Sullivan CM, Bybee DI (1999) Reducing violence using community-based advocacy for women with abusive partners. *Journal of Consulting and Clinical Psychology* **67**: 43–53.

Walby S, Allen J (2004) *Domestic Violence, Sexual Assault and Stalking. Findings from the British Crime Survey. Home Office Research Study 276.*Home Office Research, Development and Statistics Directorate.

Walby S (2009) The Cost of Domestic Violence. Women and Equality Unit.

Wathen CN, MacMillan HL (2003) Interventions for violence against women. Scientific review. *JAMA* 289: 589–600.

Yearnshire S (1997) Analysis of cohort. In *Violence Against Women* (eds S Bewley, J Friend, G Mezey). RCOG Press.

MCQs

Select the single best option for each question stem

- 1 The strongest single risk factor for experiencing severe domestic violence is:
- a female gender
- b age less than 30
- c partner misuses alcohol/drugs
- d family history of abuse
- e socioeconomic deprivation.

2 The following statement is true:

- a 25 000 children witness domestic violence in their homes each year in England and Wales
- **b** 20% of male homicide victims are killed by a partner/ex-partner
- c pregnancy is usually associated with a decrease in violence
- d domestic violence is the leading cause of maternal deaths in the perinatal period
- **e** two women are killed by a partner or ex-partner each week in England and Wales.

3 It is true that:

- a patients who have experienced domestic violence are at a greater risk of injury when they leave the relationship
- b strangulation injuries are rare in victims of domestic violence
- c referral to a multi-agency risk-assessment conference should be routine for all cases of domestic violence
- d reasons for concern about domestic violence should not be included in a patient's medical record if she does not disclose violence
- **e** domestic violence is not associated with psychotic disorders.
- 4 The following is not good clinical practice:
- a routine enquiry about domestic violence
- **b** provision of information after disclosure for all victims to take home
- **c** safety assessment by mental health professionals

- **d** referral to a refuge for woman at a high risk of serious injury
- e always seeing women with partners for assessments.
- 5 A multi-agency risk-assessment conference is:
- a attended by the victim of domestic violence
- b relevant for all cases of domestic violence
- c always police-led
- **d** should be attended by a mental health professional
- **e** is only carried out where there are child protection concerns.

IN OTHER WORDS

Extract from A Guard Within, by Sarah Ferguson

Selected by Femi Oyebode

Sarah Ferguson wrote an intensely moving account of her experience of psychoanalysis following the sudden and unexpected death of her psychoanalyst before the end of her treatment. This excerpt is from her book *A Guard Within*, published by Chatto & Windus, 1973. Reprinted by permission of The Random House Group Limited.

doi: 10.1192/apt.18.2.136

You did die. We talked so often of your dying, and you were determined not to, not just yet. But you did die. Nearly four months ago, and I still cannot believe it. Most people do not want to talk about death and mourning. I want to talk of it all the time because you are the person who I have loved the most, and you have died. I know all about the outer world of social responsibility, so no one can accuse me of continuing to grieve for you. You did not wish to leave your wife and your daughter and your brother, and some of your colleagues and friends. You did not wish to leave me either, and I do not know how to live without you. You knew it would be so.