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Creating a Trauma-Sensitive Practice: A Health Care Response to Interpersonal Violence

Abstract: *Interpersonal violence has a profoundly negative impact on individuals and our society. Health care providers are in a unique position to identify interpersonal violence, support survivors, and to contribute to violence prevention. The purpose of this article is to describe the nature, scope, and impact of interpersonal violence, its subsequent trauma on individuals, families, and society, and to delineate how providers can apply trauma-sensitive practice. The authors provide definitions, examples and prevalence rates and review theories of violence and violence prevention. They describe how to create a trauma-sensitive practice by being aware of the trauma that accompanies violence, the barriers to violence prevention, and how to intervene with patients about violence. Providers are urged to adopt universal screening practices, educate themselves on the nature of interpersonal violence and engage in screening, education, collaboration, and social justice activities to reduce interpersonal violence. Resources are provided to assist health care organizations, providers, and patients in addressing interpersonal violence.*

Keywords: prevention; interpersonal violence; health care; universal screening; trauma-informed care

Interpersonal violence has a profound effect on individuals and societies worldwide, affecting humans throughout their life span. In the United States alone, an average of 4 children every day die from abuse or neglect and 3 million reports of suspected child abuse and neglect representing more than 6 million children were made in 2012.[1] More than 1 in 3 women (35.6%) and more than 1 in 4 men (28.5%) in the United States have experienced rape, physical violence, and/or stalking by an intimate partner in their lifetime.[2] Approximately 22 million women and 1.6 million men has experienced rape,[2] and at least 5% to 10% of Americans older than 60 years will experience elder abuse.[3]

Despite its high rate of occurrence, interpersonal violence is often shrouded in secrecy[4] and is not easily disclosed to health care providers and other members of the community. Several factors contribute to survivors' reluctance to discuss their mistreatment. For instance, most perpetrators of interpersonal violence are parents, relatives, and other members of one's household.[3,5] Given this, child and adult survivors are in an untenable situation—often facing few

> "... creating a trauma-sensitive practice, ... is the single most important action that health care professionals can take to reduce interpersonal violence and intervene skillfully ..."

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