Domestic Violence and Expectant Mothers

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Objectives

- Comprehend that interpersonal violence is a public health problem and recognize two examples of the effects of interpersonal violence on the mother and the developing fetus.

- The participant will understand the Spectrum of Prevention and two ways to utilize this tool in preventing violence during pregnancy.
Texas Family Violence: act by a member of a family or household against another member that is intended to result in physical harm, bodily injury, assault or a threat that reasonably places the member in fear of imminent physical harm.
Texas Family Violence

- 177,983 incidents in 2011
- 73% victims were female
- 97% were assaults
- Most common weapon: physical force
- 12,188 assaults in Tarrant County
Violent Crime

Fort Worth Violent Crime Index

Crime Index corresponds to incidents per 100,000 inhabitants

Some Texas DV Laws

- 1st offence: Class A misdemeanor up to 1 year in county jail
- Firearm possession is prohibited for 5 years following release from jail
- School districts are required to adopt and implement a dating violence policy
National Law Violence Against Women Act

- 1994/extension in 2013
- Funding toward investigation/prosecution
- IPV, sexual assault, dating violence, stalking
- Emphasis on coordinated effort with community, enforcement, prosecutors, victim services response to DV
JPS Trauma

- 2500 admissions/year for trauma
- MVC
- Fall
- Assaults
- MCC
- GSW
IPV: Definition

- A pattern of coercive behaviors that may include repeated battering and injury, psychological or emotional abuse, sexual assault, progressive societal isolation, economic deprivation, intimidation and stalking.
IPV

- Affects both sexes
- Disproportionately affects women
- About 30% require medical care
25% of women have been raped/physically abused by current or former spouse/partner.

DV reported in 7%-23% of trauma cases.

Women experiencing DV usually don’t present with a specific set of symptoms.

30% of DV cases, the 1st incident occurs in pregnancy.
Leading cause of injury to American women ages 15-44

25% of ED visits by women
Cost of IPV

- Medical care, mental health services and lost productivity estimated > $8 billion
Infant Mortality

- Higher rate in African American women with college degree: higher than white or Hispanic mothers who did not complete high school
- Overall, Tarrant county second highest in Texas
Leading cause of death in pregnant and recently pregnant women is homicide
Experienced physical abuse during pregnancy: significantly more likely victims of abuse after pregnancy and 3X more likely to be victims of violence causing death
Abused pregnant women often present with multiple risk factors that may impact maternal and fetal health.
Physical violence during pregnancy is the 2nd leading cause of trauma during pregnancy.
Pregnancy and IPV

- Less likely to enter prenatal care early
- Higher risk for perinatal, neonatal and childhood mortality
Pregnancy & IPV

- Long length of hospital stay due to health issues
- Overall poor physical and mental health
Pregnancy and IPV

- Engaging in risk-taking behaviors
- Smoking
- Substance use
- Inadequate prenatal care
Pregnancy and IPV

- Depression
- Anxiety
- Post-traumatic stress disorder
Pregnancy and IPV

- DV during pregnancy 2%-23%
- Preeclampsia
- Kidney infection
- Gestational diabetes
- Placenta previa
- C-section delivery
IPV & Pregnancy: found at a higher rate for:

- Poverty
- Unmarried
Pregnancy & Trauma

- Direct trauma
- Preterm labor
- Rupture of membranes
- Feto-maternal hemorrhage
- UTI
- STD
- 1 in 12 pregnancies
Higher rate of spontaneous abortion
Preterm rupture of membranes
Uterine rupture
Placental abruption
Stillbirth
IPV and Birth Outcomes

- LBW
- Increase in preterm birth
- Intrauterine fetal death
- 1 in 3 admitted for trauma will deliver
- Doesn’t end when baby is born
IPV & Pregnancy

- Majority of pregnancy-associated homicides were committed by current or former intimate partners.
- Most common during first 3 months of pregnancy
- Firearms the most common method of death
- Most likely to be black, younger than 25 and unmarried
IPV & Pregnancy

Most return to abusive home post-partum
Increase in frequency and severity of violence in postpartum period
Inconsistent contraception use
Unplanned pregnancies
STD’s
Recognizing IPV

