INTIMATE PARTNER VIOLENCE EDUCATION FOR MEDICAL STUDENTS IN THE UNITED STATES, VIETNAM, AND CHINA

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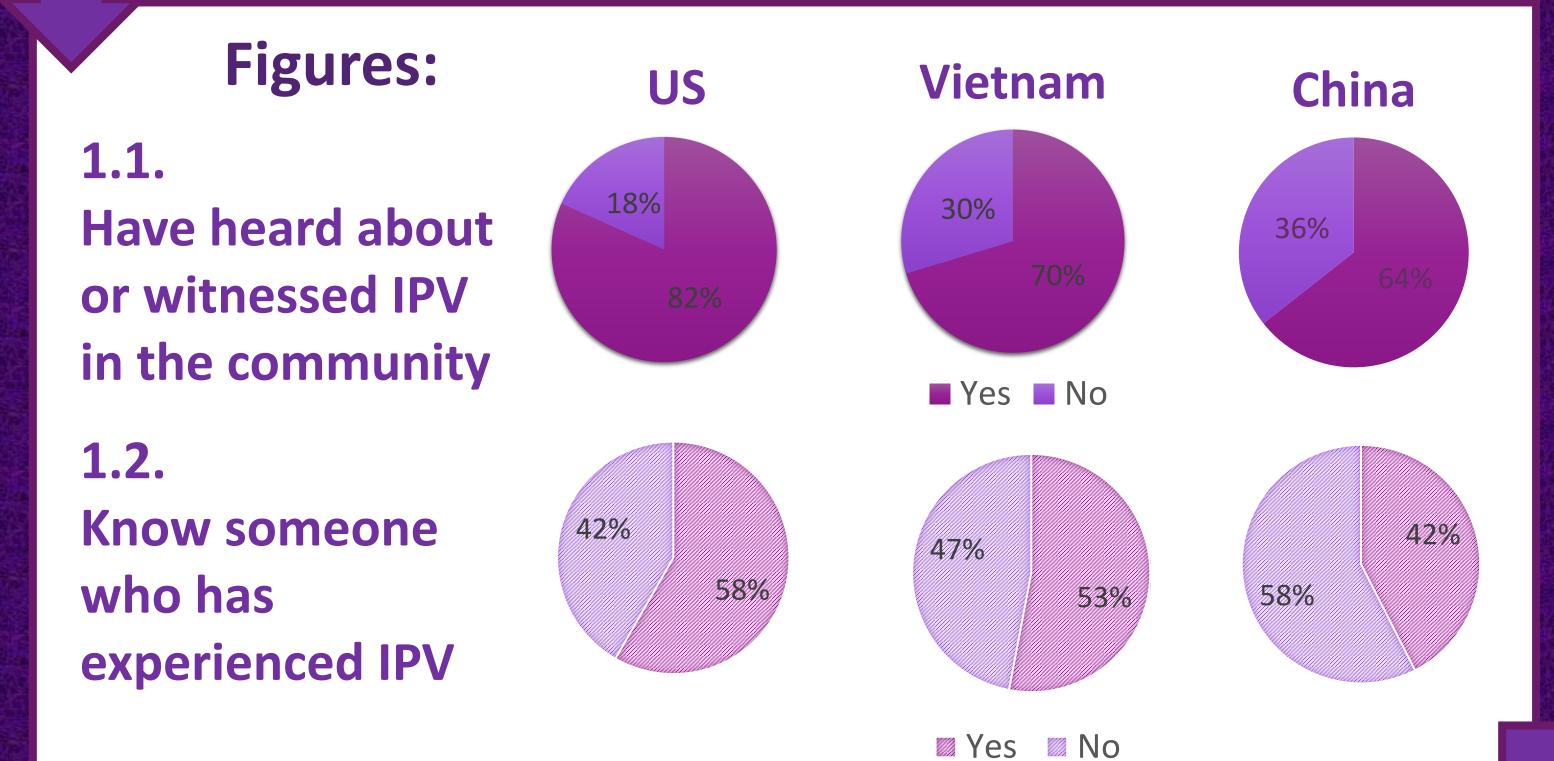
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INTRODUCTION

