THE VALUE OF INTERVENING IN INTIMATE PARTNER VIOLENCE

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ADDRESSING GAPS IN IPV LITERATURE

- IPV primary contributor to burden of disease locally & globally
- Lack of evidence-based approaches
- Project evaluation: implementation of a South African protocol for IPV care (Martin & Jacobs, 2003)
- Reporting on benefits of intervention from the survivor’s perspective
- Addresses significant gap in IPV literature
PROJECT DESIGN

- 2 urban and 3 rural primary care facilities
- 168 women living with IPV were recruited for a comprehensive intervention
- Action research project
- Mixed methods
- 74% follow-up interviews
PARTICIPANTS’ FEEDBACK

• Extremely beneficial (63%) Beneficial (76%)

• At all stages women wanted recognition and support from health care providers

• Without pressure for a specific course of action

• Participants needed health care providers to be caring (emotional labor)

• not just to work through a series of tasks
Cues → Screening Question

If yes

Clinical

Refer to IPV Champion

Legal → Psychological → Social

The Therapeutic Group Process

Support Group
ROLE OF PRIMARY CARE PROVIDER

CUES
- Vague non-specific symptoms
- History of mental illness
- Symptoms of depression
- Feeling anxious / dizzy / “thinking too much”
- Chronic pain syndromes
- Assault, trauma
- Repeated sexually transmitted infections
- ARV preparation, HIV+
- Suspected alcohol or substance abuse

Asks, "Are you unhappy in your relationship?"
If “Yes”

CLINICAL
1. Check for sexually transmitted infections / HIV
2. Document & care for injuries (use J88)
3. Check for pregnancy, offer contraception, termination, sterilisation
IPV CHAMPION

- interest/desire to work with IPV
- empathy and good listening skills
- respect for client confidentiality and autonomy
- efficient case manager
- collaborative approach to problem-solving
- effective multi-disciplinary team player
- good networker to promote support group project
COMPREHENSIVE IPV CARE

- **Clinical**: prevent unwanted pregnancy, STIs, HIV, care for injuries, forensic documentation

- **Psychological**: identifying and attending to mental health problems responsibly

- **Social**: support groups, social workers, safety planning, information regarding local resources

- **Legal**: referral for protection order – more effective than criminal charge, rights advocacy
## RANGE OF ABUSE

<table>
<thead>
<tr>
<th>Type of Abuse</th>
<th>%</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional</td>
<td>82.7</td>
<td>139</td>
</tr>
<tr>
<td>Physical</td>
<td>68.5</td>
<td>115</td>
</tr>
<tr>
<td>Sexual</td>
<td>42.9</td>
<td>72</td>
</tr>
<tr>
<td>Financial</td>
<td>42.9</td>
<td>72</td>
</tr>
<tr>
<td></td>
<td>N = 168</td>
<td>%</td>
</tr>
<tr>
<td>------------------------------------------</td>
<td>---------</td>
<td>-----</td>
</tr>
<tr>
<td>Firearm in house?</td>
<td>102</td>
<td>60.7</td>
</tr>
<tr>
<td>Threatened to kill children?</td>
<td>91</td>
<td>54.2</td>
</tr>
<tr>
<td>Capable of killing?</td>
<td>77</td>
<td>45.8</td>
</tr>
<tr>
<td>Police intervention necessary?</td>
<td>54</td>
<td>32.1</td>
</tr>
<tr>
<td>Has abuse escalated in severity</td>
<td>35</td>
<td>20.8</td>
</tr>
</tbody>
</table>
## ADHERENCE TO CARE PLAN

<table>
<thead>
<tr>
<th>Action plan</th>
<th>% taking planned action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wants HIV test</td>
<td>55.4</td>
</tr>
<tr>
<td>Wants rapid plasma reagin test</td>
<td>40</td>
</tr>
<tr>
<td>Wants pregnancy test</td>
<td>100</td>
</tr>
<tr>
<td>Intends to obtain protection order</td>
<td>100</td>
</tr>
<tr>
<td>Intends to lay charge</td>
<td>84.2</td>
</tr>
<tr>
<td>Referral to legal aid NPO</td>
<td>46.7</td>
</tr>
<tr>
<td>Referral to counseling NPO</td>
<td>37.5</td>
</tr>
<tr>
<td>Referral to psychiatric nurse</td>
<td>48.3</td>
</tr>
<tr>
<td>Referral to social worker</td>
<td>95.8</td>
</tr>
</tbody>
</table>
## USEFULNESS OF INTERVENTION

<table>
<thead>
<tr>
<th>Intervention</th>
<th>Helpful</th>
<th>Unhelpful</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safety assessment</td>
<td>80.1% (n = 85)</td>
<td>5.7% (n = 6)</td>
</tr>
<tr>
<td>Safety plan</td>
<td>75.5% (n = 77)</td>
<td>8.8% (n = 9)</td>
</tr>
<tr>
<td>Protection order</td>
<td>82.1% (n = 23)</td>
<td>14.3% (n = 4)</td>
</tr>
<tr>
<td>Legal aid NPO</td>
<td>57.2% (n = 4)</td>
<td>14.3% (n = 1)</td>
</tr>
<tr>
<td>Counseling NPO</td>
<td>75% (n = 9)</td>
<td>8.3% (n = 1)</td>
</tr>
<tr>
<td>Psychiatric nurse</td>
<td>92.8% (n = 26)</td>
<td>7.1% (n = 2)</td>
</tr>
<tr>
<td>Social worker</td>
<td>69.6% (n = 16)</td>
<td>13% (n = 3)</td>
</tr>
<tr>
<td>Laying criminal charge</td>
<td>93.8% (n = 15)</td>
<td>6.3% (n = 1)</td>
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</tbody>
</table>
IMPROVED MENTAL STATE

Improved:
• Mood
• Sociability
• Sense of well-being

Decreased:
• Anxiety
• Suicidal ideation
• Alcohol abuse
IMPROVED MENTAL STATE

“I used to feel sad all the time. I used to feel useless but now I feel responsible. I can take care of my children now. When I was drinking every day I would take them to a woman to look after them. Now I enjoy my kids and my life more … since I went to press charges we have not been together and he has not hurt me either.”
“I was a wreck, but when I left her office I could face the world squarely again. She taught me things about myself I did not know. My problems were not solved then and there but I can now notice what I did not notice before and I feel better about myself as a person.”
“Before I met the researcher, I always felt alone. Secondly when I’m talking to my kids I’m always fighting because I think I am somebody useless. After I talk with her I do not fight so much. I try not to be aggressive. I try to sit down and talk with my children.

At least they listen to me – they appreciate me being kind.”
“Our relationship is going much better than before. I discussed certain things with him and he understood me. I am drinking much less than before and going to evening songs again. I never wanted to work on Saturdays but now I am.”
“There has been great change in her life. The intervention was very useful because the results have made her feel very happy. The situation at home has improved very much. Her husband has even been working in their garden and helping the children with homework – never before.”
CONCLUSION

Clear benefit from IPV intervention:

1. Empathic, non-judgmental, constructive care

1. Comprehensive assessment and management of clinical, mental, social and legal aspects.
REFERENCES


Joyner K & Mash B. (in press) Recognizing Intimate Partner Violence in Primary Care: Western Cape, South Africa. PLoS ONE.

