

Medics Against Violence

Identifying patients at risk of domestic abuse

Medics Against Violence (MAV) was founded by three Scottish surgeons, Christine Goodall, Mark Devlin and David Koppel. MAV's aim is to prevent violence before it happens.

This info stick contains a film which looks at how dentists can help patients who may be victims of domestic abuse, as well as supporting materials.

Domestic abuse and the dentist

Domestic abuse can affect anyone regardless of their gender, sexual orientation, age, disability, ethnic background or social class.

It is never the fault of the victim.

In 2009 alone 53,681 incidents of domestic abuse were reported to the police. Eleven people were murdered in that year as a result.

On average a victim will be abused 35 times before seeking help.

Dentists often form long term relationships with their patients and their families so are in an ideal position to notice changes in someone's appearance or behaviour.

It is a well known fact that the teeth, face and head are the most commonly injured sites in incidents of domestic abuse and victims will often seek dental help for these problems. In a recent study 70% of patients who sought help from their dentist wished the dentist had asked about their injuries.

You might be concerned about one of your patients. Here are some of the warning signs and simple steps you can take to help. It's a difficult subject to raise, but by just expressing concern you could give an abused patient the confidence to seek help.

Warning signs

Repeatedly missed or cancelled appointments in a patient who was previously a good attendee.

Injuries to the teeth, such as broken or avulsed teeth, particularly repeated injuries. Patients will often give an unbelievable explanation which doesn't fit with the injury.

Injuries to the face and neck such as bruising or more serious injuries which the patient may try to cover up with make up or clothing. Again, there may be frequent injuries with unlikely explanations. The patient may tell you he / she is just clumsy.

The patient may appear withdrawn when he / she has previously been confident and outgoing. This may be especially obvious if the abuser is present.

You may notice on taking a history that the patient's alcohol consumption has increased.

There may be a new partner in the household.

The patient's partner may insist on coming to dental appointments with them, they may appear very dominant, may often try to speak for the patient or talk over him /her and put him / her down.

If the patient has children who are also your patients, you may also notice a change in their behaviour or appearance. They may become more withdrawn or more disruptive.

How you can help

ASK

Ask the patient about possible abuse.

Ask in a non-judgemental, caring way. Don't use closed questions. Always ask in private and reassure the patient that everything they tell you is confidential. If you do this your patient will feel less scared and ashamed and will be more likely to talk to you.

Often if you simply raise the subject your patient will find the courage to do something about their situation. It only takes a minute to tell a patient they don't have put up with abuse.

VALIDATE

Tell the patient that abuse is wrong and totally undeserved. Reassure them that it is not their fault.

DOCUMENT

Document the signs and symptoms in your notes. Supplement with clinical photos or diagrams. Be specific in detail and use the patient's own words.

Accuracy is very important. Your notes could end up being used as evidence in court.

REFER

Finally, you can refer a patient. Give him / her a leaflet about domestic abuse with this phone number:

Scottish Domestic Abuse Helpline 0800 027 1234

We appreciate that as a dentist intervening in your patient's life may raise several issues for you. But you are in a unique position to help reduce violence, and potentially make your patient's life better.

Issues that may concern you:

- You feel that as the patient's dentist this is nothing to do with you
It could be a matter of life and death
- You don't know what to say
Expressing concern is a good start
- You are afraid the patient will be angry or offended
He / she might be, but he / she will at least know that as their healthcare professional, you care
- You feel that if he / she wanted help he / she would ask you
He / she may be too afraid or ashamed to ask you for help

If a patient denies the abuse reassure him / her that they can talk to you at any time.

Don't become frustrated with a patient's decision not to seek help. They may not be ready to do so.

There are leaflets that you can give to patients with details of phone numbers to contact for help and advice, however, be aware that patients may be reluctant to take these away with them in case the abuser finds them.

In the long run most patients will be glad that you offered them help.