or law enforcement. Report dependent adult abuse to Adult Protection Services, the Indiana Department of Human Services or law enforcement. Work with your patients to gain their confidence, so that they will report domestic violence on their own.

Follow up

Continue to follow up with patients who have confided abuse to you. Ask, "Have you been hit or scared since the last time I saw you?" Identify at-risk children. Include all this information in the patient's medical record.

Just ask

Please don't make excuses. A busy day is not a good reason for leaving this question out of your routine history. Your patients and their children are depending on you.

Safety Plan

- Establish a safety signal to alert a neighbor to call the police.
- Have a bag packed including the following items:
 - Change of clothes for you and your children
 - Address book with phone numbers of friends, relatives, shelters, doctors, lawyers, etc.
 - Money (include change for pay phone)
 - Extra keys to house and car
 - Emergency medicines
 - Important papers (checking and savings account numbers, lease, No Violent Contact Order/ Protective Order, birth certificates, Social Security numbers for you, your children and partner, ADC/SSI/Medicaid cards, etc.)

REMEMBER: Avoid long-distance calls if possible (these calls can be traced). Advise school system, court and welfare not to give out any information.

Danger Assessment Questionnaire*

Abuse between partners and ex-partners can lead to severe injury, or even murder.** While you cannot predict what will happen, answering the questions below can help you think about whether you may be in danger of being harmed again, or of harming yourself. Your partner may not always be abusive or violent, but violence tends to recur and to be more dangerous each time it reoccurs.

If you answer yes to even one of the questions below, you may be in danger and should take measures to protect yourself. Review the information from your doctor or nurse. Make a safety plan and call support services for counseling and legal options.

1. Has the physical violence increased in frequency and/or severity over the past year?
 Yes No

2. Has a weapon or threat with a weapon been used?
 Yes No

3. Does your partner ever try to choke you?
 Yes No

4. Is there a gun in the house or does your partner own a gun?
 Yes No

5. Has your partner ever forced you into sex when you did not wish to do so?
 Yes No

6. Does your partner use drugs? By drugs, I mean "uppers" or amphetamines, speed, angel dust, cocaine, "crack," street drugs, heroin or mixtures.
 Yes No

7. Does your partner threaten to kill you or is capable of killing you?
 Yes No

8. Is your partner drunk every day or almost every day? (In terms of quantity of alcohol.)
 Yes No

9. Have you left your partner after living together during the past year?
 Yes No

10. Is your partner unemployed?
 Yes No

(continued on next page)

11. Does your partner control most of your daily activities? For instance, does your partner tell you with whom you can be friends, how much money you can take shopping or when you can take the car?
 Yes No

12. Has your partner ever beat you while you were pregnant?
 Yes No

13. Is your partner violently and constantly jealous of you?
For instance, does your partner say, "If I can't have you, no one can"?
 Yes No

14. Has your partner avoided being arrested for domestic violence?
 Yes No

15. Do you have a child that is not the biological child of your partner?
 Yes No

16. Does your partner threaten to harm your children?
 Yes No

17. Have you ever threatened or tried to commit suicide?
 Yes No

18. Has your partner ever threatened or tried to commit suicide?
 Yes No

19. Does your partner follow or spy on you, leave threatening notes or messages, destroy your property, or call you when you don't want them to?
 Yes No

* Questionnaire adapted from Campbell, JC, (2004), "Danger Assessment."
Retrieved May 28, 2008, from www.dangerassessment.org. Used with permission.

** Homicide is the 16th leading cause of death in the U.S.