

Development of the Woman Abuse Screening Tool for Use in Family Practice

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Background: This study developed a screening tool for use by family physicians to identify and assess women patients experiencing emotional and/or physical abuse by their partner. **Methods:** An initial set of eight questions developed for the Woman Abuse Screening Tool (WAST) was completed by both abused and non-abused women. Participants were also asked to indicate their comfort in answering the questions in both research and family practice contexts. They also completed the Abuse Risk Inventory and a demographic questionnaire. Analysis of the WAST included 1) standard assessment of the validity and reliability of the measure and 2) examination of the efficacy of further reducing the number of questions on the WAST for screening purposes. **Results:** The final samples of abused ($n=24$) and non-abused women ($n=24$) differed significantly on a number of demographic and abuse variables. After eliminating one of the original items, a strong single factor structure was identified for the WAST that accounted for 85% of the total variance in responses to the WAST items. The WAST was found to be a highly reliable measure; coefficient alpha was estimated at .95. The scale also demonstrated construct and discriminant validity. The abused women reported being less comfortable responding to the WAST questions, in both the research and family practice contexts, than the non-abused women. The two WAST questions the abused women reported being most comfortable with were used to construct the WAST-Short for initial screening purposes. The WAST-Short correctly classified 100% of the non-abused women and 91.7% of the abused women. **Conclusions:** The WAST demonstrated good reliability and validity and discriminated between abused and non-abused women. Development of the WAST-Short provides physicians with a relatively unobtrusive screening tool for assessing abuse. The use of additional WAST questions can be used to further explore the possibility that a woman patient is experiencing abuse by her partner. Further study includes field testing the WAST in the family practice setting.

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Despite growing public recognition of the high prevalence of spousal abuse as a social problem with significant health implications,^{1,2} family physicians often have difficulty recognizing that abuse may underlie physical and emotional symptoms exhibited by patients.^{3,4} Consequently, identification of women experiencing abuse remains disturbingly low in family practice settings.⁵⁻¹¹

Reasons for underdetection have been attributed to both physician and patient factors.^{7,10,12-17} Previous studies suggest that physicians would benefit from having questions available to them for exploring the

possibility of abuse.^{5,6,14,18,19} In fact, in our prior research, using both focus groups and educational forums, family physicians identified the use of a valid and reliable screening tool as one possible solution to the problem of under-identification of spousal abuse.^{16,20} Many reliable and valid measures of spousal abuse²¹⁻²⁸ are available. However, a review of these questionnaires and their scoring procedures revealed that these measures were either too lengthy, too cumbersome, or too intrusive for easy use by family physicians in practice settings. Other measures of abuse have been developed for specific populations (ie. pregnant women), limiting their applicability to the general population.^{29,30}

This study developed a screening tool for use by family physicians to identify and assess female patients experiencing emotional and/or physical abuse

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