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Presentation

"Reducing health care disparities in primary care settings: Interventions for domestic violence revictimization and posttraumatic stress"

- Case Studies and usual care from a primary care perspective
- Study design and results
- Translation of knowledge into an impactful program in OBGYN

Case 1

- LH is a 76 year old female who has been my patient for ten years. She is a former hotel worker who was born in Jamaica
- At age 14 she was sexually and physically abused by her uncle.
- I was the first person she ever told.

Case 1 implications

- The problem exists and is unreported
- The pain persisted with the event clear in her mind 62 years after the occurrence
- Trust is hard to come by because these women often are violated by people whom they should be able to trust.

My options

- Do you think behavioral health needs to help you address unresolved issues? (Answer was no)
- What do you need me to do? (Answer: nothing)

My question for her

 Do you think your life would have been different if you believed something could have been done when you were 14?

(answer yes: I would have pursued my education, probably had a different job, may have married and probably would have had children)

Case 2

- DR is a 24 year old African American who was hit in the back and side with a baseball bat by her boyfriend.
- She has been with him for 2 years and it is the first time she was hit with a bat.
- This is her second abusive relationship.
- She is hopeful he will change

Case 2 implications

- Patient with an acute injury.
- This is a reportable offense.
- Often there is forgiveness and hope for change.

My Options

- Offered to call police and have charges filed, etc. (Declined by patient)
- Offered to have evaluation in Behavioral Health with counselor. (Declined by patient)
- Offered usual care including contact instructions to police and our health care system. (Accepted by not accessed)

Case 2 gaps

- Patients come in, need help and then decline offers.
- Safety net is porous and follow up may be non-existent or impossible to track

Rationale for the Study

Approached with request for collaborative study

 Clear appreciation for the need to narrow gaps in care for this vulnerable population

Ability to study impact of an intervention