How domestic abuse gets missed as America stays home

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What’s the news: The stress, anxiety and fear associated with COVID-19 job losses, stay-at-home orders and physical distancing requirements can contribute to a “hidden crisis” of intimate-partner violence, child abuse and elder abuse, AMA President Patrice A. Harris, MD, MA, explained in an op-ed published by NBC News.

“As a psychiatrist who specializes in the mental health of children and adolescents, and in the impact of trauma on children and adults, I know that the likelihood of child abuse rises in tandem with stress. Losing a job, facing a health crisis, grieving the loss of a relative or friend—these and other stressors can increase the risk of domestic abuse,” wrote Dr. Harris.

This harmful trend can be exacerbated by the fact that so many of the usual sources that spot these forms of abuse are closed or unavailable, including schools and churches, Dr. Harris explained.

Why it matters for doctors: This trend emphasizes the critical role physicians play as the nation starts to ease stay-at-home orders.

“It is likely that well-child visits to pediatricians and other types of routine care are not taking place at the usual pace, which removes another source of monitoring,” Dr. Harris wrote. “Physicians are legally and ethically bound to report suspected instances of child abuse, but may not have the opportunity to identify such cases in the current crisis.”

Dr. Harris added that “with typical support systems now fractured, we must remember that important resources are available and are tailored to the current crisis.” These include:

- The National Domestic Violence Hotline (1-800-799-SAFE).
- Prevent Child Abuse America.
- The American Academy of Child and Adolescent Psychiatry.
- The National Center on Elder Abuse.
In addition, reopening physician practices in the right way is an important piece of ensuring that this kind of abuse doesn’t go unnoticed. The AMA has created a physician practice guide to reopening, which offers a checklist covering how to open incrementally, keep patients and staff safe, and implement a program of teletriage.

The AMA has detailed policy on intimate-partner violence (IPV) that encourages physicians to:

- Routinely inquire about the family violence histories of their patients as this knowledge is essential for effective diagnosis and care.
- Upon identifying patients currently experiencing abuse or threats from intimates, assess and discuss safety issues with the patient before he or she leaves the office, working with the patient to develop a safety or exit plan for use in an emergency situation and making appropriate referrals to address intervention and safety needs as a matter of course.
- After diagnosing a violence-related problem, refer patients to appropriate medical or health care professionals or community-based trauma-specific resources as soon as possible.
- Have written lists of resources available for survivors of violence, providing information on such matters as emergency shelter, medical assistance, mental health services, protective services and legal aid.
- Screen patients for psychiatric sequelae of violence and make appropriate referrals for these conditions upon identifying a history of family or other interpersonal violence.
- Become aware of local resources and referral sources that have expertise in dealing with trauma from IPV.
- Be alert to men presenting with injuries suffered as a result of intimate violence because these men may require intervention as either survivors or abusers themselves.
- Give due validation to the experience of IPV and of observed symptomatology as possible sequelae.
- Record a patient's IPV history, observed traumata potentially linked to IPV, and referrals made.
- Become involved in appropriate local programs designed to prevent violence and its effects at the community level.

Read about how a systems approach can improve intimate-partner violence screening.

**Learn more:** The AMA also has policy covering child abuse and the mistreatment of elders.

You can stay up to speed on the fast-moving pandemic with the AMA’s COVID-19 resource center, which offers a library of the most up-to-date resources from JAMA Network™, the Centers for Disease Control and Prevention, and the World Health Organization.