

## Florida Domestic Violence

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### Course Description

The purpose of this course is to provide an overview of domestic violence incidences, and prevalence in the state of Florida. This course will give a clear description on initiative for health care professional to assessment and create intervention for a domestic violence patient's long term safety.

### Target Audience

Advanced Practice Registered Nurses, Registered Nurses and Licensed Practical Nurses

### Course Objectives

1. Define domestic violence and the role of the health care professional when caring for a patient with domestic violence.
2. Understand how to screen and assess for domestic violence
3. Identify the warning signs of domestic violence
4. Understand the cycle of domestic violence
5. Understand the prevalence of domestic violence in Florida
6. List the laws that changed screening and resources for domestic violence.
7. Identify the community resources and community centers for domestic violence.



## **Introduction**

Domestic violence, intimate partner violence, and child abuse is a serious, preventable public health problem that affects millions of Americans (CDC, 2014). Nurses need to be able to identify and respond effectively to domestic violence patients who are in their care. According to Trevillion, Agnew-Davies, & Howard, (2013) nurses and health care professionals should identify signs of abuse in the effort to assess and prioritize the care and the safety of the patient. The safety of the patient is of the utmost importance. Kropp et al (2005) reports that domestic violence is rarely a single incident and the intimate relationship between the perpetrator and recipient means that the violence can be initiated more frequent and severe than other forms of victimization.

Nurses are usually the first health care professional to have direct contact with patients of domestic violence. Careful assessment must be established during the first initial contact with patient to identify any causal factors of abuse. Prompt advocate health care guidelines should be followed that will initiate a rapid response for a referral to a domestic violence specialist if necessary because the physical, psychological and emotional effects of domestic violence can be severe and long-lasting (Trevillion, Agnew-Davies, & Howard, 2013; Griffith 2014).

## **Definition**

According Florida Statute 741.28 (2011) domestic violence is defined as any assault, aggravated assault, battery, aggravated battery, sexual assault, sexual battery, stalking, aggravated stalking, kidnapping, false imprisonment, or any criminal offense resulting in physical injury or death of one family or household member by another family or household member. Stark, & Flitcraft (1996) describe domestic violence when an individual uses some

type of coercive control within an intimate or family relationship. Domestic violence can also be described as abusive, disrespectful, and hurtful behaviors that one intimate partner chooses to use against the other partner (Florida Coalition Against Domestic Violence, 2014).

**Warning Signs and Symptoms of Domestic Violence**

According to the CDC (2014) patients of domestic violence can experience physical injury; mental health consequences such as depression, anxiety, low self-esteem, suicide attempts, gastrointestinal disorders, substance abuse, sexually transmitted diseases, gynecological and pregnancy complications. There are multiple signs and symptoms associated with domestic violence for Example:

<b>Physical Symptoms</b>	
Acute Physical Symptoms	Bruising, for example black eyes, bilateral bruising, burns, internal injuries, breaks fractures such as broken bones, head trauma and orbital fractures. (Trevillion, Agnew-Davies, & Howard, 2013)
Chronic Symptoms	Frequent gynecological problems, for example pelvic pain, sexually transmitted infections, human immunodeficiency virus, cardiac and circulatory conditions, complaints of aches and pains, including headaches, back pain and gastrointestinal disorders such as irritable bowel syndrome. Miscarriages, premature labor, low infant birth weight. (Trevillion, Agnew-Davies, & Howard, 2013)
<b>Psychological or Psychosocial Problems</b>	
Depression	Depression, including suicidal ideation and self-harm. (Trevillion, Agnew-Davies, & Howard, 2013)
Post-traumatic stress disorder	Stress related symptoms – for example, fainting and dizziness manifesting as intrusive memories, flashbacks or nightmares, avoidance, dissociation and arousal (hyper-arousal). Alcohol or drug misuse, exacerbation