- IPV victimization is a common form of violence against women with global lifetime rates ranging from 15-71 %. In addition, IPV victimization is associated with poor health outcomes including injuries and acute and chronic physical and mental health problems.
- To ensure the health and safety of women who have experienced IPV, health care professionals need training on the identification and intervention for these patients.
- The purpose of this study is to determine the knowledge and training in IPV of medical students in the United States (US), Vietnam, and China. Results from this study will aid in developing effective curriculum to teach future health care professionals how to identify and assess patients for this important health care issue.

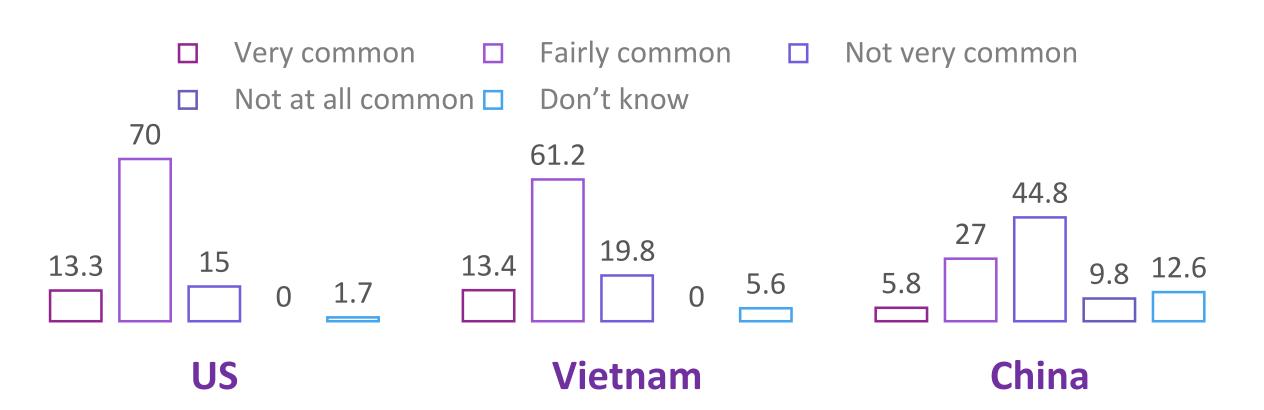
METHODS

- The data collection was obtained from medical students in three public medical schools, one in each country, from July through September 2013. Prior to data collection, this study was approved as an exempt protocol by the Institutional Review Board (IRB) at the US university.
- The medical student participants come from countries with different methods for training physicians. Among them, only US students had curriculum which including training in IPV. Medical schools in Vietnam and China did not offer any IPV-related training.
- The study measured general opinion about IPV against women, training on IPV and experience with patients, knowledge about IPV, and demographic factors including age and gender. Participants were also asked if they heard or witnessed IPV in their community, and whether they knew someone who had experienced IPV victimization.
- The response rates were 37.5% (N=60), 80% (N=232), and 62.6% (N=174) for the US, Vietnam, and China respectively, leaving the final sample of 466 participants. About half of them were female students, and the majority were in their twenties.
- Descriptive statistics, equality of variance, followed by analysis of variance, and multiple regression were performed in SPSS 19.0.



