A Pediatric Response to Domestic Violence

Why Should I Be Concerned with Domestic Violence?

1) Screening for domestic violence and referring battered mothers to community resources is one of the most effective and active means of preventing child abuse.

2) Children whose mothers are assaulted are also very likely to be victims.

3) Primary care providers should routinely screen for domestic violence when mothers bring their children to appointments. Abused mothers often seek health care for their children, while ignoring their own injuries. Victims of violence are very likely to disclose abuse to a provider if asked about it.

Physical injuries to children
Children may be:
- accidentally caught in the crossfire
- intentionally injured while protecting their mothers
- abused by their fathers or mothers’ boyfriends
- over-disciplined or abused by stressed, anxious, and depressed mothers

Psychological effects of DV on children
Even if children are not physically injured, long-term psychological effects of witnessing family violence include:
- depression and anxiety
- low self-esteem
- self-destructive behaviors
- eating disturbances
- sleeping problems
- somatic complaints
- cognitive difficulties
- school problems
- aggression, hostility and delinquency
- damaging adult relationships

Exposure to domestic violence includes:
- seeing the mother being injured
- seeing the mother’s injuries
- seeing the destruction of property
- hearing the abuser’s threats
- hearing the act
- hearing the mother’s screams and cries
- hearing the destruction of property

The American Academy of Pediatrics recognizes that family and intimate partner violence is a pediatric issue because it is harmful to children. The AAP recognizes that pediatricians are in a position to recognize abused women in pediatric settings. The AAP recommends that pediatricians should attempt to recognize evidence of family or intimate partner violence in the office setting and should intervene in a sensitive and skillful manner that maximizes the safety of women and children victims.
How to Screen for Domestic Violence and What To Do About It

RADAR: A Domestic Violence Intervention

R = Routinely screen mothers
A = Ask direct questions
D = Document findings
A = Assess her safety
R = Respond, Review Options & Refer

R = Routinely screen mothers*
Talk to the mother alone if the child is two years or older.

A = Ask direct questions
Screen for DV in the course of taking a social history in the context of safety and discipline. After asking about general safety issues in the home (smoke detectors, guns in the home), you might say:

“The safety of the mother can affect the health and safety of children; therefore I need to ask you some personal questions. Because violence is common in many women's lives, we've begun to ask about it routinely.
Are you afraid of anyone at home?
Has anyone at home ever hurt you or treated you badly?
Has anyone threatened or abused you or your children?”

D = Document your findings
Document in the pediatric chart that RADAR screening was done. Indicate “+”, “−”, or “suspected”.

If Mom says it is safe to document in chart, use statements such as “the child’s mother states that her boyfriend, John Smith, struck her…. Note obvious injuries.

A = Assess safety of mother and children
Ask if she is afraid to go home, if there has been an increase in frequency or severity of violence, if there have been threats to her or her children, if there are weapons in the home, if the children are currently being abused or are in immediate danger.

R = Respond, Review Options & Refer
1) If you receive a positive response to any of these questions, encourage her to talk about it and listen non-judgmentally. You might say: “Tell me what happens.”

Validate her experiences by saying:
“You are not alone.
You do not deserve to be treated this way.
You are not to blame.
The violence is likely to get worse and I am worried about you.
If you are not safe, your children are not safe.
Help is available to you.”

2) Refer her to the National Domestic Violence Hotline at 1-800-799-SAFE (800-799-7233), where she can receive crisis assistance and information about local shelters, legal advocacy, health care centers, and counseling.

3) Offer help in arranging for medical services for her.

4) Make a follow-up appointment to see her and her children.

*Although the majority of cases of domestic violence are perpetrated by men against women, it should be noted that domestic violence is also perpetrated by women against men. DV also occurs in same sex relationships.