	of psychotic symptoms, anxiety, insomnia, and social isolation. (Trevillion, Agnew-Davies, & Howard, 2013)
<b>Economic or Financial Abuse</b>	
Economic, and Financial Abuse	Rigidly controlling finances, withholding money or credit cards, making you account for every penny you spend, withholding basic necessities (food, clothes, medications, shelter), restricting you to an allowance, preventing you from working or choosing your own career, sabotaging your job (making you miss work, calling constantly), and stealing from you or taking your money. (Smith, & Segal, 2014).
<b>Children and Domestic Violence</b>	
Psychological Effects of Domestic Violence on Children	Children who witness, and live in an environment of domestic violence more inclined to have behavior and emotional problems. Children are at risk of developing psychosomatic disorders that may include bed-wetting, school problems, night terrors, stuttering, excessive fear, crying, depression, suicidal behaviors, and phobias. Every effort should be made to remove the child from exposure to domestic violence (CDC, 2014).

As domestic violence may be associated with a range of physical injuries, including fractures, contusions, lacerations, maxillofacial and ocular injuries (Campbell 2002, Besant-Matthews 2006, Sheridan, & Nash 2007). Health care professionals should pay special attention to physical injuries associated with domestic violence. When domestic is suspected the use if a National Consensus Guidelines on Identifying and Responding to Domestic Violence Victimization in Health Care Settings should be initiated. Health care provider should ask the victim the following question:

**FAMILY VIOLENCE PREVENTION FUND ASSESSMENT OF IMMEDIATE SAFETY FOR DOMESTIC VIOLENCE PATIENTS**

- ✓ Are you in immediate danger?
- ✓ Is your partner at the health facility now?
- ✓ Do you want to (or have to) go home with your partner?
- ✓ Do you have somewhere safe to go?
- ✓ Have there been threats or direct abuse of the children (if s/he has children)?
- ✓ Are you afraid your life may be in danger?
- ✓ Has the violence gotten worse or is it getting scarier? Is it happening more often?
- ✓ Has your partner used weapons, alcohol or drugs?
- ✓ Has your partner ever held you or your children against your will?
- ✓ Does your partner ever watch you closely, follow you or stalk you?
- ✓ Has your partner ever threatened to kill you, him/herself or your children?

(National Consensus Guidelines on Identifying and Responding to Domestic Violence Victimization in Health Care Settings, 2007)

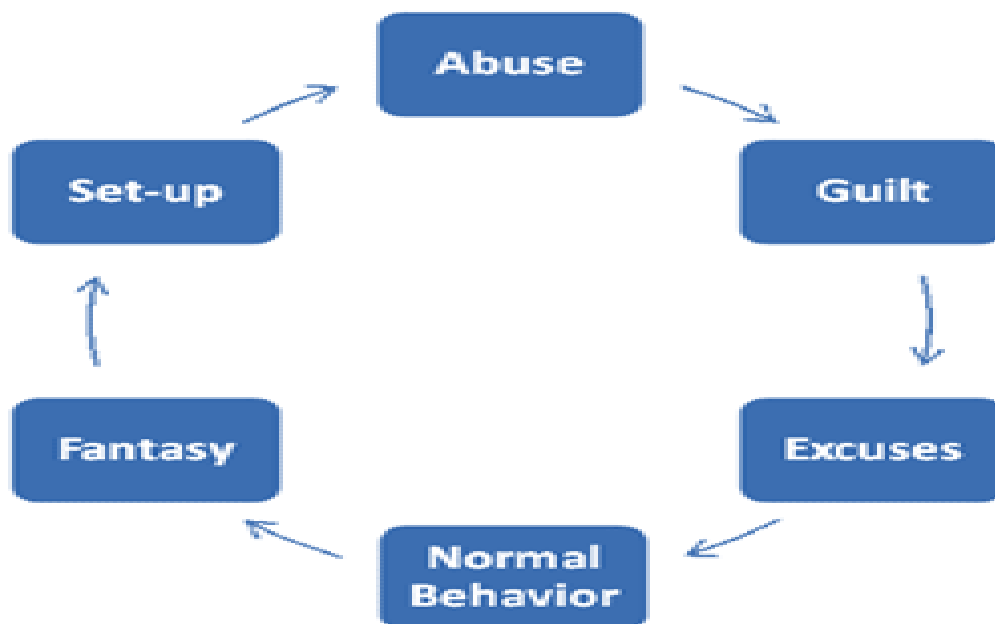
### **The Cycle of Domestic Violence**

Smith, & Segal, (2014) describes the cycle of domestic abuse falls into a common pattern, or cycle of violence:

- a. **Abuse** – Your abusive partner lashes out with aggressive, belittling, or violent behavior.  
The abuse is a power play designed to show you "who is boss."
- b. **Guilt** – After abusing you, your partner feels guilt, but not over what he's done. He's more worried about the possibility of being caught and facing consequences for his abusive behavior.
- c. **Excuses** – Your abuser rationalizes what he or she has done. The person may come up with a string of excuses or blame you for the abusive behavior—anything to avoid taking responsibility.

- d. **"Normal" behavior** – The abuser does everything he can to regain control and keep the victim in the relationship. He may act as if nothing has happened, or he may turn on the charm. This peaceful honeymoon phase may give the victim hope that the abuser has really changed this time.
- e. **Fantasy and planning** – Your abuser begins to fantasize about abusing you again. He spends a lot of time thinking about what you've done wrong and how he'll make you pay. Then he makes a plan for turning the fantasy of abuse into reality.
- f. **Set-up** – Your abuser sets you up and puts his plan in motion, creating a situation where he can justify abusing you.

The abuser's apologies and creates an environment of safety that causes the victim not to leave. As soon as the victim begins to trust the abuser, the cycle repeats itself. A victim is never safe with his or her abuser the dangers of staying are very real (Smith, & Segal, 2014).





## **Prevalence**

In 2010, the Florida Coalition Against Domestic Violence, (2014) reported that there were 113,378 crimes of domestic violence were reported to Florida law enforcement agencies resulting in 67,810 arrests. In addition to the arrest Florida's certified domestic violence centers provided 477,489 nights of emergency shelter to 15,789 survivors of domestic violence and their children, advocates created 87,474 tailored safety plans, provided a total of 484,950 hours of outreach and counseling services, and answered 130,393 domestic violence hotline calls from individual seeking emergency services, information, and safety planning assistance during the year 2011. Currently in the year 2013 the Florida Department of Law Enforcement reported of the 67 counties in Florida with a population of 19,259,543, there were 108,030 reported State wide cases of domestic violence in the areas of murder, manslaughter, forcible rape, forcible fondling, aggravated assault, stalking, simple assault, threat/intimidation, and stalking. The table listed below demonstrates the reported number of domestic violence cases from the year 2009 to 2013. Furthermore the Florida Department of Law Enforcement verbalizes that not all cases of domestic violence are reported therefore the statistic may be under-represented.



**2009-2013 Prevalence of Domestic Violence in Florida**

Year	Population	Murder	Manslaughter	Forcible Rape	Forcible Sodomy	Forcible Fondling	Aggravated Assault	Aggravated Stalking	Simple Assault	Threat/Intimidation	Simple Stalking	Total
2009	18,750,483	208	24	958	334	850	20,115	254	90,565	2,822	417	116,547
2010	18,771,768	191	19	954	270	846	18,299	214	89,435	2,758	392	113,378
2011	18,905,048	180	12	948	329	777	17,543	217	88,353	2,675	647	111,681
2012	19,074,434	191	11	980	377	927	16,827	192	85,922	2,209	397	108,033
2013	19,259,543	170	17	1,588	***	744	17,043	201	85,606	2,161	500	108,030



