



# Complex Connections

How domestic violence  
impacts health and  
healthcare



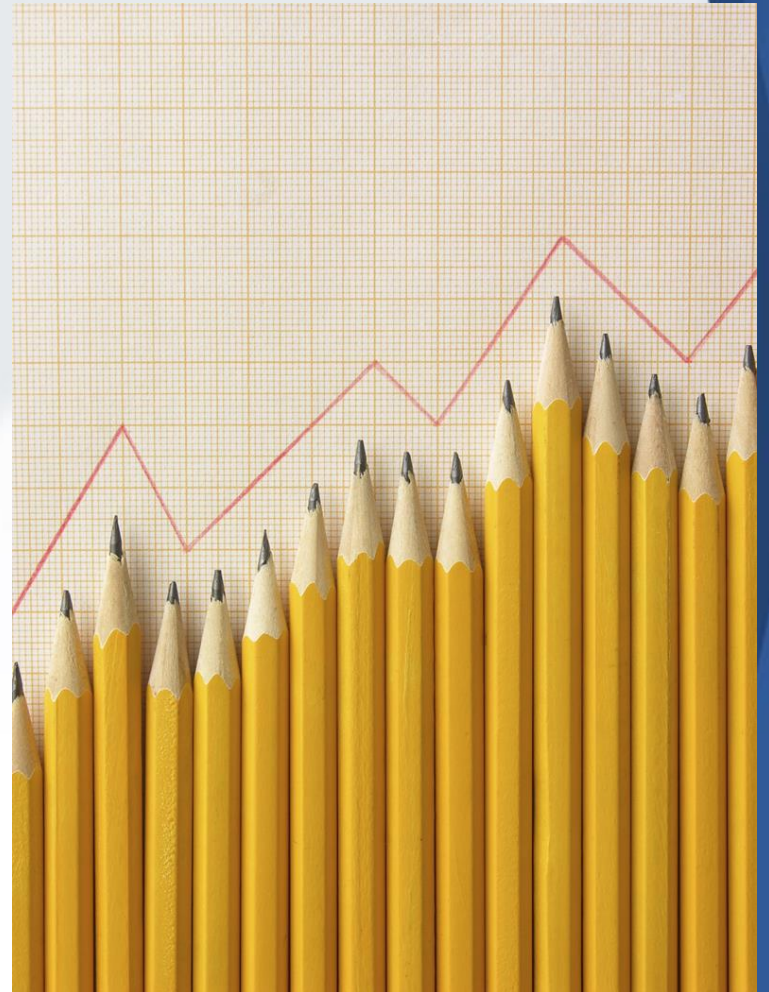
# Complex Connections

- We know that DV/SA can negatively impact survivors':
  - health,
  - ability to access healthcare,
  - and ability to sufficiently support themselves and their children.
- Add in poverty to the mix and those issues become more difficult and more complex.





A look at the numbers



# DV and Health



- 37% of emergency room visits are a result of DV.

Rand, Michael R. 1997. *Violence-related Injuries Treated in Hospital Emergency Departments*. U.S. Department of Justice, Bureau of Justice Statistics. Washington, DC.

- In addition to injuries sustained during violent episodes, physical and psychological abuse are linked to a number of adverse physical health effects including arthritis, chronic neck or back pain, migraine and other frequent headaches, stammering, problems seeing, sexually transmitted infections, chronic pelvic pain, and stomach ulcers.

Coker, A., Smith, P., Bethea, L., King, M., McKeown, R. 2000. "Physical Health Consequences of Physical and Psychological Intimate Partner Violence." *Archives of Family Medicine*. 9.

# DV and Children's health



- Children who witness domestic violence are more likely to exhibit behavioral and physical health problems including depression, anxiety, and violence towards peers. They are also more likely to attempt suicide, abuse drugs and alcohol, run away from home, engage in teenage prostitution, and commit sexual assault crimes.

Jaffe, P. and Sudermann, M. 1995. "Child Witness of Women Abuse: Research and Community Responses." In *Understanding Partner Violence: Prevalence, Causes, Consequences, and Solutions*, vol. 3 edited by S. Stith, and M. Straus. Minneapolis, MN: National Council on Family Relations.

Wolfe, D.A., Wekerle, C., Reitzel, D. and Gough, R. 1995. "Strategies to Address Violence in the Lives of High Risk Youth." In *Ending the Cycle of Violence: Community Responses to Children of Battered Women*, edited by E. Peled, P.G. Jaffe, and J.L. Edleson. New York, NY: Sage Publications.

