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## The Impact of a Brief Intervention on Medical Students' Readiness to Screen for DV - Changes in Decisional Balance and Self-Efficacy

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**The Impact of a Brief Intervention on Medical Students' Readiness to Screen for DV - Changes in Decisional Balance and Self-Efficacy**, Chirag B Patel, MSE. UTHSC-H Medical School, Houston, TX, 77054. Laura J Benjamins, MD. UTHSC-H Medical School, Houston, TX, 77054.

Introduction: Domestic violence (DV) affects millions of Americans each year. Yet, there is a dearth of theory-based DV curricula, resulting in physicians unprepared to screen for DV. This study utilized a survey based on constructs from the Transtheoretical Model to assess the readiness of first- and second-year medical students to screen for DV. Information from this survey will be used to help institutionalize DV education into the medical curriculum. Purpose: To raise awareness about the prevalence of DV among all demographic groups; to educate students on the resources available to help their patients who are experiencing DV; to assess the effects of an intervention on students' beliefs, attitudes, and readiness for actively incorporating DV screening into their routine patient encounters; and to encourage students to advocate and volunteer in the community to raise awareness about DV. Methods: A 36 item, self-administered survey was designed utilizing the constructs of decisional balance (pros and cons) and self-efficacy. The survey was administered before and after a presentation by a physician specializing in DV. Students were provided a DV pocket resource card in order to encourage them to put into practice what they had learned from the lecture. Results: A total of 26 students completed pre- and post- surveys. The number of students reporting their readiness to screen all patients increased (from 4 to 11) after the presentation. There was also a significant decrease in reported cons (from  $2.40 \pm 0.69$  to  $2.11 \pm 0.59$ ,  $p < 0.0071$ ), as well as a significant increase in pros (from  $3.76 \pm 0.69$  to  $4.06 \pm 0.64$ ,  $p < 0.0012$ ) and self-efficacy (from  $3.13 \pm 0.54$  to  $3.86 \pm 0.61$ ,  $p < 0.0000000086$ ). Conclusion: The Transtheoretical Model provides a useful framework for assessing medical students' readiness to screen for DV. Even a brief educational intervention proved to be effective in changing the students' attitudes and beliefs towards being more ready to screen for DV.