## Florida Interventions

In the state of Florida legal options are offered through both the criminal and civil court systems. For example, state residents can request injunctions, also known as restraining orders, through the Florida family court system (Florida Domestic Violence Laws, 2014). In addition there are multiple laws dating back to 1993 that protects patients against domestic violence. In 1993 Governor Lawton Chiles selected a task force to investigate problems and to formulate a solution for domestic violence in the state of Florida. This task force compiled data that resulted in raising public awareness, and education for domestic violence in Florida. In addition resources and financial funding was allocated to patients of domestic violence. Governor Lawton Chiles 1993 task force initiatives lead additional laws and statutes that protect patients against domestic violence in the state of Florida for example;

Year	Bill or Task Force	Explanation of Bill
1997	Governor Lawton Chiles 1993 task force	Required the Department of Law Enforcement (FDLE) to track all incidents of domestic violence in the state of Florida (Florida Governor’s Task Force on Domestic and Sexual Violence, 1997).
2003	Bill 1099 Allocates funds to Domestic violence patients	The Florida Domestic Violence Trust Fund from the Department of Children and Families to the Florida Coalition Against Domestic Violence.
2006	Governor Jeb Bush law House Bill 699.	Bill 699 changed the domestic violence continuing education requirement from one hour every renewal period to two hours every third renewal period.
2007	The Domestic Violence Leave Act was signed into law by	Governor Charlie Crist signed a bill into a law that requires employers with 50 or more employees to provide guaranteed leave for any employees who are patients of domestic violence (Florida Department of Law

		Enforcement, 2008).
2012	House Bill 437, "Protect Our Children Act	This bill passed in 2012 safeguards children from sexual predators and can result in more severe sentencing for child pornography. Video voyeurism convictions result in the status of sexual predator if there has been a prior offense. If a person knowingly has photographs, including sexual conduct by more than one child, then each child depicted in the photograph can be viewed as a separate offense (News Releases, 2012).
2012	House Bill 1099, Stalking	The bill expands current law to include cyberstalking and removes the need for patients to prove that the person stalking them intended to carry out the threat and cause harm. Violation will result in perpetrator receiving 10 years and increasing the penalties for violating an injunction by up to one year in a county jail and a \$1,000 fine (News Releases, 2012).
2012	House Bill 1193, Public Records/Patients of Violence	The bill ensures there is a public records exemption for any personal contact information of a victim when an injunction for protection against domestic violence, repeat violence, sexual violence, or dating violence has been served. This exemption will help protect patients of violence from their abusers (News Releases, 2012).
2012	House Bill 1355, Protection of Vulnerable Persons	Any individual who know about child abuse yet choose not to report it will face tougher penalties. For example, schools and universities can now be fined \$1 million for failing to report child abuse. This bill also allocates funds provided to the Attorney General's Office to expand the scope of patients who are eligible to receive relocation assistance to include patients of sexual battery. The bill also increases funds used by the Department of Children and Families for the Florida Abuse Hotline (News Releases, 2012).



## **Improving Cross-Cultural Communication**

In the effort to reduce the barriers between healthcare providers and domestic violence patients, health care professionals should remain non-judgmental and employ non-psychological terms when asking about experiences of abuse (Trevillion, Agnew-Davies, & Howard 2013). The use of the LEARN model (Berlin, & Fowkes 1983) can be effective strategies that a health care professional uses to build trust.

1. Listen to the patient's perspective.
2. Explain and share your own view.
3. Acknowledge differences and similarities between the two views.
4. Recommend a specialist immigration support service where appropriate.
5. Never accept culture as an excuse for domestic violence. Everyone deserves the right to be safe in their own home.

It is imperative that the health care provider be open and honest with the victim. abuse Trevillion, Agnew-Davies, & Howard (2013) illustrates that health care workers can alleviate patients' concerns about the repercussions of a disclosure by assuring them that discussions will remain confidential and not be reported back to the perpetrator. Health care workers can challenge self-blaming attitudes among patients by explaining that the perpetrator is solely responsible for any abuse or violence and that the patient is not to blame.

