

MEDICO-LEGAL IDENTIFICATION OF ADULT VICTIMS OF PHYSICAL DOMESTIC VIOLENCE

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Introduction: Domestic violence is a public health problem and doctors must have specific knowledge and skills to ensure an adequate response and prevention of this social phenomenon. Health and medicolegal systems are key authorities in providing evidence of domestic violence. One of their important tasks is to identify domestic violence victims, but for this purpose, physicians and forensic doctors must have appropriate knowledge and be provided with instruments, including scientific-based ones.

Purpose of the research: The research project aimed to assess the level of knowledge in the field of domestic violence among current and future physicians from the Republic of Moldova and to improve their ability to identify adult victims of domestic violence based on the victim's social profile and injury pattern.

Material and methods: To achieve this goal, 832 medical students and doctors were surveyed and 801 forensic medical reports regarding domestic violence adult victims were studied.

Results: The study revealed a lack of knowledge among physicians regarding domestic violence and the distinct elements of the health system's response to these cases. Medical respondents are affected by some stereotypes as other society members but to a lesser extent. It was found that an ordinary victim of domestic violence is a woman aged 39.4 years, affected regardless of her residence place, employed, and mostly assaulted by her life partner at home in January, June, and July, on Weekend, between 5-10 p.m., medico-legally examined 2.6 days after the assault. Injuries were especially inflicted by blunt objects, mostly by the perpetrator's body parts, averaging 4.6 in number, multipolar located predominantly on the face, arm, forearm, hand, and thigh, represented by soft tissues insignificant injuries; their severity is influenced by the alcohol consumption, the victim's age and gender.

Discussion: The research showed that doctors strongly need to be trained to strengthen their capacity to adequately respond to cases of domestic violence. Understanding the victims' social profiles and the injury pattern could enhance the ability of doctors, including forensic ones, to identify adult victims of domestic violence and ensure the provision of medical and forensic evidence for justice. The results of this study may be used as evidence-based proposals for enriching existing training programs or designing new ones in order to support healthcare practitioners in the correct management of domestic violence cases.

Conclusions: Training of medical professionals in the field of domestic violence is one of the key strategies for improving the healthcare response to victims. The research results can be used by medical and forensic doctors as evidence-based tools to identify adult victims of domestic violence, but may also be useful to other professionals interested in the social and injury portrait of adult victims of domestic violence.

Keywords: domestic violence, physicians, knowledge and perceptions, injury pattern

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