Editorial

Norman Goldstien MD

When I asked Florence J. Chinn MD, “retired” internist, medical consultant for the State of Hawaii Department of Social Services and Housing from 1979 to 1987, and very active co-chair of the Hawaii Medical Association’s Committee on Domestic Violence to serve as Guest Editor for this Special Issue, she hesitated for a day before accepting. She did not give the usual “but I’m so busy” (and she is!) replies, but she said:

“People may sympathize, but they can never fully understand the fears the victims experience. People may have fears when they learn of the horrors, but they can never feel the depth of the pain sustained by the victims. People may see the smiles and never realize the emotional scars hidden from view.”

Thanks to Florence and her stellar panel of contributing authors, this Special Issue of the Journal will help us to better understand and help those who suffer the physical and psychological pain of Domestic Violence.

Guest Editorial

Florence J. Chinn MD

Optimum care for victims of domestic violence can only be achieved when physicians have an understanding of the fundamental dynamics of the problem, a working knowledge of the available community resources and the recognition of such victims so that early intervention and referrals may be made to the support and advocacy groups for assistance.

The manuscripts selected for this issue present the various challenges of domestic violence faced by physicians. They include a frank accounting by an emergency department physician of his interest in this problem and how encounters over the years changed his attitude. One of Hawaii’s leading medical authority on the subject of domestic violence has written on some of the reasons why some physicians have not taken a more active role as advocates for victims who are their patients. While the physical traumas are successfully treated, oftentimes, the psychological effects are ignored or go unrecognized. A child and adolescent psychiatrist and medical school professor’s paper addresses the effects on children growing up with violence. Another paper reports on the research

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findings on a large group of abused victims long after healing has occurred for the physical trauma. Included is a paper by a highly respected trainer of personnel for support agencies dealing with victims, medical social workers as well as nurses and physicians. Because Hawaii is made up of people of diverse cultures, a newly-developed, culturally-sensitive approach for people of Hawaiian ancestry is included; the first of a series in approach to Hawaii’s multiethnic society.

Also featured are some of the high profile advocacy groups, including a paper by a police officer covering the officer’s experiences and the changes which the Honolulu Police Department has made in recent years. A simplified listing of emergency and support services for the major islands of the State of Hawaii is included.

October is Domestic Violence Awareness Month. Various events are being planned for the different islands to increase education and public awareness. A calendar is included for the candlelight vigils to be held.

Recent services made available, but may not be widely known, include:

- Implementation of Lifeline in which victims, who may be in imminent danger and need to reach the police without delay, may apply through PACT-Family Peace Center at 847-3285 for a free cellular phone preprogrammed for 911.
- On October 1, 1996, a new office under PACT-Family Peace Center will be opened for walk-in counseling, obtaining restraining orders, court advocacy and other services. This will enable victims to receive help without having to go to several different offices for these services.
- Earlier in the year the telephone company announced the availability of an automatic telephone service which reveals callers’ numbers. On the recommendation of advocacy groups, the telephone company will provide on request a blocking of such information at no charge. Thus victims who have had to go into hiding will not be revealing their locations.
- Another recent change makes it possible for victims to page for crises response workers to meet with them at any location other than in their homes. Previously, only physicians were given the pager number to request a crisis worker to go to the physician’s office to counsel the victim.
- A major camera firm is making available a domestic violence injury documentation kit to health professionals at hospitals and clinics at a substantially reduced price for a limited time. Call 1-800-250-6425 for additional information.

Domestic violence is a complex and sensitive problem. When taking patients’ history during medical encounters, physicians are most likely to be the first to learn of the abuse outside of the victims’ family. By referring the victims to advocacy and support agencies, while providing treatment for the physical and psychological injuries, physicians are providing the victims an opportunity to consider their options and safety planning with trained counselors. Abuse increases in frequency and severity over time. Safety for the victims and their children are of prime concern.

If readers find the contents of this issue to be educational and helpful as a resource guide, then our mission will have been accomplished.

Domestic violence is a crime. Know your State’s laws.