EXPERIENCE OF DOMESTIC VIOLENCE ROUTINE SCREENING IN FAMILY PLANNING NSW CLINICS

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Background: Domestic violence routine screening has been the most widespread domestic violence-related intervention to be introduced globally in health services. It has been implemented across a range of health services in Australia and internationally, acknowledging that health workers can be well placed to identify and respond to women who are experiencing domestic violence. Family Planning NSW implemented routine screening in their clinics in 2012. This paper reviews the implementation of the program and outcomes of screening, in order to determine feasibility of routine screening in a family planning setting and the suitability of this program in the context of women’s reproductive and sexual health.

Methods: A retrospective review of medical records was undertaken of eligible women attending Family Planning NSW clinics between 1 January and 31 December, 2015. Demographic characteristics were summarised with counts and percentages. A modified Poisson regression model was used to estimate prevalence ratios and assess association between binary outcomes and client characteristics.

Results: 5,491 women were screened from an eligible 13,440 women (41%). Number of visits, clinic attended, age, employment status, and disability were associated with completion of screening. 220 women disclosed domestic violence (4.0%). Factors associated with disclosure were clinic attended, age group, region of birth, employment status, education, and disability. Women who disclosed domestic violence were more likely to have discussed issues related to sexually transmissible infections in their consultation.

Conclusion: Given the known associations between domestic violence and sexual and reproductive health, a Domestic Violence Routine Screening program is appropriate in sexual and reproductive health clinics, and appears to be feasible in a service like Family Planning NSW. Consistent implementation of the program should continue at Family Planning NSW, and be expanded to other family planning services in Australia, in order to support identification and early intervention for women affected by domestic violence.