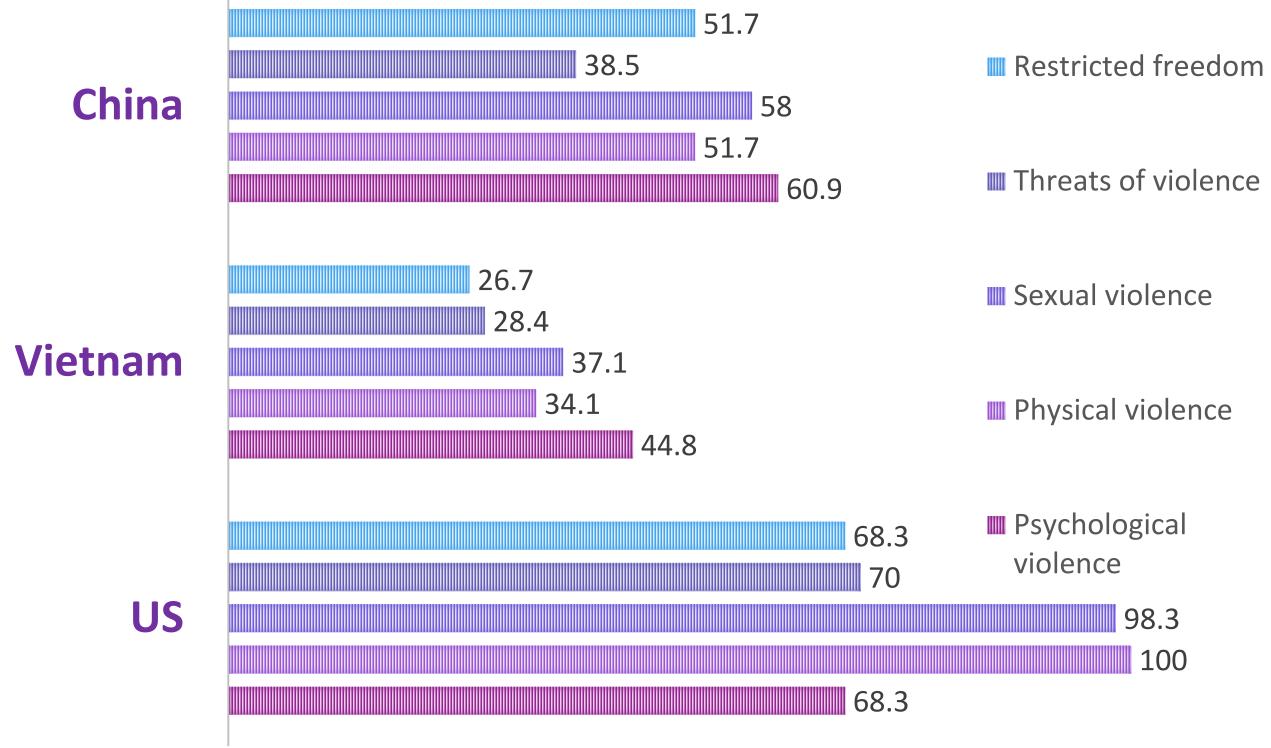
Figures:

2.1. Commonality of IPV against women (%)



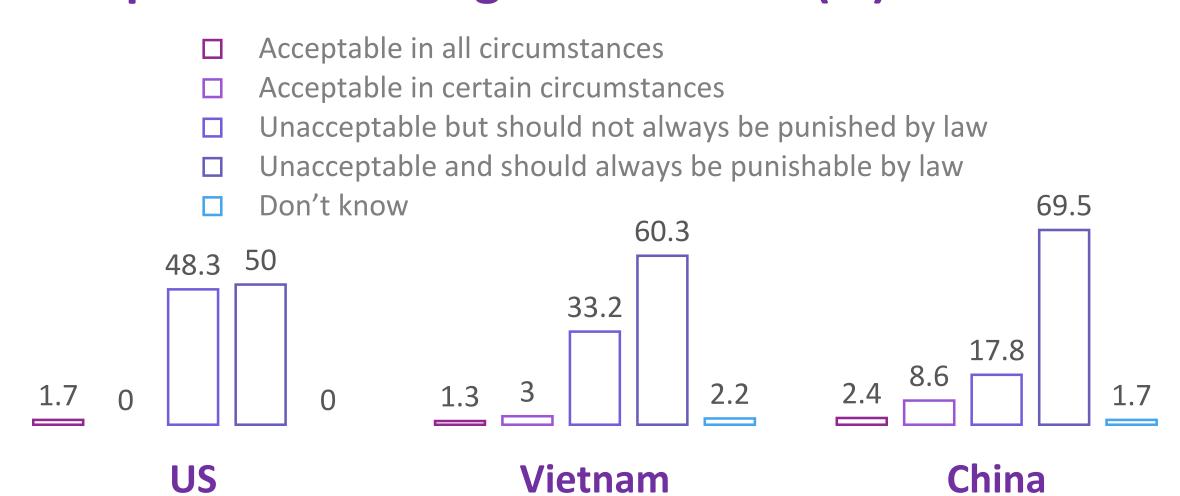
2.2.

