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Patient Education: Sexual Violence, Intimate Partner Violence, and Healthy Relationships

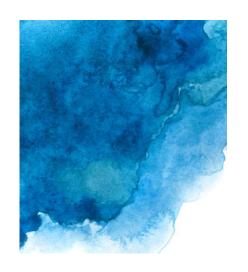
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PATIENT EDUCATION: SEXUAL VIOLENCE, INTIMATE PARTNER VIOLENCE, AND HEALTHY RELATIONSHIPS

Site: Evergreen Family Health

Student: Elise Prehoda, MS3

Rotation: March/April 2022

Mentor: Dr. Paul Reiss

PROBLEM IDENTIFICATION AND DESCRIPTION OF NEED

- Every 68 seconds, someone in the United States experiences sexual assault.³
- 1 in 3 women and 1 in 4 men* in the United States have experienced some form of physical violence from an intimate partner.⁴
- The total estimated number of annual survivors of domestic and sexual violence in VT equals 41,829 individuals as of 2021²
 - This includes 30,944 adults and 10,885 children per year
 - These numbers reflect approximately 6.7% of the Vermont population annually
- These numbers are likely underestimated due to lack of survivor presentation
- Despite these numbers, in 2021 only 7,430 individuals presented for assistance with domestic and sexual violence related issues²
- Primary care offices are often a lone point of safe contact for survivors

^{*}Aggregate data not currently available for individuals who identify outside of the gender binary.

PUBLIC HEALTH COST AND UNIQUE COST CONSIDERATIONS IN HOST COMMUNITY

- Vermont Network Against Domestic and Sexual Violence 2021 Economic Impact Report revealed¹:
 - total cost of public expenditure in VT related to domestic and sexual violence= \$111,082,996.17 annually
 - total cost of health care in VT related to domestic and sexual violence= \$35,931,171.76 annually
 - average annual public cost for VT Forensic Nursing Program= \$181,219
- Public expenditure estimates include costs of healthcare, victim support services, law enforcement, the judiciary system, and the corrections system as they pertain to survivors¹
- Although Evergreen Family Practice is physically located in Williston, VT, they serve a vast number of patients throughout Chittenden County and surrounding areas

COMMUNITY PERSPECTIVE ON ISSUE AND SUPPORT FOR PROJECT

How would the existence of patient education materials related to sexual and intimate partner violence at your primary care office effect your willingness to discuss these topics with your physician?

• "It would increase the likelihood, because I would then know that my PCP visit is a place I could discuss it, if I needed to." ~Ana (Williston Resident)

What do you think the role of a healthcare provider is with respect to screening for sexual and intimate partner violence?

- "For providers it's about meeting people where they are at in that moment, while being open and ready for the possibility of a deeper conversation if the patient is ready and so desires." ~Lurcia (Director of Outreach/Prevention/Education, H.O.P.E. Works)
- "For me it is an uncomfortable question even though it is not something I have experienced... you have to have a comfortable relationship with the person you are attending." ~Nina (Patient at Evergreen Family Health)

Where in the primary care office do you feel patient education materials related to sexual and intimate partner violence would be most effective at reaching at risk individuals?

• "In the exam room next to where the patient is sitting" ~Nina (Patient at Evergreen Family Health)

INTERVENTION AND METHODOLOGY

- We partnered with H.O.P.E. Works VT, Vermont Network Against Domestic and Sexual Violence, and Steps to End Domestic Violence VT to obtain patient education materials.
- We introduced new patient education materials to the Evergreen Family Health Clinic for distribution in exam rooms on the subjects of:
 - Sexual Violence
 - Domestic Violence
 - Consent.
 - Healthy Relationships
- We introduced new patient education materials to the Evergreen Family Health Clinic for distribution in bathrooms on the subject of:
 - Domestic Violence aid hotlines

RESPONSE DATA

• Brochures provided by H.O.P.E. Works offered succinct but critical information on patient rights and resources in the setting of sexual or intimate partner violence.

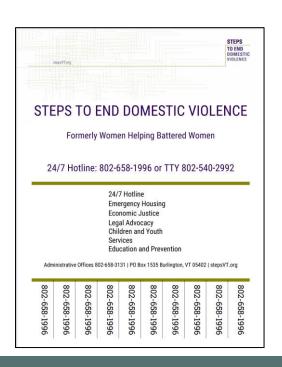
 Brochures and pocket handouts additionally offered clear information on building healthy relationships and asking for and giving consent

Fliers provided by Steps VT provided tear-off contact information for patients experiencing intimate partner

violence

• Examples:







EVALUATION OF EFFECTIVENESS AND LIMITATIONS

- Effectiveness can be preliminarily evaluated by implementing a short 1 question Likert scale survey into regularly filled out patient paperwork asking:
 - If you were to experience sexual or intimate partner violence, how would the existence of educational materials and resources in the exam room affect your willingness to discuss this situation with your healthcare provider?
- Limitations of this project are as follows:
 - Annually, less than 20% of survivors of sexual and intimate partner violence present for assistance. This severely restricts the ability of a practice to truly know the effectiveness of interventions such as increasing patient education materials
 - Sexual and intimate partner violence are exceptionally multifaceted patient health concerns which require multifaceted longitudinal solutions
 - Due to time constraints, this project is limited in its scope and capacity to foster significant change. The writer of this presentation strongly suggests employment of the interventions and projects found on the following slide.

RECOMMENDATIONS FOR FUTURE INTERVENTIONS/PROJECTS

Continued partnership with local advocacy organizations including H.O.P.E.Works,VT Network, and Steps VT for the prevention of and response to sexual and intimate partner violence

2

Investigate partnership with the VT Department of Health Forensic Nursing Program with goals of developing pipeline referral program for survivors of sexual violence

3

Longitudinal evaluation of comfort levels patients experience with respect to discussing subjects of sexual and intimate partner violence via survey format

4

Incorporation of screening and education materials regarding building healthy relationships and asking for consent regularly into adolescent wellness visits

REFERENCES

- 1. Barquist, Jessica, et al. The Economic Impact of Domestic and Sexual Violence on the State of Vermont a Report of the Vermont Network against Domestic and Sexual Violence. 2021.
- 2. VT Network 2021 Data Snapshot. Vermont Network Against Domestic and Sexual Violence, 2021, www.vtnetwork.org/wp-content/uploads/2022/01/2021_NW_Data-Snapshot.pdf.
- 3. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics, National Crime Victimization Survey, 2019 (2020)
- 4. National Coalition Against Domestic Violence. Domestic violence in Vermont. 2021. www.ncadv.org/files/Vermont.pdf

CONSENT FROM INTERVIEWS

Electronic interviews:

Thank you for agreeing to be interviewed. This project is a requirement for the Family Medicine clerkship. It will be stored on the Dana Library Scholar Works website. Your name will be attached to your interview and you may be cited directly or indirectly in subsequent unpublished or published work. The interviewer affirms that he/she has explained the nature and purpose of this project. The interviewee affirms that he/she has consented to this interview.

Yesx/
Name: Ana Homick 4/24/2022
Name: Lurcia Missakila 4/26/2022
No/
Name:
Name: