Treatment and prevention of violence and abuse: Core competencies for the health professions

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Confronting Chronic Neglect: The education and training of health professionals on family violence, IOM, 2002

🔹 Professional organizations should develop curricula and provide guidance regarding violence and abuse education
🔹 Identifies unmet need for integrated interdisciplinary educational competencies for violence and abuse

Academy on Violence and Abuse

- Formed in 2005
- Interdisciplinary academic society addressing health professional education and research on the effects of violence and abuse on people’s health.
- The IOM call for an overarching set of educational principles and competencies remains unmet.

AVA competencies initiative

- Preconference institute: **Creating Core Competencies for Health Education on Violence and Abuse, New Orleans, 2009**


What is a competency?

In the context of health professional education—

- A knowledge, skill or attitude
- Essential to the practice a health profession
- Derived from an understanding of patient and societal needs

**Competency Base Education**

Outcome oriented education that shifts the goal of professional education

- Away from intermediate outcomes, like passing a test
- Towards professional performance—
  - Caring for a patient or client
  - Improving the health of a community
  - Acting in a professional, ethical manner

**New Orleans method**

- Modified Delphi technique
- Attendees formed 3 interdisciplinary working groups
  - Review selected literature on educational competencies (references 1, 2, 4, 5 & 6)
  - Draft educational competencies
  - Report back to the large group for discussion
  - Work products combined into a single competency document

**New Orleans Results...**

- Posted online in Wiki environment for ongoing discussion w/ institute attendees
  - Fall, 2009 AVA Education Committee begins reviewing, revising & editing
  - Expand professions represented, adding Pharmacy, Social Work, Professional Counselors, Dental
Professions Represented

- Dental
- Medicine
- Nursing
- Pharmacy
- Physical Therapy
- Psychology
- Professional Counselor
- Public Health
- Social Work

This methodology was informed by the work of Dr. Robin Mason


Final Report

- Drafts of committee report reviewed by AVA Board & selected AVA members

Competencies Needed by Health Professionals for Addressing Exposure to Violence and Abuse in Patient Care

Ambuel, B, K Trent, P Lenahan, P Cronholm, D Downing, M jelly, A Lewis, O’Connor, M McGraw, J Mouden, J Wherry, M Callahan, J Humphreys, R Black. Competencies Needed by Health Professionals for Addressing Exposure to Violence and Abuse in Patient Care. Academy on Violence and Abuse, Eden Prairie, MN, April 2011
Defining violence and abuse


Three broad categories of violence

I. Self-directed violence
II. Family and community violence
III. Collective violence

- Self-directed violence
  - Self-abuse
  - Suicidal behavior

Family & community violence

- Child abuse
- Child neglect
- Intimate partner violence
- Sibling violence
- Elder abuse
- Dating violence
- Sexual assault
- Peer violence & bullying
- Workplace violence
- Sexual harassment
- Stalking
- Pet & animal abuse
Collective violence

- Human trafficking
- Sexual exploitation & slavery
- Oppression based upon gender, race, sexual orientation, social class, national origin or religion
- Hate groups
- State-sponsored violence
  - Terrorism
  - Genocide
  - War
  - War rape

Violence & abuse is functional

- Intended to dominate, punish, control or eliminate an individual, a group or a community.

Ecological model of competence

- Competency at 3 levels
  - Individual Learner Competency.
  - Academic Institution and Training Program Competency
  - Health System Competency
Why an ecological model?

- Health professional trainees learn the science and art of their profession in academic training programs embedded in large health care systems.
- Learners only develop appropriate individual clinical skills if these organizations and practitioners model best practices.

Ecological model

- Furthermore, it’s not just about individual clinical skills—A coordinated system of care is essential for an effective response.
- Trainees need to see a coordinated system of care in action.