Report of "Very Serious" for (%):

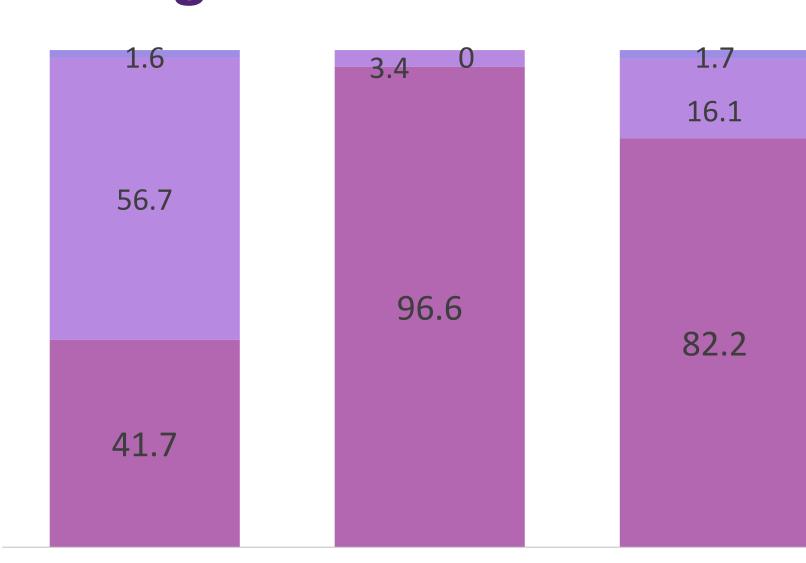


2.3.

Acceptance of IPV against women (%)



