

PHYSICIAN WELLNESS

COVID
LIKE TO CHAT

TOPIC #6: PHYSICIANS EXPERIENCING INTIMATE PARTNER VIOLENCE



The stress of confinement, financial uncertainty, attitudes about gender roles and a desire for control during disasters increase risk of intimate partner violence (IPV). During this pandemic, Alberta IPV crisis lines have seen a 30%–50% increase in calls. Physicians are not immune to IPV. How can we create a safe space for physicians experiencing IPV to access support?

INCREASE AWARENESS



1 PREVALENCE

Intimate Partner Violence (IPV): **Any behavior** within an intimate relationship that is used to **exert power and control** that causes **physical, psychological or sexual harm** to the other partner in the relationship. If children are aware of IPV, then they are abused in knowing about it or witnessing it.

Women have a 30% estimated lifetime prevalence of physical and sexual IPV. (*WHO multi-country study. Lancet 2006*)

An Australian study found 1 in 10 female health professionals had experienced abuse by a partner in the previous year. (*BMC Women's Health 2018*)

2 BARRIERS TO SEEKING HELP

While physicians may appear to be affluent, abusers often control finances making it difficult to leave.

Barriers unique to affluent IPV survivors include the fear of not being believed, and fear of legal abuse (an affluent partner has the means to carry out prolonged litigation and threaten loss of custody of children).

Many Canadian physicians don't have their own physician. The lack of an ongoing relationship with a physician of their own makes it difficult to open up about difficulties in their personal life.

While physicians are trained to screen patients for IPV, there is stigma around finding *themselves* in an abusive relationship. Even with acute injury, some will not seek care out of fear of being recognized.

"Where does an admission of an abusive relationship fit into the narrative of the successful and intelligent woman, especially in a cohort that is self-critical and high-achieving?" ~ Dr. Ester Choo, blog post FeminEM



CONNECTING PHYSICIANS TO SUPPORTS

3 CREATING A SAFE SPACE TO COME FORWARD

Talk openly about IPV in your team. Physicians are humans first and their lives can take unexpected turns too. Foster a culture that allows those who come forward to maintain their dignity, privacy, and ability to reach their professional goals while going through this difficult time.

Include the simple question **"Do you feel safe at home?"** when seeing physicians as patients or when concerned that a colleague/learner may be experiencing violence. Be ready with supports should they answer, "No".

A response such as, **"I'm glad you told me. We're going to keep talking."** creates space for ongoing dialogue.

4 SUPPORT FOR PHYSICIANS EXPERIENCING VIOLENCE

CONFIDENTIAL 24/7 supports (including access to a family physician) are available to physicians, medical students, residents & their families via the **AMA Physician and Family Support Program**. All information shared is non-identifiable by PFSP/AMA and is confidential. Calls and referrals to our therapists are not documented in the Provincial EMR.

SUPPORTS FOR SAFE EXIT PLANNING:

CONFIDENTIAL 24/7 National Domestic Violence Hotline (CANADA)

Connects callers directly to domestic violence resources available in their local calling area **1-800-799-SAFE (7233)**

Need help now?
Call us toll-free
1.877.767.4637
SOS.4MDS
24 hours a day
7 days a week
365 days a year