# DV and Reproductive Health



- One study found that 51% of adolescent mothers on public assistance, and two in three of those who experienced DV at the hands of their boyfriends, experienced some form of birth control sabotage by a dating partner.

Domestic Violence and Birth Control Sabotage: A Report from the Teen Parent Project. 2000. Center for Impact Research. Chicago, IL. Available at <http://www.impactresearch.org/documents/dvandbirthcontrol.pdf>

- Forty percent of pregnant women who have been exposed to abuse report that their pregnancy was unintended, compared to just eight percent of non-abused women.

Hathaway JE; Mucci, LA, Silverman JG, Brooks DR, Mathews R, Pavlos CA, Health Status and Health Care Use of Massachusetts Women Reporting Partner Abuse. American Journal of Preventive Medicine. 2000; 19(4); 318-321.

# DV and Reproductive Health

- Women disclosing physical violence are nearly three times more likely to experience a sexually transmitted infection than women who don't disclose physical abuse.

Coker, AL, Smith PH, Bethea L, King MR, McKeown RE. Physical Health Consequences of Physical and Psychological Intimate Partner Violence. Archives of Family Medicine. 2000; 9 451-457.



# DV and access to healthcare



- Historically across the country, survivors could not get insurance, or had to pay higher rates to be insured as a result of the DV they experienced.
- Survivors also face shame and fear about accessing healthcare services.
- Batterers may prevent access to healthcare as a tactic of control.



# Batterer Tactics

- Abusers often target their partners' health as a way to gain more power and control over them.
- Batterers may hide, ration or dispose of their partner's necessary medications or treatments.



# Batterer tactics

- Batterers may infect their partners with an STD, like HIV/AIDS (whether intentionally or by refusing to use condoms which would protect against infection).
- Batterers may sabotage efforts at birth control (by hiding pills, refusing to wear condoms, disallowing access, calling her a “slut” if she wants to use protection, intimidation, etc.).



*What are some other tactics batterers use?*

# The Big Picture

- Poverty and domestic violence work together to disadvantage women's health, safety, and ability to have autonomy over their own lives.

Romero, D., Chavkin, W., Wise, P.H., & Smith, L.A. (2003). Low-income mothers' experience with poor health, hardship, work, and violence. *Violence Against Women, 9*, 1231-1244.



# The Big Picture



Just as abuse can plunge a survivor into poverty (because she cannot work, or is not allowed access to household income), health problems and limited access to healthcare can have the same effect. (By limiting her ability to work, mounting hospital bills, etc...)

# The Big Picture

- Advocates can play a vital role in confronting these realities.
- By supporting health professionals to engage with patients about DV and enhancing our own advocacy practices, we can counter the devastating impacts of DV and poverty on health.



# Screening for Domestic Violence



- Healthcare professionals can be an important point of contact for survivors.
- Studies have shown that when healthcare professionals ask patients about domestic violence, the rates at which patients disclose abuse goes up significantly.
- However, doctors and nurses do not always routinely screen their patients for domestic violence.

# Screening for Domestic Violence

- Advocates should engage with local providers and encourage them to address DV.
- One tool that providers can put into place is RADAR. Some providers use this tool as a required process for individual patient meetings.

## Keep violence against women on your RADAR

R = Routinely Screen Female Patients

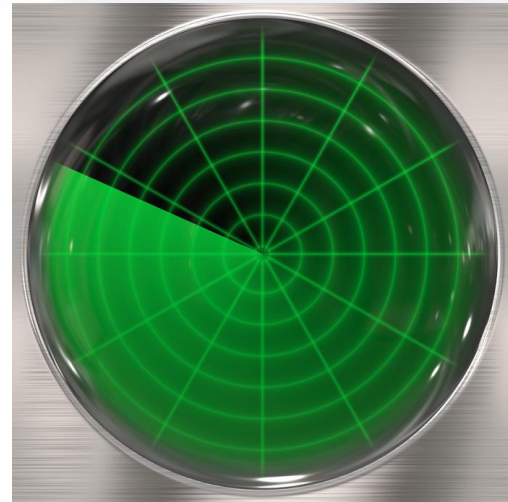
A = Ask Direct Questions

D = Document Your Findings

A = Assess Patient Safety

R = Review Options & Referrals

<http://www.doh.wa.gov/hsqa/emstrauma/vaw/protocols.htm>



# Screening for Domestic Violence



- There are a number of excellent resources on this topic and the issue of healthcare providers screening their patients for domestic violence is more detailed than what we can go into here.
- For more information check out:
  - Futures Without Violence's Health Cares About IPV website for information and materials on the role of healthcare providers and DV <http://www.healthcaresaboutipv.org/>