

Resident Readiness to Address Intimate Partner Violence: Curriculum Development, Implementation, and Evaluation at a Family Medicine Residency Nicole Paprocki, DO PGY 3 Resident, McGaw Family Medicine at Humboldt Park

Background: Intimate partner violence (IPV) affects approximately 25% of women in the US and is associated with multiple poor health outcomes. The United States Preventative Health Task Force recommends screening for intimate partner violence in all reproductive-aged women and for clinicians to provide or to refer for appropriate ongoing support services to patients who are experiencing violence. Nevertheless, rates of screening for intimate partner violence among primary care providers remains low.

Methods: An intimate partner violence curriculum for family medicine residents was developed. It consisted of 1) a 2-hr didactic curriculum on intimate partner-violence, including local and hospital partner programs addressing interpersonal violence, using trauma-informed best practices and 2) intimate partner violence Observed Standardized Clinical Examinations (OSCEs) with standardized patients for residents to practice screening for and responding to reports of intimate partner violence. 24 residents at the Northwestern McGaw Family Medicine Residency at Humboldt Park participated in some part of this curriculum. Participants were asked to complete a survey, abbreviated from the validated PREMIS Survey, prior to and two months after the curriculum was implemented in order to assess its effectiveness.

Results: Post-survey data still in collection at time of abstract submission; final analysis on curricular impacts and next steps will be presented on Resident Research Day.