

Abstract

Interpersonal violence (IPV) has become increasingly prevalent during the COVID-19 pandemic, and reporting rates have decreased due to increased social isolation. Thus, it is all the more important that physicians feel confident having conversations surrounding IPV and offering support to survivors. We hypothesize that current medical education is lacking in IPV exposure, and that said exposure would help physicians more confidently discuss and offer support to IPV survivors. To investigate this, we conducted a literature review. The National Institute of Health database PubMed and the American Association of Medical Colleges' journal database MedEdPortal were searched for articles. Search terms included "domestic violence," "intimate partner violence," "interpersonal violence," "medical education," "trauma-informed care," and "trauma physician training." Any article prior to the year 2000 was not included in the search. Article abstracts were scanned for relevance and rigor with opinion pieces and narrative articles excluded. Overall, we found that current medical education exposure to IPV entails single case-based sessions or lectures with no continuity. The studies on the efficacy of such sessions were therefore limited; however, the best outcomes were achieved when experiential learning was incorporated (beyond simple didactics) and when community resources were involved. Thus, we have identified a lack of longitudinal IPV exposure and a paucity of effective pedagogical methods in IPV training.