

Experience of introducing screening for Intimate Partner Violence and Reproductive Coercion in a community sexual health clinic.

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Background: Intimate partner violence (IPV) and reproductive coercion (RC) can result in serious psychological, social and physical harm. Screening patients for IPV/RC has the potential to identify and assist patients who may not otherwise discuss this with a health practitioner. Targeted screening for those with a range of specific presentations including many sexual and reproductive health issues has been recommended by WHO.

Approach: This mixed methods research describes the steps involved in the development, implementation and evaluation of a screening program for IPV and RC in an urban sexual and reproductive health clinic. The evaluation from March 2019 to March 2020 describes how the program was received by staff (both clinical and clerical) and by patients.

Outcomes/Impact: The program enabled patients who had been exposed to IPV and/or RC to receive assistance and support. Screening was highly acceptable to patients, and the reception and clinical staff became both highly supportive of screening and increasingly confident to assist patients who were exposed to IPV and/or RC.

Innovation and Significance:

Despite well documented barriers for clinicians in screening for IPV, we saw an improvement in confidence and changes in attitudes to screening by SHQ staff over time. It was reassuring that clients also were overwhelmingly positive about screening. This paper is the first study of its kind in Western Australia, and our findings and experience, along with those from other regions, can encourage and guide clinical services to implement screening for IPV/RC. In particular, there is good evidence to suggest screening within other sexual health clinics, gynaecology clinics, antenatal clinics, and termination services.

Disclosure of Interest Statement:

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