Utilizing Healthcare Provider Feedback to Validate a Clinical Screening Tool for Identifying and Assisting Perpetrators of Violence

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Background

- Intimate partner violence (IPV) is the most common cause of nonfatal injury in women worldwide

- Addressing IPV in healthcare has previously focused on identifying survivors with perpetrators often overlooked

- Identifying perpetrators is the first step in challenging the cycle of abuse

- We have developed patient-informed, non-accusatory screening questions, to develop a brief screening tool with acceptable language

(Tension Builds → Abusive Incident → Honeymoon Phase → Calm)
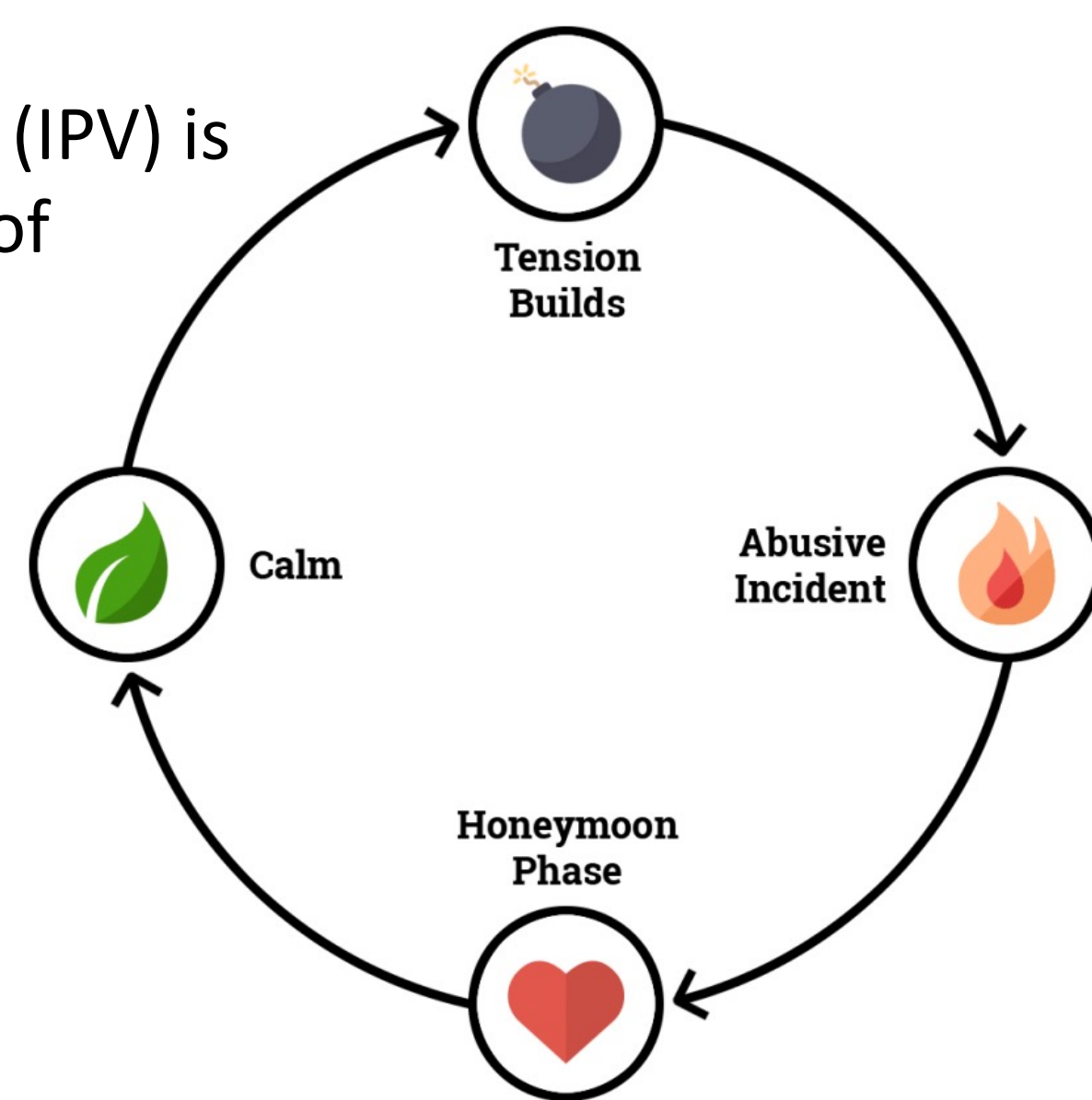
Objective

