

Doctors experiencing domestic abuse feel socially and professionally isolated

30 March 2021



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Female doctors who suffer domestic abuse can feel unable to get help due to perceptions that it "should not happen to a doctor" and a judgmental culture in medical settings, a new study suggests.

Victim-survivors who work as doctors often do not feel able to talk about abuse confidentially and fear the consequences of reporting it.

Researchers from the University of Southampton interviewed twenty-one female doctors who had previously left an abusive relationship about their experience of [domestic abuse](#), barriers they faced when seeking help, and the impact on their work. The findings have been published in the *British Journal of General Practice*.

Dr. Emily Donovan, who led the study from the University of Southampton's Primary Care Research Centre said: "Domestic abuse is a huge problem for women from all walks of life but I was surprised to hear through conversations how prevalent it seemed to be in the [medical profession](#). Despite this, very little has been written about doctors who are victims, all the research seems to

focus on how doctors help other victims of domestic abuse. So I wanted to find out more about how it affected these women at work and their experiences of seeking support."

"It shouldn't happen to a doctor"

Several participants expressed embarrassment and felt that, as doctors, they "should have known better" and that they are "supposed to be intelligent, strong women who are not vulnerable." This could also lead them to question how they would be able to help their patients whilst feeling as though they could not look after themselves.

Despite the perceptions that it should not happen to them, many of the victim-survivors said that the nature of their job actually made them more vulnerable to persistent domestic abuse. Because they work hard every day to resolve problems for others, it was natural for this determination to 'keep going' to continue in their personal lives. For some participants, routinely dealing with difficult and demanding colleagues normalized the poor treatment that they experienced at home, causing them to persist with relationships even after they had become abusive.

Hard to disclose problems or seek help from fellow [health professionals](#).

The study identified a number of barriers to disclosing and seeking help, the main concerns being confidentiality, for example having to speak to [health](#) professionals who they know personally or professionally.

Many participants said that not fitting the stereotype of a female suffering domestic abuse caused disbelief from health professionals from whom they sought help as a patient. Some victim-survivors felt that health or social care professionals were quick to shut the conversations down, whilst some were threatened with being reported to the General

Medical Council (GMC).

Problems in disclosure were particularly prominent when the abusive partner was also a health professional, which often deterred the victim-survivor from reporting the abuse through fear that they would not be believed due to their partners' status.

A "judgmental" medical culture

A culture of presenteeism in [medical settings](#) and perception that weakness is not tolerated also made it difficult to get the time off needed to access domestic abuse services during working hours.

When victim-survivors were able to speak to health professionals who would listen and validate that they were experiencing domestic [abuse](#), it made a huge difference. Peer support groups were also extremely valuable in helping them understand that they were not alone and inspiring them to take action.

Speaking about how the medical profession can support its workers, Dr. Donovan said, "A designated confidential service for doctor victim-survivors would give them access to support without the risk of meeting their patients and colleagues.

"The medical profession also needs to change its culture so that its workers feel that they can talk to each other more and that they are being looked after as well as their patients."

More information: Emily Donovan et al.

Domestic abuse among female doctors: thematic analysis of qualitative interviews in the UK, *British Journal of General Practice* (2020). [DOI: 10.3399/BJGP.2020.0795](#)

Provided by University of Southampton

APA citation: Doctors experiencing domestic abuse feel socially and professionally isolated (2021, March 30) retrieved 25 April 2021 from <https://medicalxpress.com/news/2021-03-doctors-experiencing-domestic-abuse-socially.html>

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