- No **consistent** formal content taught across colleges and universities
- OB/GYN residents receive training
- No formal training for family practice
- No formal training in many nursing schools
Violence seems so *normal* in our society
Norms and Violence Against Women

- Limited female roles for and oppression of women
- Violence and aggression as an acceptable way to solve problems
- Narrow male roles promoting domination, risk behavior
- Power; maintaining control over others
- Privacy and secrecy
Preventing IPV requires tipping the norms that contribute to it.
Prevention

Prevention: systematic process that promotes safe, healthy environments and behaviors, reducing the likelihood or frequency of an incident, injury or condition occurring.
Prevention

- **Primary Prevention**: taking action before the problem arises
- **Secondary Prevention**: relies on physical changes. Focuses on responses, that take place after condition has developed/recognized
- **Tertiary prevention**: refers to treatment of and rehabilitation from the consequences of the condition
Prevention

Heart Disease Prevention For Women

Obesity Prevention and Public Health

Prevent AIDS

Change Today For a Healthier Future

CANCER Prevention

A NATIONAL NEWSLETTER AND WEB SITE FROM NEW YORK-PRESBYTERIAN HOSPITAL
Benefit of Prevention

- Reduction in morbidity and mortality
- Improved quality of life
- Reductions in disparities in IPV
- Cost effective use of resources
Benefit of Prevention

- Impact on related forms of violence - IPV/youth violence
- Improvements in health status
- Improvements in broader conditions such as greater equity/opportunities in the workplace
Awareness of a risk to health does not automatically lead to protective action.

Violence arises out of a complex interplay of individual relationship, social, political, cultural and environmental factors.
Facts and Beliefs

- 72% don’t want help
- 30% are afraid they abuser will find out if they report
- If they do a better job, the abuse will stop
- Most leave and return to the abuser 7-12 times before leaving permanently
Strengthening individual knowledge and skills: enhancing an individual’s ability to prevent injury

- Implement evidence-based dating violence prevention programs
- Home visitation by public health nurse
- Low cost couple counseling
- Screening
Promoting community education - reaching groups of people with information and resources to promote health and safety

- Positive male behavior classes in school
- Promote information and resources regarding IPV through social media
Spectrum of Prevention

- Educating providers - Informing providers who can share knowledge and skills to others
  - Training medical providers to recognize and screen for domestic violence
  - Educate law enforcement in early recognition
Spectrum of Prevention

Fostering coalitions and networks - bringing together groups and individuals for broader goals and greater impact

• Faith community groups
• Participate in DV Death Review team
• News media-coverage of IPV as a preventable problem
Spectrum of Prevention

Changing organizational practices—adopting norms to improve health and safety

- Businesses develop and enforce strong anti-harassment and anti-violence policies that specifically address IPV
Influencing policy and legislation-
Developing strategies to change laws and policies to influence outcomes in health, education and justice

• Support legislation that allows minors to petition for PO on their own behalf
• Support legislation that holds an offender more accountable for a 2\textsuperscript{nd} violation
Conclusion

- Prevention of Intimate Partner Violence
- Access to healthcare
- Standardization of Domestic Violence screening
- Reduction of infant mortality
- Improved outcomes
- Stronger families
- Healthier communities
Resources

- “Poised for Pr3evention: advancing Promising Approaches to Primary Prevention of Intimate Partner Violence.” Executive Summary Prevention Institute. [www.preventioninstitute.org](http://www.preventioninstitute.org)
Resources


CDC. “Understanding Intimate Partner Violence.” National Center for Injury Prevention and Control: Division of Violence Prevention 2012: cdcinfo@cdc.gov
Resources

Jennifer E Raffo, Chirstian I Meghea, Qi Zhu and Lee Anne Roman. “Psychological and Physial Abuse Among Pregnant Women in a Medicaid-Sponsored Prenatal Program.” Public Health Nursing 27.5 (9-2010): Print


“Domestic Violence and Its impact on Children’s Development.” Presentation delivered at the Department of Community Services Fourth Domestic Violence Forum in Great Britain. September 2002 Summary: Print

Resources

Questions?
800-799-7233 National DV Hotline

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