

## Family Violence in the Healthcare Setting

**Citation** Garrubba M & Yap G. 2016. Family Violence in the Healthcare Setting: Evidence Snapshot. Centre for Clinical Effectiveness, Monash Health, Melbourne, Australia.

## Background

Monash Health have formed a taskforce to progress work to implement the Strengthening Hospital Responses to Family Violence Project. The Centre for Clinical Effectiveness was asked to scope the evidence base for resources related to health services and the way in which they recognise, respond to and manage family violence in both patients and staff.

## Objectives

To identify available evidence about how hospitals respond to family violence, both for patients and staff.

## Methods

### Inclusion/Exclusion Criteria

The following search framework was developed and used to identify the evidence.

**Table 1. Inclusion/Exclusion criteria**

<b>Population</b>	<b>Include:</b> Families, Women, Men, Children, Elderly
<b>Interventions/Concepts</b>	<b>Include:</b> Interventions relevant to health services to assist in recognition, response and management of family violence
<b>Context</b>	<b>Include:</b> In-patient, hospital setting. <b>Exclude:</b> Other healthcare settings e.g. GP or community.
<b>Types of evidence</b>	<b>Include:</b> All types of evidence including original research, reviews, and grey literature.
<b>Limits</b>	<b>Date:</b> 2013 – onwards. <b>Language:</b> Publications in English.

## Search strategy

Once the inclusion and exclusion criteria were clearly defined, a systematic search was conducted. Search terms relevant to Family Violence, Domestic Violence, Hospital and Healthcare Setting were used to search the Cochrane Library, Google and the following organisational websites: The Health Foundation, WHO, The Beryl Institute, The Kings Fund, Sax Institute, Health Systems Evidence, Health Evidence Canada.

## Results

The search of the literature identified multiple resources about family violence in the healthcare setting. Table 2 lists relevant resources by document type and year.

The highlight from the literature search is the work undertaken by the “[Strengthening Hospitals Responses to Family Violence \(SHRFV\)](#)” project team. This [program](#) is based on the most up to date evidence both nationally and internationally in the area of family violence and provides multiple resources to implement the program in the hospital setting. The [program](#) includes:

- A project management guide
- Tools for implementation including: project plans, communication plans, presentation outlines and risk management
- Training material and;
- Communication material

The SHRFV initiative has been evaluated and this [report](#) outlines:

- the context of the project
- how outcomes were met for policies, procedures and guidelines development; capability – competence of staff within the hospital environment to identify and respond; improved data collection; linkages with organisations that provide family violence services; identification and response to victims identified within the health service; increased knowledge and skills of key staff; building the evidence base on prevalence rates and presentations to hospitals; and transferability of the program and
- enabling factors, challenges and recommendations for future work.

The evaluation report states that the program was developed based on a review of the system and the literature conducted by the Department of Health and that the Department also prepared a detailed account of family violence models from the US, NZ, UK, Canada and Other Australia states particularly NSW, however references for these reports have not been provided and attempts to obtain them have been unsuccessful.

The search also identified [Evidence Based Guidelines](#) from the National Institute of Health and Care Excellence (NICE), NSW Health and WA Health; [Peak Body](#) documentation from WHO's Global Plan of Action on violence against women, girls and children; and the Royal Commissions summary and recommendations into family violence. The [peer reviewed literature](#) centers around screening of women when they enter the hospital setting and these links have been provided in the table below. Links to current statistics on family and domestic violence from the [Australian Bureau of Statistics](#) is also included in Table 2.