Figures: 3.1. **Training had** on IPV during medical

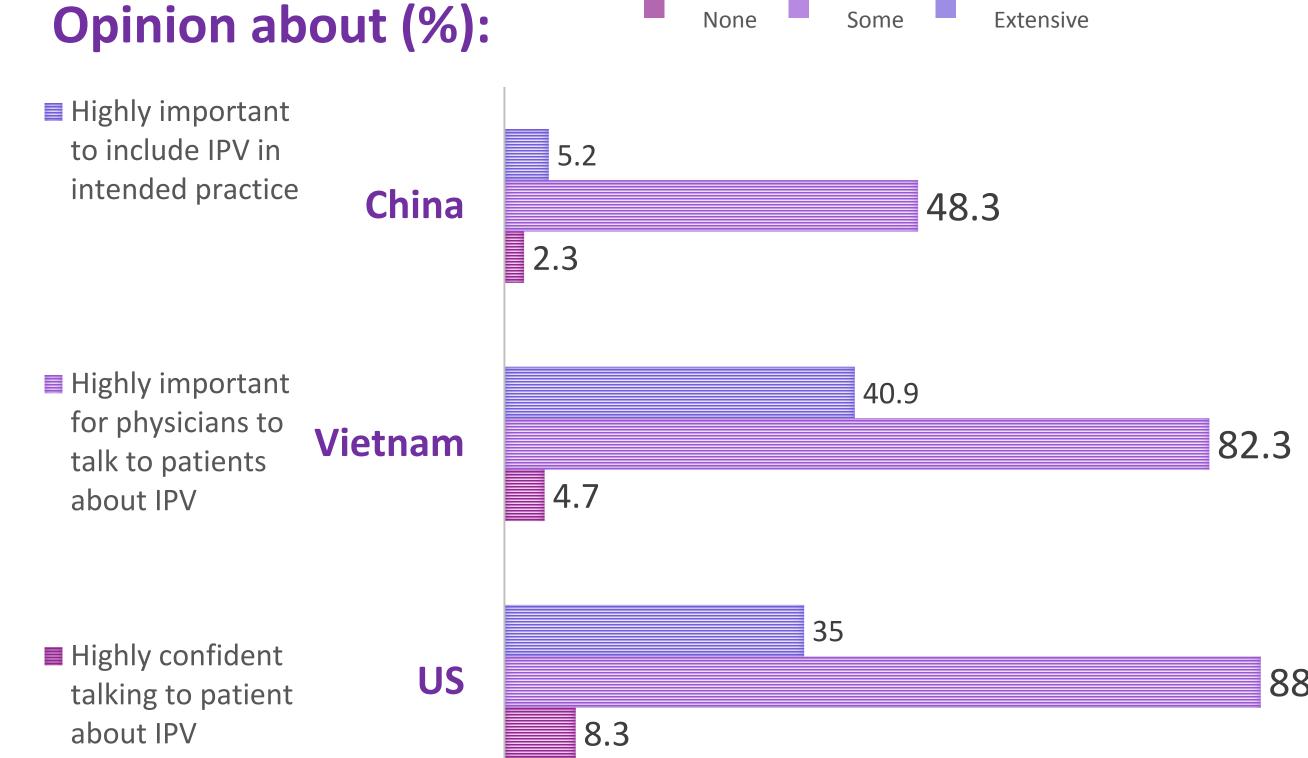


Vietnam

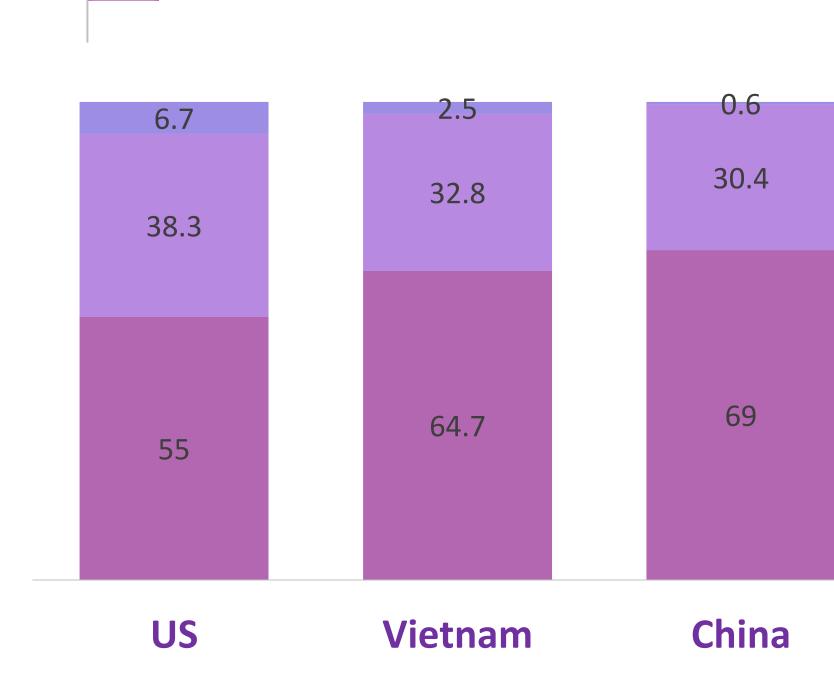
China



school (%)



