

# Hand Therapists' Attitudes, Environmental Supports and Self-efficacy regarding Intimate Partner Violence in their practice\*

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**Summary** Intimate partner violence (IPV) is a global health issue that impacts both men and women around the globe.

## 1. Relevance

Intimate partner violence (IPV) is a global health issue that may involve physical, psychological, or sexual abuse. While studies show musculoskeletal injuries are the second most prevalent injury in individuals with experience of IPV, there has been limited research on this issue in hand therapy settings.

## 2. Aims & Objectives

The aim of the current study is to describe the attitudes and beliefs of hand therapists in regards to the issue of IPV.

## 3. Methods

A standardized survey investigating perceptions regarding addressing issues pertaining to IPV was completed by 189 hand therapists in Canada or the US. Subscales of the survey addressed self-efficacy (in dealing with IPV), perceived systemic support, victim blaming, professional role responsibility, and safety. The data were analyzed using descriptive statistics while the impact of prior experience with IPV and demographic variables of gender, country, certified hand therapy (CHT), and occupation on scores was evaluated with Mann-Whitney analysis.

## 4. Results

Study shows that majority (66%) of therapists had some prior experience with IPV. Overall, therapist exhibited neutral mean self-efficacy ( $M=2.9/5$ ), safety of the clients and their own safety ( $M=3/5$ ) and support systems available when addressing IPV in practice ( $M=3/5$ ). However, therapists considered intervening as part of their professional role ( $M=3.8/5$ ) and reported low levels of victim blaming attitudes ( $M=4.4/5$ ). Those with first hand IPV experience were less likely to agree with attitudes of victim blaming ( $mdn=4.9/5$  vs  $4.6/5$ ,  $p=0.02$ ). Additionally, females were less likely to blame victims of IPV, than males ( $mdn=4.7/5$  vs  $4.3/5$ ,  $p=0.003$ ).

## 5. Conclusions

While hand therapists indicated that addressing IPV is part of their professional role, there were substantive barriers and low confidence in dealing with IPV, access/awareness of resources and perceived safety. Education and resources aimed at hand therapists should seek to address ways in which they can help support victims of IPV in hand therapy.

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