

GPs need better training to help children affected by domestic violence

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Credit: University of Bristol

Although doctors and nurses are becoming more aware of patients experiencing domestic violence, the needs of children are often ignored, according to new research published today that reveals a lack of training about how to identify and support children exposed to domestic violence.

Experts from the universities of Bristol and Central Lancashire say better training, coupled with improved information-sharing between agencies, could greatly improve outcomes for these children.

About one in five children in the UK are exposed to domestic violence, according to the NSPCC. Although there is considerable research-based evidence associating domestic violence with poor physical health, mental health, behavioural and educational outcomes for exposed children, GPs and nurses are not confident about how to respond to the needs of these children, the authors say.

Writing in the journal *Health and Social Care in the Community* today, they highlight a lack of cohesion and coordination in the approach to domestic violence and child safeguarding. Their study draws attention to general practice clinicians' insufficient understanding of multi-agency work, a limited competence in gauging thresholds for child protection referral to children's services and little understanding of outcomes for children. While prioritising children's safety, GP clinicians are more inclined to engage directly with abusive parents than with affected children.

Lead author Dr Eszter Szilassy, from the University of Bristol's Centre for Academic Primary Care, in the School of Social and Community Medicine said: "Our research found that, while GPs are fully aware of their child safeguarding responsibilities, they are uncertain about best practice at the interface between child safeguarding and domestic violence. The lack of relevant training contributes to failures to translate child safeguarding knowledge into safe and effective domestic violence related practice strategies."

The paper highlights that "the poor engagement of general practice clinicians with domestic violence training and the lack of relevant training content within child safeguarding training, is currently a major

gap for general practice, leading to uncertainty and resulting in missed opportunities to support victims and their children".

The authors describe the development of an evidence-based training intervention on domestic violence and child safeguarding for general practice teams, called RESPONDS (Researching Education to Strengthen Primary care ON Domestic violence and Safeguarding). This training was developed to encourage general practice clinicians to overcome barriers and engage more extensively with adults experiencing abuse, as well as responding directly to the needs of children.

The mixed-method paper reports key research findings and their implications for practice and policy. If adopted, the authors' recommendations could lead to greater support for children via more relevant training and support for the GPs and nurses assigned to them.

Nicky Stanley, Professor of Social Work at UCLan, noted: "The research found that GPs were more ready to engage with victims and perpetrators of domestic violence than to talk directly to children or young people about this issue. They need to improve their confidence and skills in relation to this, since children are also their patients."

Dr Szilassy and colleagues argue that clinicians need more focused training to equip them with the skills and confidence to respond safely and effectively to adult victims and perpetrators, and vitally, in talking directly with children experiencing domestic violence. They recommend that such training is reinforced by supportive practice environments, improved systems of interagency collaboration, appropriate and effective documenting and improved information-sharing systems and policies.

The authors hope that the development and piloting of their evidence-based training will be a crucial first step towards strengthening the

response to all family members experiencing or perpetrating [domestic violence](#) and their [children](#).

More information: Eszter Szilassy et al. Making the links between domestic violence and child safeguarding: an evidence-based pilot training for general practice, *Health & Social Care in the Community* (2016). [DOI: 10.1111/hsc.12401](https://doi.org/10.1111/hsc.12401)

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