



Nevada Network Against Domestic Violence (NNADV) in partnership with
Renown Health
Present...

INTIMATE PARTNER VIOLENCE AS A PUBLIC HEALTH PRIORITY

Wednesday, June 17, 2015

9:00AM-11:00AM

Renown Regional Medical Center 1155 Mill St. Reno, NV
Classroom is located in the Sierra Tower Ground Floor (Sierra Classroom 3)

This presentation has been specifically designed for social work professionals who want to support survivors in a healthcare setting. Discussion topics include strategies to identify intimate partner violence by using a two to 10-minute screening tool and techniques to intervene, document, and provide appropriate referrals to community-based advocacy programs. This workshop will engage the participant in a simulation called *In Her Shoes* that will place the social worker in the role of a survivor. Participants will follow a real-life survivor's narrative as they reach out for help, problem solve, and experience challenges while struggling to live a life free from violence.

This workshop is provided at no cost to the participant. **Space is limited so pre-registration is required.** Visit <http://www.nnadv.org/news-events/events-and-trainings> to register. Registration closes Monday, June 1st at 5:00PM. CEUs are pending.

Interested in learning more about intimate partner violence before the workshop? Keep reading...

During August 2012, under the authority of the Affordable Care Act (ACA), new guidelines went into effect for new health plans. Under the ACA, the comprehensive annual well-woman exam includes an assessment of risk factors, including violence. Screening women and adolescents about present and past relationship violence in a culturally-sensitive and supportive manner addresses health concerns about safety and current and future health problems.

Intimate partner violence is common. Nearly one-third of American women (31%) report being physically or sexually abused by a husband or boyfriend at some point in their lives. Women are 5-8 times more likely than men to be victimized by an intimate partner. In 2012, Nevada ranked #6 in homicides connected with relationship violence - 25 women were murdered. ([Violence Policy Center, September 2014](#))

The health effects of intimate partner violence are devastating. The HHS coverage requirement reflects the importance of screening for violence exposure as an essential component of quality health care delivery. The [National Intimate Partner and Sexual Violence Survey](#) 2010 conducted by the Centers for Disease Control and Prevention (CDC) found victims who experienced high rates of severe intimate partner violence including rape and stalking, reported long-term chronic disease and other health impacts such as Post-Traumatic Stress Disorder (PTSD) symptoms, asthma, diabetes, irritable bowel syndrome, frequent headaches, chronic pain, difficulty sleeping, and poor physical and mental health.

The health care costs of partner violence are equally astonishing. Nationally, the medical cost burden for women 18 and older within the first 12 months after victimization, range from \$2.3 billion to \$7 billion dollars. The CDC estimates that the cost of intimate partner rape, physical assault and stalking totaled \$5.8 billion each year for direct medical and mental health care services and lost productivity from paid work and household chores. When updated to 2003 dollars, the cost is more than \$8.3 billion and in 2010 dollars, it would be considerably more. ([Futures Without Violence, March 2010](#)) and [Domestic Violence: The Secret Killer That Costs \\$8.3 Billion Annually](#), Dec 5, 2013.

The Good News:

The good news is a two to 10-minute screening done in the privacy of an exam room and conducting a brief intervention can improve the health and safety of survivors. Women who talked to their health care provider about the abuse were far more likely to use an intervention. At a two year follow-up, women who were screened for abuse and given a wallet-sized referral card reported fewer threats of violence and assaults. A majority of the women do not have recurrent abusive relationships and health care costs go down after the abuse ends. Women who received a brief intervention reported fewer incidents of birth control interference and were more likely to leave relationships that were unhealthy and unsafe. An intervention during pregnancy has shown a decrease in partner violence victimization and related poor pregnancy outcomes.

Presenters: Judy Henderson, MEd. Training Coordinator, Nevada Network Against Domestic Violence and Maggie Dines, LSW, MSW Social Work Care Coordinator, Renown Health

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