## **Prevention**

According the CDC (2014) all forms of domestic violence is preventable. The key to prevention is stopping violence before it starts. Use resources and programs aim at domestic



violence prevention are strategies that promote healthy behaviors in relationships. Nonetheless whenever a health care provider identifies ways of preventing domestic violence, the safety of the victim always sets precedence. Until these programs are introduced to the families who are patients of domestic abuse keeping the family safe is important. Paid programs that are funded by Florida laws against domestic violence will teach skills in communicating and problem solving that can prevent violence (CDC, 2014). These programs can stop violence in dating relationships before it occurs. However, more knowledge about strategies that prevent intimate partner violence is needed. CDC researchers are working to better understand the developmental pathways and social circumstances that lead to this type of violence (CDC, 2014). The key is that health care provider should learn how to spot, triage, and report domestic violence.

### **Community Resources**

Florida's currently has 42 certified domestic violence centers that provide crisis intervention and support services to adult patients of domestic violence and their children free of charge. These domestic violence centers are available to the public 24 hours a day, 7-days a week. Services include emergency shelter, 24-hour crisis and information hotline, safety planning, counseling, case management, child assessments, information and referrals, education for community awareness, and training for law enforcement and other professionals (Florida Department of Children and Families, 2014). Many centers also provide legal and court advocacy, transportation, relocation assistance, life skills training, transitional housing, daycare, outreach services, rape crisis intervention, and prevention programs in local schools (Florida Department of Children and Families, 2014). Resource center throughout Florida include:

1. Abuse Counseling and Treatment  
Also Known As: ACT  
Hotline: (239) 939-3112  
<http://www.actabuse.com>
2. Aid to Patients of Domestic Abuse  
Also Known As: AVDA  
Hotline: (800) 355-8547  
<http://www.avdaonline.org>
3. Another Way  
Hotline: 1-866-875-7983  
<http://www.anotherwayinc.net>
4. Center for Abuse and Rape Emergencies  
Also Known As: C.A.R.E.  
Hotline: (941) 627-6000  
<http://www.carefl.org>
5. Community Action Stops Abuse  
Also Known As: CASA  
Hotline: (727) 895-4912 (Ext. 1)  
<http://www.casa-stpete.org>
6. Citrus County Abuse Shelter Association  
Also Known As: CASA  
Hotline: (352) 344-8111  
<http://www.casafl.org>
7. Dawn Center of Hernando County  
Also Known As: Dawn Center  
Hotline: (352) 686-8430  
<http://www.thedawncenter.com>
8. Domestic Abuse Council  
Also Known As: DAC  
Hotline: (386) 255-2102  
<http://www.domesticabusecouncil.com>
9. Domestic Abuse Shelter  
Also Known As: DAS  
Hotline: (305) 743-4440  
<http://www.domesticabuseshelter.org>

10. Family Life Center  
Also Known As: FLC  
Hotline: (386) 437-3505  
<http://www.familylifecenterflagler.org>
  
11. FavorHouse of Northwest Florida  
Also Known As: FavorHouse  
Hotline: (850) 434-6600  
<http://www.favorhouse.org>
  
12. Harbor House of Central Florida  
Also Known As: Harbor House  
Hotline: (407) 886-2856  
<http://www.harborhousefl.com>
  
13. Haven of Lake and Sumter Counties  
Also Known As: Haven  
Hotline: (352) 753-5800  
<http://www.havenlakesumter.org>
  
14. Help Now of Osceola  
Also Known As: Help Now  
Hotline: (407) 847-8562  
<http://www.helpnowshelter.org>
  
15. HOPE Family Services  
Hotline: (941) 755-6805  
<http://www.hopefamilyservice.org>
  
16. Hubbard House  
Also Known As: Hubbard House  
Hotline: (904) 354-3114  
<http://www.hubbardhouse.org>
  
17. Lee Conlee House  
Hotline: (386) 325-3141  
<http://www.leeconleehouse.org>
  
18. Martha's House  
Hotline: (863) 763-0202  
<http://www.marthashouse.org>

19. Miami-Dade Advocates for Patients  
Also Known As: Safespace North and South  
Hotline: (305) 758-2546  
<http://www.safespacefoundation.org>
  
