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Anthology— To Ask about Experiences of Violence as Part of a Patient's History

Summary

Violence against women is common in Sweden, as in the rest of the world. Many countries, UN as well as other global organisations, recognise violence against women as an unacceptable public health problem. The authors of this anthology, most of them experienced researchers representing different fields within the health care services, have investigated Swedish and international literature about violence and its consequences; ethical issues, health economic consequences, gender aspects and question methodology.

There is strong scientific evidence that life under oppression, with violence or threats of violence, has a negative effect on our general health. Therefore, violence as a cause of illness and poor health must be taken into account, in order to fulfil the Health and Medical Service Act (1982:763) concerning good health care. All experts who have examined the issue presented in this anthology have come to the conclusion that patients should be asked about their personal experiences of violence. The question can be asked in several ways and practical advice is given in the different chapters.

Interviews in focus-groups, with the use of interpreters, showed that the same methodology worked regardless of which culture the patient originates from. The important factor is that the question is asked and that it is done in privacy, and in an empathetic way that opens up a potential dialogue.

Knowledge of effective primary preventive measures against violence within relationships is scarce but many researchers propose that health care services should take action in promoting awareness and change of attitudes by stressing the fact that violence is unacceptable and leads to ill health. Asking about violence increases the possibilities to make it visible and gives the individual patients help and support. It contributes to a generally improved health and will in the long run play a role in ending violence.

In the process of creating this anthology, a reference group representing different perspectives were invited to comment on the content. Their conclusion was to recommend that questions on violence should routinely be asked within the health care services.

The work with this anthology leads up to the final conclusion that staff working in health care services should ask those who seek care about personal experiences of violence. Today, education and training regarding partner-violence is not included in the obligatory curriculum of many undergraduate courses in medicine and health care. The health care authorities must take responsibility in ensuring that staff gets elementary training. In addition, there should be action plans and routines especially designed for each field. It then becomes the management's responsibility to follow up and make sure that staff has adequate competence and that the questions about violence are asked.