

Title:

Exploring the Occurrence of Rural Pregnant Women's Experiences With Abuse From Multiple Partners

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Session Title:

Rising Stars of Research and Scholarship Invited Student Posters

Keywords:

Abuse, IPV and Pregnancy

References:

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Sharps, P.W., Bullock, L., Campbell, J., Alhusen, J., Ghazarian, S., Bhandari, S., Schminkey, D. (2016). Domestic Violence Enhanced Perinatal Home Visits: The DOVE Randomized Clinical Trial. *Journal of Women's Health*, 25(11), 1129-1138. DOI: 10.1089/jwh.2015.5547.

Abstract Summary:

Intimate partner violence is a prevalent issue and when it occurs during pregnancy it has effects beyond the mother to the child. This study quantitatively and qualitatively examines the results of the DOVE intervention on abused women with multiple partners.

Learning Activity:

| LEARNING OBJECTIVES | EXPANDED CONTENT OUTLINE |
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| The learner will be able to discuss the effects of the DOVE intervention on pregnant women with multiple abusers. | The learner will be provided information via poster presentation |
| The learner will be able to understand the need for future research regarding the impact that multiple abusive partners could have on the children living in the home. | The learner will be provided information via poster presentation |

Abstract Text:

Background: Intimate partner violence (IPV) during pregnancy affects up to 17% of women (Bailey, 2010) and impacts maternal physical and mental health (Ludermir et al., 2010). IPV includes any form of abuse: physical, sexual, verbal, or emotional. The impact of IPV extends to the health of children, including an increased risk of complications during pregnancy and the neonatal period, mental health problems, and cognitive and socio-emotional delays (Silverman, Decker, Reed & Raj, 2006). Negative effects on maternal care of and bonding with her children is also apparent (Boeckel, Wagner, & Grassi-Oliveira, 2017). The DOVE study (Sharps et al., 2016) is one of the few studies that followed women longitudinally throughout pregnancy and post-delivery and was able to document women who had multiple partners during the study time period.

Methods/Design: The parent study was a randomized control trial to examine the effectiveness of a structured IPV intervention, DOVE, compared to usual care in decreasing violence exposure over a 24 month period. The DOVE intervention consisted of perinatal home visitors interviewing, counseling, providing resources for support, and creating safety plans for the clients from their abusers. The study was conducted in urban and rural settings with 147 rural women who were enrolled in perinatal home visiting programs, screened positive for IPV during the perinatal period, and agreed to participate in the study. This presentation describes a sub-set of these rural women (n=58) who reported having multiple partners during the study period. Quantitative and qualitative data obtained at baseline, delivery, 3, 6, 12, 18, and 24 months post-delivery were analyzed for this sub-set of women.

Results: Seventy percent (n =40) of the 58 rural women with multiple partners were abused by the father of the baby (FOB) at baseline. The prevalence of the FOB who continued to be abusive was 58% at delivery to 17% still being abusive at 24 months post delivery. Twenty-nine rural women (50%) were abused by the FOB and another partner at baseline. If the woman had a partner at baseline who was not abusive at that time, in most cases, he became abusive over the course of the study.

Qualitatively there were three main themes that were identified in the data that can explain why these women had multiple partners. Women would return to the same abuser or another abuser/s due to financial, social, and emotional reasons. These reasons also prevented women from leaving an abusive relationship/s in the first place. Financially, many women would not have been able to support themselves and their children if they did not have the funds their partners provided them. They were tied to this part of the relationship. Many women also could not leave their partners because of social reasons, meaning their social support network was in the area their abuser was in or they were geographically isolated in rural regions, so they felt they couldn't leave. Additionally, numerous women admitted to being in love with one or more of their partners, even if they had been abusive. These reasons were common among those studied as to why they had not or did not want to leave their abuser or abusers.

However, women felt an increased level of safety when their partners were in jail; although the women couldn't leave their situation, they benefited when their abusers were moved out of the home. Interestingly, abusers were often incarcerated due to offences other than abuse, such as theft. Another significant finding was that if the father of the baby was abusive, the abuse continued throughout the study. There was a trend of decreased contact and/or abuse around delivery and 3 months after delivery, most likely because the fathers felt more involved or proud of their new child, and other partners felt aware that this is a delicate time. Overall, there was a decline in abuse by the end of study for those who received the DOVE intervention, but the violence rarely ceased.

Discussion and recommendations: Screening for IPV during pregnancy is routine in the U.S., but less emphasis has been put on screening mothers during pediatric follow-up visits. Additionally, most screening tools only ask about the current partner. Data from this study demonstrates that a significant number of women have multiple partners, especially in rural areas of the US, and more than one can be abusive at any one time. The DOVE intervention provided the knowledge for women to recognize abuse and to respond to it (Sharps et al., 2016), even if the response was just to create a safety plan with someone to call or somewhere to go during an abusive situation.

The DOVE intervention did make a difference and should be implemented not only prenatally, but also during pediatric visits because exposure to maternal abuse affects the development of her children. Children, who are developmentally old enough to have a private conversation with a health care provider, should also be screened for any abuse in their households. However, future research is needed to determine how multiple partners coming in and out of households, with many of them being abusive, impacts the children. The DOVE study gave us a glimpse of children who saw multiple men, many often strangers, coming through their home, abusing their mother and leaving. The vulnerability this creates in children is immense and should be further studied.