20. Micah's Place  
Hotline: (904) 225-9979  
<http://www.micahsplace.org>
  
21. Ocala Domestic Violence/Sexual Assault Center  
Also Known As: Creative Services  
Hotline: (352) 622-8495  
<http://www.ocaladvshelter.org>
  
22. Peace River Center Domestic Violence Shelter  
Also Known As: Peace River  
Hotline: (863) 413-2700  
<http://www.peacerivercenter.org>
  
23. Peaceful Paths Domestic Abuse Network  
Also Known As: Peaceful Paths  
Hotline: (352) 377-8255  
<http://www.peacefulpaths.org>
  
24. Quigley House  
Hotline: (904) 284-0061  
<http://www.quigleyhouse.org>
  
25. Refuge House  
Hotline: (850) 681-2111  
<http://www.refugehouse.com>
  
26. Safe Place and Rape Crisis Center  
Also Known As: SPARCC  
Hotline: (941) 365-1976  
<http://www.sparcc.net>
  
27. SafeHouse  
Also Known As: SafeHouse of Seminole  
Hotline: (855) 655-Safe (655-7233)  
<http://www.safehousefl.com>
  
28. SafeSpace Domestic Violence Svcs. Inc.  
Hotline: (772) 288-7023



<http://www.safespacefl.org>

29. Safety Shelter of Saint Johns County  
Also Known As: Betty Griffin House  
Hotline: (904) 824-1555  
<http://www.bettygriffinhouse.org>
30. The Salvation Army Brevard County Domestic Violence Program  
Also Known As: Salvation Army Brevard  
Hotline: (321) 631-2764  
<http://www.salvationarmyncbrevard.org>
31. The Salvation Army of Panama City Domestic Violence and Rape Crisis Program  
Also Known As: Salvation Army PC  
Hotline: (800) 252-2597  
<http://www.salvationarmypanamacity.org>
32. The Salvation Army Domestic Violence Program of West Pasco  
Hotline: (727) 856-5797  
<http://www.salvationarmywestpasco.org>
33. Serene Harbor  
Hotline: (321) 726-8282  
<http://www.sereneharbor.org>
34. The Shelter for Abused Women & Children  
Also Known As: The Shelter  
Hotline: (239) 775-1101  
<http://www.naplesshelter.org>
35. Shelter House  
Hotline: (800) 44-Abuse (442-2873)  
<http://www.shelterhousenwfl.org>
36. Sunrise Domestic and Sexual Violence Center  
Hotline: (352) 521-3120  
<http://www.sunrisepasco.org>
37. The Haven of RCS  
Also Known As: The Haven  
Hotline: (727) 442-4128  
<http://www.rcspinellas.org>



38. The Spring of Tampa Bay  
Also Known As: The Spring  
Hotline: (813) 247-7233  
<http://www.thespring.org>
  
39. Vivid Visions  
Hotline: (386) 364-2100
  
40. Women In Distress of Broward County  
Also Known As: WID  
Hotline: (954) 761-1133  
<http://www.womenindistress.org>
  
41. YWCA of Palm Beach County  
Also Known As: Harmony House  
Hotline: (561) 640-9844  
<http://www.ywcapbc.org>
  
42. Victim Response, Inc.  
Also Known As: The Lodge  
Hotline: (305) 693-0232  
<http://www.thelodgemiami.org>

## **Conclusion**

According to the Department of Health (2013) healthcare professionals are encouraged to learn from local and national serious case reviews of domestic violence. The review of domestic violence cases for health care professionals will aid in early identification, and assessment of domestic violence patients. In addition such learning examples include the need for early identification of mental health issues, accurate recording of assessments, establishment of a clear point of referral and implementation of multi-agency working practices Department of Health (2013). Health care professionals should remain non-judgmental and encourage an environment of concern. Health care professionals that they take incidents of domestic violence seriously can



reduce future incidences of domestic violence and develop a safety plan to improve the patients' immediate and long-term safety (Trevillion, Agnew-Davies, & Howard (2013).

