

Interview Guide

Recruitment information sent to the following 11 national medical societies and 118 state chapters: American Medical Women's Association, American College of Osteopathic Emergency Physicians, American Academy of Family Physicians (including state chapters), American Society of Plastic Surgeons (including state chapters), American Academy of Cosmetic Surgery, American Medical Association, American College of Physicians, American Academy of Emergency Medicine, Society of General Internal Medicine, American College of Obstetricians and Gynecologists, and American College of Emergency Physicians (including state chapters).

Initial Introduction

Thank you for agreeing to participate in this interview. Let me remind you that whatever you say will not be linked to your name. You may refuse to answer any of these questions. There are no right or wrong answers, so you are encouraged to speak freely.

Consent Information

- The purpose of the study is to understand and describe how physicians in the United States respond when their patients are or suspected of experiencing situations of domestic violence. We hope that by understanding and describing current physician responses, we can make recommendations for how to improve trauma-informed care in the United States.
- What you can expect is an approximately 30-60-minute interview where you will be asked a series of questions about any experiences you may have had with patients who are or may be victims of domestic violence, as well as questions about how you would address the situation with these patients, if at all.
- I will be recording this interview and by participating, you consent to allowing us to use quotes and/or paraphrased words from the interview. *Let me remind you that whatever you say will not be linked to your name.*
- And finally, you always have the right to withdraw the data you have provided for this study.
- Do you have any questions for me about the study or the procedures? If not, do you feel comfortable moving forward and consent to participating in the study?
- We will now review the informed consent form.

As a reminder, this interview will take approximately 60 minutes, however, this can vary depending on where our conversation takes us. Do you have any time constraints today? We can stop whenever you would like.

Do you have questions or anything else you would like to discuss before I start the recording?

What gender do you identify with?

What is your medical specialty?

Please describe the primary patient population you work with. (what setting, urban, etc.)

In which state do you practice medicine?

For how many years have you been in practice?

Main Interview

Topic

Example Probes

To get started, I want to first ask you a bit about your background regarding domestic violence.

In this study, we are using the term domestic violence to describe abuse/violence between two intimate partners (also called intimate partner violence). Our definition of domestic violence in this study does not include all forms of interpersonal violence among family members. So, please respond to the following questions in the context of partner-specific situations of violence.

What experience do you have with providing care for patients who have experienced or you suspected of experiencing domestic violence?

Have you ever suspected that a patient was experiencing abuse, even if they didn't explicitly disclose that information? If yes → move to next question

Please describe any official recommendations or policies you are aware of (in or outside of your medical practice group) in regard to addressing or reporting domestic violence as a healthcare practitioner.

For example, does your state have any policies about mandated reporting?

Or, does any institution you have worked with have any formal reporting process?

Now, I'd like to ask about how you did or would respond to these patients.

What actions did or would you take if/when a patient explicitly disclosed to you that they were experiencing violence in their relationship(s)?

What was or would be your immediate response after the patient discloses such information? From there, take me step-by-step as to what you would do.

Do/would you ever make any recommendations to these patients on what to do moving forward?

What experiences or factors influence how you respond to situations of disclosed

For example- The amount of time you get with your patient; prior experience; training;

abuse/violence?	observations of colleagues, etc.
Do you think your medical education and training prepared you for navigating these situations?	<p>Do you feel your training in medical school and residency was adequate to prepare you to address DV?</p> <p>If you received formal training in DV or trauma-informed care, what aspects of the training helped prepare you for working with patients who have experienced DV? What were some gaps or limitations of the training?</p> <p>Were there any other factors, aside from training, do you feel have helped prepare you?</p> <p>If you feel you could be more prepared, what would be helpful in giving you the necessary additional knowledge?</p>

Wrap-up Questions
<p>We're just about at the end of the interview. I'm wondering if there is anything else you want to share with me about this topic? (i.e. are there things I should be asking about that we didn't cover?)</p> <p><i>Thank you again for your time and for providing thoughtful responses to the interview questions. Do you have any additional questions for me?</i></p> <p><i>One last question- Do you have any suggestions for other physicians who might be interested in participating in this study? If so, I would appreciate it if you could share my contact information with them and ask that they reach out to me to participate in the study. You may share my phone number ([researcher phone number]) and email ([researcher email]).</i></p>