3.3. Frequency of talking to patients about IPV (%)

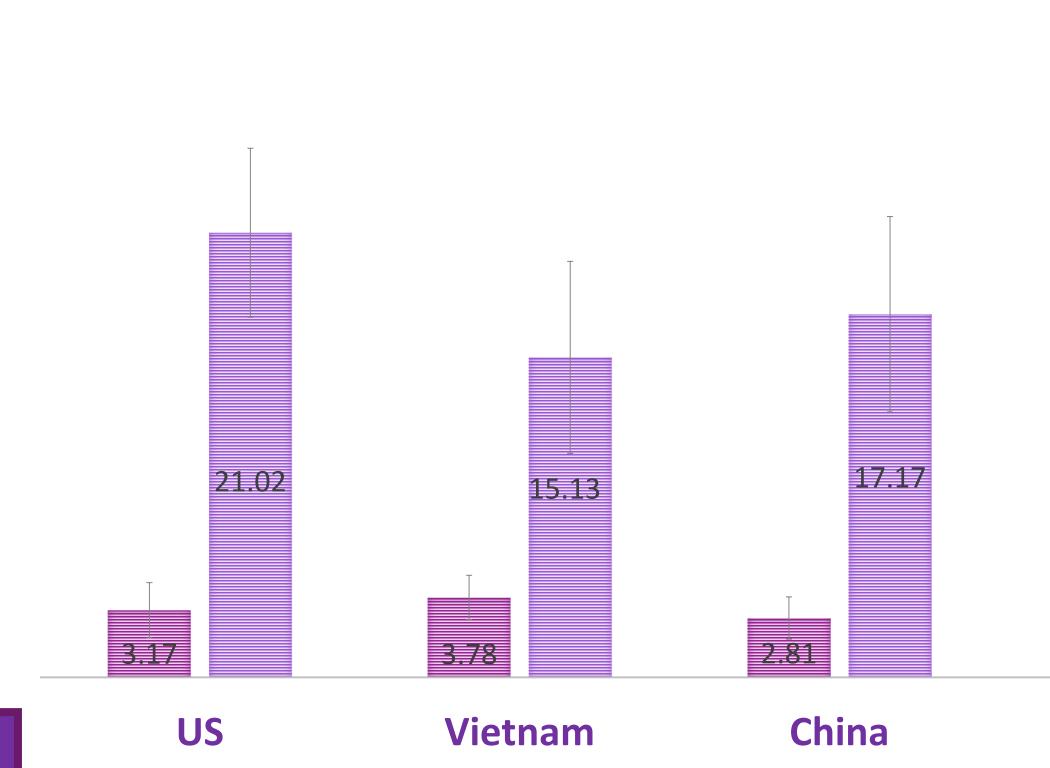


0.44 -0.3 China** Female Witnessed/heard Know a victim of Vietnam** **IPV** about IPV -3.68 -5.76 ■ Background* ■ Knowledge*

Figure 5. Regression analysis on background and knowledge of intimate partner violence (β)

Note:

- * Higher score indicates higher levels of background or knowledge of IPV.
- ** Reference group: "US" Results are significant at *p*<0.01. Results are not significant for coefficients of
- female, witnessed/heard about IPV, know a victim of IPV, and China on background.
- Results are not significant for coefficients of witnessed/heard about IPV on knowledge.





Sometimes

■ Background ■ Knowledge

Usually/ always

Note:

Never/ rarely

- ** ANOVA test
- Results are significant at *p*<0.01 Higher score indicates higher levels of background or
- knowledge of IPV

DISCUSSION & CONCLUSION

- The US participants reported higher levels of knowledge of IPV, were more likely to believe IPV was a serious problem, and considered IPV as a problem in health care compared to Vietnamese and Chinese students.
- Although the majority of Vietnamese and Chinese participants had never had training on IPV, about one-third in Vietnam, and two-thirds in China reported some confidence in treating patients with an IPV history.
- The participants who knew someone who had experienced IPV had higher knowledge scores than those who did not personally know an IPV victim.
- Although this study posed several limitations of a cross-sectional study, and a convenience sample, the results provided comparative information on IPV education for medical students in three countries that is not otherwise available.
- Medical school in Vietnam and China should consider including IPV training to improve their health care professionals' ability in recognizing and intervening with patient who are victims.
- Our results suggest that providing practical experiences in interacting with IPV victims will be an important component in IPV curriculum.
- Utilizing life experiences, such as knowledge about someone who had experienced IPV, will likely enhance medical students' understanding of the relevance of IPV victimization in health care.

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