## References

- Center for Disease Control and Prevention. (2014). Injury Prevention and Control. Injury Partner Violence. Retrieved from <http://www.cdc.gov/violenceprevention/intimatepartnerviolence/>.
- Center for Disease Control and Prevention. (2014). Preventing Intimate Partner and Sexual Violence Program Activities Guide. Retrieved from [file:///C:/Users/Public/Documents/ipv-sv\\_program\\_activities\\_guide-a.pdf](file:///C:/Users/Public/Documents/ipv-sv_program_activities_guide-a.pdf).
- Center for Disease Control and Prevention. (2014). Violence Prevention Retrieved from <http://www.cdc.gov/violenceprevention/>.
- Department of Health. (2013). Health Visiting and School Nursing Programmes: Supporting Implementation of the New Service Model No.5: Domestic Violence and Abuse . *Professional Guidance. HMSO, London.*
- Family Violence Prevention Fund. National Consensus Guidelines on Identifying and Responding to Domestic Violence Victimization in Health Care Settings. San Francisco, CA: Family Violence Prevention Fund; 2007.
- Florida Coalition Against Domestic Violence. (2014). Florida's Domestic Violence Statistics. Retrieved from <http://www.fcadv.org/resources/statistics>
- Florida Department of Children and Families. (2014). Domestic Violence. Retrieved <http://www.myflfamilies.com/service-programs/domestic-violence>
- Florida Department of Law Enforcement. (2008). Florida Domestic Violence Fatality Review Team 2008 Annual Report: Executive Summary. Retrieved from



<http://www.dcf.state.fl.us/programs/domesticviolence/publications/docs%5CFatalityReview2008.pdf>.

Florida Domestic Violence Laws.(2014). Overview of Florida Domestic Violence Laws

Retrieved from <http://statelaws.findlaw.com/florida-law/florida-domestic-violence-laws.html>.

Florida Governor's Task Force on Domestic and Sexual Violence. (1997).Florida Mortality Review Project.

Florida Legislature (2014). The 2014 Florida Statutes on Domestic Violence. Retrieved from

[http://www.leg.state.fl.us/Statutes/index.cfm?App\\_mode=Display\\_Statute&Search\\_String=&URL=0700-0799/0741/Sections/0741.28.html](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&Search_String=&URL=0700-0799/0741/Sections/0741.28.html).

Florida Statutes. (2011). Section 741.28 Domestic Violence; Definitions.

Griffith, R. (2014). Government implementation of domestic violence protection measures nationwide. *British Journal of Community Nursing*, 19(6), 302-306.

Harris, C. (2014). Do You Recognize Domestic Violence in Your Practice?. *Access*, 28(5), 36-39.

Horley, S. (2014). Addressing domestic violence through support and prevention. *British Journal of School Nursing*, 9(1), 35-37.

Kropp, P.R., Hart, S.D., & Belfrage, H. (2005). The Brief Spousal Assault Form for the Evaluation of Risk(B-SAFER). Proactive Resolutions, Vancouver.

News Releases (2012). Governor Scott Signs Bills to Protect Patients of Sexual and Domestic Violence. Retrieved from <http://www.flgov.com/2012/06/08/governor-scott-signs-bills-to-protect-patients-of-sexual-and-domestic-violence/>



Stark E, Flitcraft A (1996) *Women at Risk: Domestic Violence and Women's Health*. Sage Publications, London.

Smith, M., & Segal, J. (2014). Domestic Violence and Abuse. Signs of Abuse and Abusive Relationships. Retrieved from <http://www.helpguide.org/articles/abuse/domestic-violence-and-abuse.htm>.

Trevillion, K., Agnew-Davies, R., & Michele Howard, L. (2013). Healthcare professionals' response to domestic violence. *Primary Health Care*, 23(9), 34-42.