

Abused women seek more infant health care, study finds

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Pregnant women who experience intimate partner violence (IPV) before, during or after pregnancy often suffer adverse health effects, including depression, post traumatic stress disorder, anxiety and chronic mental illness. Now, University of Missouri researchers have found that women who experience intimate partner violence are more likely to seek health care for their infants than non-abused women. Awareness of mothers with frequent infant health concerns can help health care providers identify and provide aid to women in abusive relationships.

"Health care providers should view frequent calls or visits for common infant health concerns as red flags," said Linda Bullock, professor in the MU Sinclair School of Nursing. "Although it can be difficult for providers to see beyond immediate concerns, the findings suggest that considering only voiced concerns may represent lost opportunities to intervene on more critical health matters that impact mothers and children. Providers have a chance to help mothers who may not voice concerns about intimate partner violence."

In the study, more than 60 percent of women who experienced intimate partner violence sought health consultations for their infants. Abused women were more likely to seek infant care, reported more stress, were more depressed, and had less support than non-abused women. Less than 54 percent of non-abused women sought infant health consultations. Bullock said significant maternal stress may be a contributing factor to increased infant care. Additionally, women may use their children's health care problems as a way to seek help for themselves.

Bullock recommends that pediatric and women's clinics have a routine policy of IPV screening and education for all women. Women may not voice concerns about their own safety, but multiple calls and visits to physicians can be signs of IPV.

"The most powerful intervention may be as simple as repeated screening for IPV throughout pregnancy and post-delivery visits," Bullock said. "Providers have a chance to help mothers who may not directly seek the necessary resources to help themselves. Referrals to support programs such as battered women's services, counseling, parenting support and financial services can make a positive impact on the lives of women and infants."

According to the U.S. Bureau of Justice Statistics, IPV is difficult to measure because it often occurs in private, and victims are reluctant to report incidents because of shame or fear. In the study, MU researchers analyzed data from a larger study of a smoking cessation intervention in pregnant women called Baby BEEP (Behavioral Education Enhancement of Pregnancy) conducted through rural Women, Infant and Children Nutritional Supplement (WIC) clinics in the Midwest. The women were identified by their responses to the Abuse Assessment Screen, a stress scale, a psychosocial profile and a mental health index.

The study, "Rural mothers experiencing the stress of Intimate Partner Violence or not: Their newborn health concerns," was published in the *Journal of Midwifery & Women's Health* in November.

Source: University of Missouri-Columbia

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