Current Intimate Partner Violence Screening Practices of Maternity Nurses In A Hospital Setting

Lina Garrard, College of Nursing, Honors Student
Ann L. Bianchi, PhD, RN

Introduction

• Intimate partner violence (IPV) includes physical violence, sexual violence, stalking, and psychological aggression (including coercive tactics) by a current or former intimate partner. In the U.S., 29 million women have experienced IPV in their lifetime (Breiding, Basile, Smith, Black, & Mahendra, 2015). There are an estimated 324,000 pregnant women who experience this violence (Tjaden & Thoennes, 2006).
• Poor health outcomes related to IPV during pregnancy can lead to preterm labor (Silverman, Decker, Reed, & Raj, 2006), placental abruption, maternal death (El Kady, Gilbert, Xing, & Smith, 2005), preterm birth (Shah & Shah, 2010), and low infant birth weight (Coker, Sanderson, & Dong, 2004).

Purpose of this project: To investigate current screening practices in maternity nurses and inquire about their comfort level in screening, what questions they ask, and if IPV screening training would be helpful.

Methodology

• Focus groups conducted between June 1 – July 8, 2015.
• 31 focus groups/individual meetings were conducted. A total of 54 Mother/Baby Registered Nurses and 25 Labor and Delivery Registered Nurses attended.
• The following questions were asked:
  1. Do you ask specific questions to your patients related to IPV?
  2. If yes: What questions do you ask?
  3. Do you have a list of resources available to offer your patients if they disclose IPV?
  4. Are you comfortable asking the questions on the assessment form related to abuse?
  5. Have you had training related to intimate partner screening?
  6. If yes, what do you offer?
  7. If yes, do you feel the training was sufficient?
  8. Describe to me how you approach the questions about abuse.
  9. Describe to me your perceived barriers to addressing this topic with your clients.
  10. Describe to me what you would like to see in form of training to gain a better understanding of IPV?

Key Findings

1. Do you ask specific questions to your patients related to IPV?
   • Use admission assessment form
   • May ask own question if suspicious
   • Ask only if they see a need
   • Review L&D notes
   • Don’t ask
   • Depends

2. If yes: What questions do you ask?
   • “Do you feel safe?”
   • “What’s going on?”
   • Observes H&P, bruises, or other red flags
   • Set up a code word with patient

3. Do you have a list of resources available to offer your patients if they disclose IPV?
   • Uses social services, writes a consult
   • Mother/Baby has a poster on the bathroom door with contact information
   • The green ante-partum book

4. Are you comfortable asking the questions on the assessment form related to abuse?
   • Most nurses said yes
   • Few said somewhat
   • One nurse said, “It is our duty to keep patient and coworkers safe.”

5. Have you had training related to intimate partner screening?
   • Majority of nurses have not had formal training
   • Nurses state they participate in computer based learning (CBL) once a year

6. If yes, what was included in your training?
   • A few said abuse and neglect (may be reflective of CBLs)

7. If yes, do you feel the training was sufficient?
   • N/A

8. Describe to me how you approach the questions about abuse.
   • Build trust
   • Use intuition
   • Depends on the situation
   • Use a casual approach

9. Describe to me your perceived barriers to addressing this topic with your clients.
   • Privacy issues: Family and partner present
   • Time
   • Feel they might embarrass the patient
   • Concerned about the patient’s feelings
   • Concern patient will not want to disclose

10. Describe to me what you would like to see in form of training to gain a better understanding of IPV?
    • Know more about resources
    • Want to know something they can tell the patient right away, especially if at night
    • How to approach the questions
    • Signs and symptoms of abuse
    • Screening tools
    • Have scenarios to help prepare them
    • How to dig deeper
    • Gain a better understanding of the Violence Against Women’s Act
    • Current statistics on IPV
    • Learn more up-to-date information

Conclusions

Overall, most nurses ask about IPV and provide written consults to social services. Most nurses stated they would like training.

Recommendations

Development of a written IPV screening policy, adoption of a validated IPV screening tool, and IPV training sessions for maternity nurses. These recommendations may encourage 100% compliance with IPV screening among maternity nurses.

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References