

## Partner violence intervention in the busy primary care environment

Louise-Anne McNutt PhD, Bonnie E. Carlson PhD, Isabel M. Rose PhD, and David A. Robinson MD

### Abstract

**Background:** Few studies of intimate partner violence (IPV) interventions have been conducted in primary care settings. Based on recommendations, we implemented a multifaceted IPV intervention that included a sticker placed in medical charts listing screening questions, routine IPV screening by nursing staff, clinician follow-up for women screening positive, and referral to on-site services.

**Methods:** A prospective cohort study compared multiple measures collected at the intervention site and a center providing usual care. Measures included self-reported IPV, documented IPV screening and IPV experiences, and quantity of IPV materials taken from the centers.

**Results:** Of 746 charts reviewed in a random chart review conducted at the intervention site, 36.6% were tagged for IPV screening, and of those tagged, 86.1% had documentation of screening. Approximately 5% (11 of 235) of women screened positive for IPV; about half had documented clinician follow-up and referral to on-site services. Comparison of survey responses and medical record reviews (intervention site) indicated that the screening protocol primarily identified severely abused women (sensitivity 80%, specificity 98%), but rarely identified women experiencing low to moderate levels of abuse. IPV brochures were taken from the intervention site at a rate of 51 per 1000 visits versus 29 per 1000 visits taken from the control site.

**Conclusions:** Utilizing screening as the only gateway to on-site services limited access for many IPV victims. The removal of IPV brochures from examination rooms suggests that providing contact information for self-referral to on-site services may improve access.

**Author Keywords:** crisis intervention; domestic violence; mass screening; primary health care; spouse abuse

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