Competency Matrix

<table>
<thead>
<tr>
<th>Knowledge</th>
<th>Attitudes</th>
<th>Behavior</th>
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<tbody>
<tr>
<td>Health Care Systems</td>
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<td>Academic Training Programs</td>
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<tr>
<td>Individual Learners</td>
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</tbody>
</table>
Intervention Model

- Identification
- Treatment/Advocacy
- Prevention
  - Primary
  - Secondary
  - Tertiary

Purpose of AVA competencies

- Ensure that all health care professionals
  - understand violence and abuse as a health & public health problem
  - gain the skills, attitudes and confidence to work with patients, clients, colleagues, health care systems and society to end the epidemic of violence and abuse.

A note about language

- Health professionals = physical and behavioral health professionals
- Health systems = physical and behavioral health systems
- Patient / Client
- Treatment / Advocacy
Health System Competencies

A. Accreditation systems embody competencies related to violence and abuse.

B. Professional cultures recognize the physical and mental health consequences of violence and abuse, and value profession-specific competency.

C. Health professions provide specialized competencies & training programs appropriate for each profession and specialty within professions.

D. Health care delivery systems seek and achieve sustained improvement and excellence in the identification, treatment and prevention of violence and abuse.

E. Continuing education standards incorporate knowledge, attitudes & clinical skills related to the identification, prevention and treatment of violence and abuse.

F. Strong research programs address violence and abuse.

G. Build a common, integrated knowledge base across health care professions.
H. Implement systemic environmental change to create a safe and respectful organizational environment.

Educational Institution Competencies
A. Adopt an interdisciplinary approach to violence and abuse.
B. Focus on prevention including healthy relationships.
C. Partner with the community in education, intervention and prevention.

D. Develop curricula and provide learner-centered training regarding violence and abuse.
E. Assure learner safety and promote self-care.
F. Assure an institutional environment free of violence and abuse.
Individual Learner Competencies
A. Demonstrate general knowledge of violence and abuse.
B. Demonstrate clinical skills appropriate to one’s profession and specialty including the ability to identify, assess, intervene and prevent violence and abuse.
C. Communicate effectively with the patient/client and family.

D. Communicate effectively with the health care team.
E. Intervene to promote safety and reduce vulnerability.
F. Recognize individual and cultural variation in relationships and distinguish healthy from abusive patterns.
G. Identify and assess relationship health.

H. Know legal issues in treating and reporting family violence that apply to one’s profession in the jurisdiction of practice.
I. Know the ethical requirements of one’s profession regarding violence and abuse.
J. Engage in multi-disciplinary collaboration and outreach in response to violence and abuse.
K. Practice effective self-care
L. Obtain the training and skills necessary to advance the field.
M. Apply the concept of systems-based practice.

Each Health System Competency has associated Health System Actions

Each Educational Institution Competency has associated with Program Requirements

Each Individual Competency has associated Educational Objectives

**Health System Competency & Associated Health System Actions—example**

Competency: Health care delivery systems seek and achieve sustained improvement and excellence in the identification, treatment and prevention of violence and abuse

- Implement best practices in
  - care management for victims of violence and abuse
  - primary prevention
  - systems for outcome measurement and CQI
Competency: Develop curriculum and provide learner-centered training...regarding violence and abuse.

- Employ a developmental, additive curriculum with early introduction to and continuous reinforcement of competencies.
- Incorporate voices and perspectives of exposed patients/clients in designing and teaching the curriculum.
- Measure learners’ clinical application of competencies.

Competency: Demonstrate clinical skills appropriate to one’s profession and specialty including the ability to identify, assess, intervene and prevent violence and abuse.

- Assess patients/clients via interview, questionnaire, history taking and health examination processes….
- Acknowledge that achieving safety is often a long term goal that is achieved by the patient, requires significant preparation, and that many successful interventions can be applied during the course of this process…

Interdisciplinary competencies for health professionals.

- Broad definition of violence and abuse encompassing individuals, groups and communities.
- Ecological model: Individual learners; Educational institutions; Health care systems.
- Multi-faceted intervention: Identification, treatment, advocacy, prevention.

Summary
What you can do:

› Read the competencies.

› Tell your colleagues.

› Tell your local educational community and health care systems.

› Encourage professional organizations to adopt these competencies as a foundation for developing profession specific competencies.

Discussion & Questions

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  • www.avahealth.org

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Thank you

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Selected References


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