**Table 2: Results**

<b>Strengthening Hospitals Responses to Family Violence</b>
<p><b>SHRFV Service model documents</b></p> <ul style="list-style-type: none"> <li>• <a href="#">Project Overview</a></li> <li>• <a href="#">Strengthening hospital responses to family violence Project management guide</a></li> <li>• <a href="#">Project material, including tools, training and communication materials</a></li> <li>• <a href="#">Strengthening Hospital Responses to Family Violence – Stage One Evaluation Report</a> <ul style="list-style-type: none"> <li>○ <a href="#">Technical Report</a></li> </ul> </li> <li>• <a href="#">The Royal Women's submission to the Royal Commission into Family Violence</a></li> </ul>
<b>Evidence Based Clinical Guidelines</b>
<ul style="list-style-type: none"> <li>• <a href="#">Domestic violence and abuse: multi-agency working PH50</a> NICE Guideline (2014)</li> <li>• Quality Standards: <a href="https://www.nice.org.uk/guidance/qs116">https://www.nice.org.uk/guidance/qs116</a> NICE Guideline Quality Standards</li> <li>• <a href="#">Review of Interventions to Identify, Prevent, Reduce and Respond to Domestic Violence</a>, British Columbia Centre of Excellence for Women's Health (2013)</li> </ul>
<b>Peak Body organisation reports – International and Australian</b>
<ul style="list-style-type: none"> <li>• <a href="#">Family Violence Assessment and Intervention Guideline: Child abuse and intimate partner violence</a> – New Zealand (2016)</li> <li>• <a href="#">Global plan of action</a> – World Health Organisation (2015)</li> <li>• <a href="#">Royal Commission into Family Violence: Summary and Recommendations</a> – Australian (2016)</li> <li>• Meta-evaluation of existing interagency partnerships collaboration and coordination: Australia's National Research Organisation for Women's Safety Limited (2016) <ul style="list-style-type: none"> <li>○ <a href="#">evaluation key findings</a></li> </ul> </li> </ul>

- [evaluation final report](#)
- [Family Violence – Assessment and Response Protocol 2015](#) - Bendigo Health (2015)
- [Response to family violence in the workplace 2015](#) - Bendigo Health (2015)
- [QLD Not Now Not Ever](#) – Queensland Taskforce (2015)
- [The critical role of language services for CALD women affected by family violence](#) – Translators and Interpreters Australia (2015)
- [Change the story: A shared framework for the primary prevention of violence against women and their children in Australia](#) – Our Watch (2015)
- [Australian Medical Association – supporting patients experiencing family violence](#) (2015)
- [Health Interventions for Family and Domestic Violence: A Literature Review](#) NSW (2014)
- [WA Health Guidelines for responding to Family and Domestic Violence](#) (2014)

#### Peer Reviewed Literature

- [Outcomes of domestic violence screening at an acute London trust: are there missed opportunities for intervention?](#) (2016)
- [Integrating Intimate Partner Violence Assessment and Intervention into Healthcare in the United States: A Systems Approach](#) (2015)
- [Intimate partner violence during pregnancy: Maternal and neonatal outcomes.](#) (2015)
- [The health systems response to violence against women](#) Lancet. (2015)
  - Discusses case studies and importance of strengthening health systems to enable providers to address violence against women including protocols, capacity building, effective coordination between agencies and referral networks
- [Screening women for intimate partner violence in healthcare settings](#) Cochrane Review (2015)
  - The evidence shows that screening increases the identification of women experiencing IPV in healthcare settings.
- [A Comparison of the Types of Screening Tool Administration Methods Used for the Detection of Intimate Partner Violence: A Systematic Review and Meta-Analysis](#) (2015)
- [Factors in implementing and sustaining a domestic violence routine enquiry pathway in healthcare settings: an overview of systematic reviews](#) (2105)
- [Screening and Intervention for Intimate Partner Violence in Healthcare Settings: Creating Sustainable System-Level Programs](#) (2015)
- [Domestic violence screening and intervention programmes for adults with dental or facial injury](#) (2015)
- [Responding to domestic violence in acute hospital settings](#) (2014)
- [Health Interventions for Family and Domestic Violence: A Literature Review](#) (2014)

#### Australia Bureau of Statistics – Current Australia Data

- [Personal Safety Data 2012](#) (Most up to date)
- [Defining the Data Challenge for Family, Domestic and Sexual Violence, 2013](#)
- [Directory of Family and Domestic Violence Statistics, 2013](#)

## Conclusion

The SHRFV is an up to date, comprehensive resource suitable for Monash Health to consider for implementation. The evidence behind the initiative claims to be evidence based however the reviews of systems and literature conducted by the Department of Health have not been reviewed by CCE. A rapid review of the literature by the CCE team also identified guidelines, organisational reports and peer reviewed literature which are reflected in all SHRFV documentation.