- To evaluate the most acceptable IPV screening questions for use by healthcare providers in fracture and hand clinics

Methods

- We developed 12 patient-informed IPV screening questions (Table 2) and performed item reduction based on the most acceptable screening questions using a cross-sectional survey of healthcare providers (HCPs). Members of the Canadian Orthopaedic Association (COA) and the Canadian Society of Plastic Surgeons (CSPS)

- The survey was distributed to the participating HCPs through SurveyMonkey and was available for a total of two months

- The acceptability of each of the 12 screening questions was measured on a 5-point Likert scale, ranging from Very Acceptable (1) to Very Unacceptable (5)

- Descriptive statistics were used to determine the highest performing questions using HCP acceptability reporting

- Chi-square analysis was performed to determine differences between respondent sex and acceptability rating of the sample questions

Results

Table 1. Participant demographic.

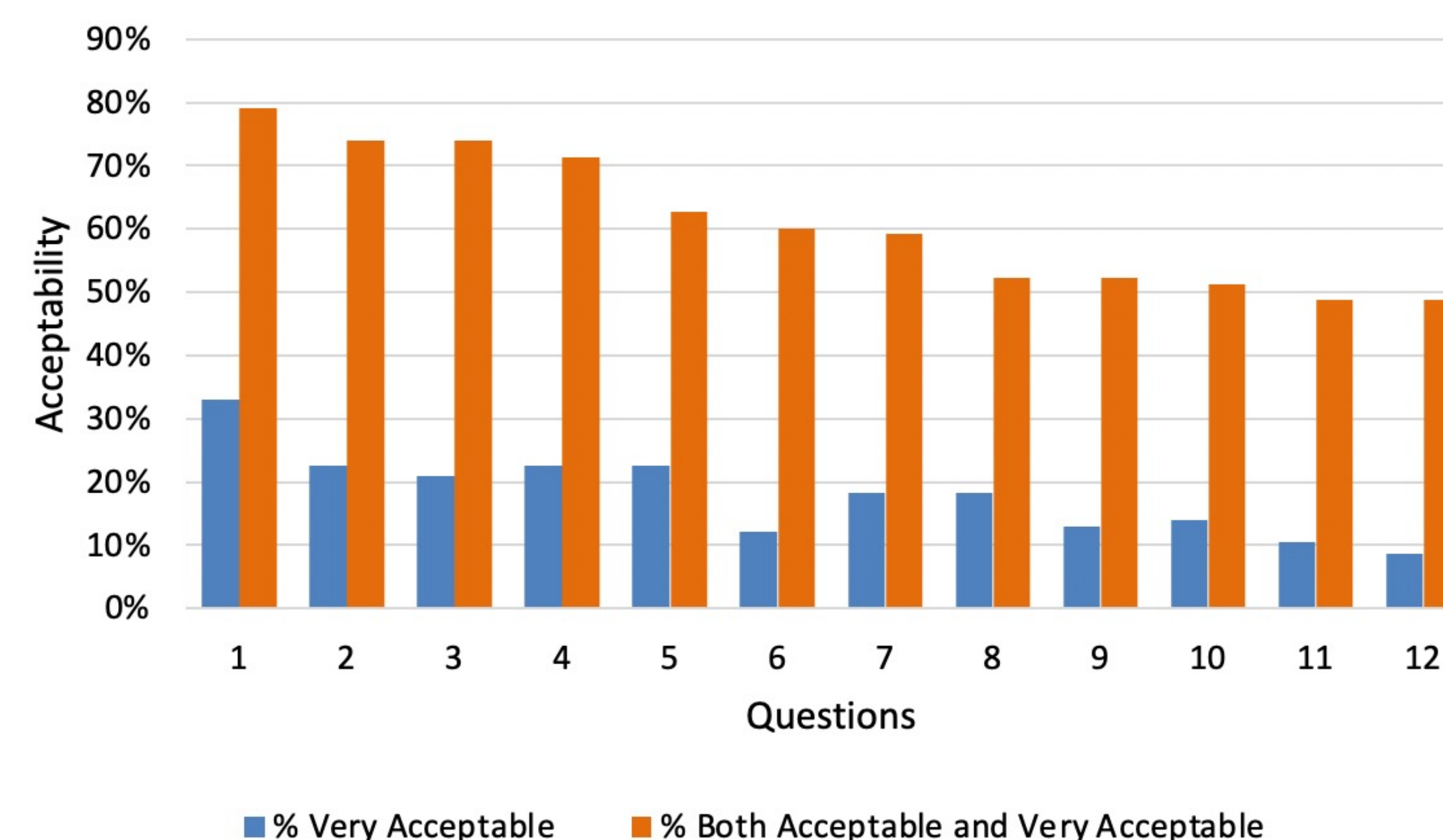| Characteristic	Total (%)
Total number of participants	115 (100)
Sex	
Male	69 (60.0)
Female	44 (38.3)
Other	1 (0.85)
Unspecified	1 (0.85)

