

# Study Shows Online Education Improves Physician Response to Domestic Violence

## *Novel Approach to Physician Education Makes Doctors More Likely to Address Domestic Violence in Their Patients*

SAN FRANCISCO, March 14 /PRNewswire/ – Physicians are more likely to recognize, validate, assess and respond to suspected domestic (intimate partner) violence in their patients after participating in an Internet course on the subject, according to new study results reported this week at the National Conference on Health and Domestic Violence in San Francisco, CA.

In the new report from Medical Directions, Inc., 645 California physicians who took the “Respond to Domestic Violence” online continuing medical education (CME) program, a comprehensive course on intimate partner violence (IPV), were surveyed following its completion to determine how it will affect the management of IPV in their practices. 79 percent of physicians who took this course said that they will make practice changes in how they handle suspected IPV, indicating there is an “excellent” or “good” likelihood that they will change practice behavior. These physicians recognized the importance of dealing with IPV and their need for more education, with 74 percent responding that the information provided in this program is of above-average relevancy to their individual practices.

Additional open-ended comments underscored the willingness of participants to change practice habits, with one respondent stating, “I thought I was aware of the general problem of IPV, but this course startled me with how much I am likely overlooking. I’ve already asked my office manager to set up an in-service for my office staff.”

Around the world, at least one in every three women has been beaten, coerced into sex or otherwise abused during her lifetime. Oftentimes, physicians see the effects of domestic violence; the U.S. Department of Justice reports that 37 percent of all women who sought care in hospital emergency rooms for violence-related injuries were injured by a current or former spouse, boyfriend or girlfriend. Yet physicians are not vigilant about screening for it; a study published in *The Journal of the American Medical Association* found that only 10 percent of primary care physicians routinely screen for IPV during new patient visits and only nine percent routinely screen during periodic checkups.

“Physicians are in the position to be the first to recognize an abusive situation, but oftentimes they don’t want to open Pandora’s Box by addressing it or they don’t know what steps to take to address it,” says Dr. Zita J. Surprenant of the University of Kansas Medical Center, lead author. “We’ve found that by equipping doctors with information on how to handle these difficult situations, they feel empowered to open that box and

take steps to help their patients. The problem is finding a way to reach busy doctors. Having an online training course that works and one that doctors will use may save lives.”

There are recognized shortcomings in physician education in domestic violence. Many states have safeguards in place that require the reporting of domestic violence by physicians, but only a few require that there be educational resources for health care professionals on recognizing and treating IPV. California does not require IPV education for physicians, but the state’s medical board must “periodically disseminate information and educational material regarding the detection and treatment of spousal or partner abuse to each licensed physician and surgeon and to each general acute care hospital in the state.” Only Connecticut and Florida require physicians to receive regular CME training on this issue.

The “Respond to Domestic Violence” online course developed by Tucson, AZ Medical Directions, Inc., has been the subject of other studies to determine its efficacy and impact. A 2005 report in the American Journal of Preventive Medicine concluded that those physicians who had taken “Respond to Domestic Violence” demonstrated long-term, positive changes in their IPV knowledge, attitudes, beliefs and self-reported behaviors, compared to a control group with no formal training.

“We know that CME is essential to help physicians supplement their formal training and to introduce unique issues such as IPV,” says John M. Harris, Jr., MD, president, Medical Directions, Inc. and study lead investigator. “What we didn’t know until recently is whether any of these courses could reach practicing physicians and provide the desired results, mainly changes in knowledge, key attitudes and practice behaviors. Through funding from The National Institute of Mental Health, we were able to examine what works and develop an online IPV course with robust, interactive, case-study components that is an excellent, cost-effective resource to help physicians better deal with domestic violence.”

The “Respond to Domestic Violence” course is a free program provided to physicians, health care providers and other members of the general public through support from Blue Shield of California Foundation (<http://www.blueshieldcafoundation.org>). California physicians may earn up to 16 CME credits at no charge. For more information, visit <http://www.respondtodv.org>.

### **About Medical Directions, Inc.**

Founded in 1995, Medical Directions, Inc. (MDI) specializes in the innovative application of adult learning theory to improve the performance of health care professionals. A leading authority in the field of online CME, MDI’s work has been published in respected medical journals and demonstrates that well designed, interactive online education can improve the skills, attitudes, and beliefs of physicians. For more information, please visit <http://www.md-inc.com>.

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