Figure 1. Percent acceptability scores of screening questions under categories: "Very Acceptable" and Acceptable".

Table 2. Patient-informed intimate partner violence screening questions in decreasing order of acceptability scores.

Number	Question
1	Have you ever felt that you might need help with your anger?
2	Have you ever been concerned that you could not control your anger at home?
3	Has anyone else ever suggested that you might need help managing or controlling your anger?
4	Have you ever been so angry at home that you have hit someone, a wall or furniture?
5	Are you frustrated when people at home don't appreciate what you do for them?
6	Have you had to respond with force when your partner or someone you care about has used force against you?
7	Do you think people at home make an extra effort to avoid making you angry?
8	Is it very important to make sure no one takes advantage of you?
9	Have you ever been reported to the police or other authorities after a violent incident?
10	Have you used force or the threat of force to settle a disagreement with your partner or someone you care about?
11	Have you ever physically hurt someone you care about?
12	Is your partner, or people at home, ever scared of you?

Results

- A total of 115 HCP responses from members of the COA and CSPS were analyzed

- The five highest performing sample questions were selected. These five questions stayed the same regardless of whether the criteria were "Very Acceptable" alone or both "Very Acceptable and "Acceptable" (Figure 1). The acceptability percentage ranged from 21% to 33% for the five top-rated questions

- There were no significant differences between the gender of the respondents in the acceptability reporting

Significance

- This study supports the continued development and validation of a novel screening tool that will effectively identify IPV perpetrators with more acceptable language than the current standard and with minimal time required in a busy clinical setting

- Our goal is to identify IPV perpetrators in a healthcare setting, thus allowing them to be guided toward education and assistance in addressing their violent behaviour, helping stop the cycle of abuse

Equity, Diversity and Inclusion (EDI) & Sex- and Gender-Based Analysis+ (SGBA+) Integration/Considerations:

- Our research team composition reflects a diverse range of cultural, ethnic, and religious backgrounds. We value inclusivity, with team members representing various faiths, genders, and non-religious backgrounds, as well as international citizens from different ethnic backgrounds.

- In participant recruitment, we adhere to the principles outlined by the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans, the eligibility criteria for our studies are inclusive of diverse participants, with no restrictions on race, culture, religion, gender, sexual orientation, or age.

- All analysis will consider sex as a biological variable and gender as a self-reported socially constructed aspect of identity. Although the participants have the option of declaring their sex, other factors are not collected to preserve the anonymity of the participants.

Acknowledgements

Keywords: Intimate Partner Violence, Mixed-methodology, Screening tool, Language

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