

Speaker Disclosure

• The planners, presenters, and content reviewers of this course disclose no conflicts of interest.

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Learning Objectives

- · Analyze the presentation of individuals and family members who present with a possible exposure to IPV
- Evaluate the impact of IPV on parenting
- Describe possible consequences of exposure to IPV in infants, children and
- Explore practice implications to address IPV in pediatric patients

Intimate Partner Violence

Abuse or aggression occurring in the context of a romantic relationship that is perpetrated by a current or former partner

- Physical violence
- Sexual violence
- Stalking
- · Psychological aggression



Epidemiology

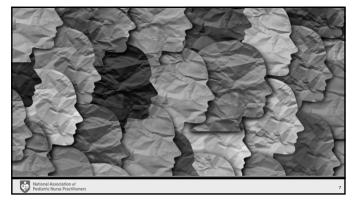
- 1 in 4 women and nearly 1 in 10 men will experience IPV
- 1 in 5 homicide victims in the U.S. killed by an intimate partner
- 1 in 15 children exposed to IPV each year

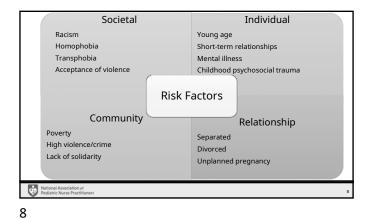
COVID-19 pandemic

• Average increase 12% with 20% increase working/school

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Risk Factors

- Heterosexual and homosexual
- LGBTQ relationships IPV may be higher
- · Both men and women can be perpetrators and victims
- · Men more likely to inflict severe injury on women
 - 62% of individuals injured by a partner and seeking medical care are female



Mother and Child Relationship

- Child's emotional and physical well-being
- Resilience
- Maternal physical and mental health
- Consequences of maternal IPV victimization



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Impact on Women / Mothers

Homicide

- Having a gun in the home
- Strangulation / head injuries

Non-fatal physical injuries

- Bruises/abrasions (43.4%)
- Lacerations (16.9%)
- Strains/sprains (15.6%)
- Internal organ injuries (14.4%)
- Fractures (9.7%)

Impact on Women / Mothers

Mental health

- Post-traumatic stress disorder
- · Generalized anxiety disorder
- Dysthymia
- Depression
- Phobias
- Substance abuse

Conception

Unintended pregnancy

- Forced sexual intercourse
- · Fear of discussing contraception
- · Interference with contraception

Infant outcome

- Exposure to substances
- · Low infant birth weight
- Preterm labor/birth

Maternal pregnancy outcomes

- Postpartum depression
- Substance use
- · Low prenatal care
- No engagement health promoting behaviors



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Prenatal / Perinatal

- Little or no prenatal care
- Perinatal death

Infant

- Fetal demise
- Miscarriage
- Placental abruption
- · Preterm labor or birth
- · Low birth weight
- HPA axis dysregulation

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Child Maltreatment

- IPV is definite risk factor for child maltreatment
- Adverse Childhood Experiences Study
 - 6 x more likely suffer emotional abuse
 - 4.8 x more likely suffer physical abuse
 - 2.6 x more likely suffer sexual abuse
- Mothers who are victims of IPV
- Poly-victimization
- · Culture of violence

Death

- IPV- related homicide
- 54% Type 1
- 46% Type 2
- Peripheral IPV victim
- · Teen dating violence
- Murder suicide
- Suicide

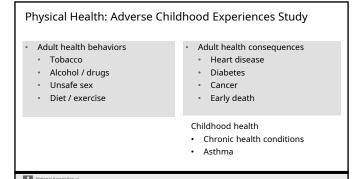


Non-fatal Physical Injury

- Collateral victims
- Young children at increased risk
- Caregiver's arms when violence occurs
- Older children / adolescents
- Intervene to stop the violence
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Variety of injuries

- Contusions
- Fractures
- · Abdominal trauma
- Head trauma



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Infancy and Early Childhood

- Impact on child functioning and development
- Most dependent on parents to meet their needs
- IPV interrupts parental ability to provide care and attention
- · Safety and security
- Sense of trust and autonomy
- · Lack verbal skills to express feelings

Infancy and Early Childhood

- Excessive irritability
- Behavioral regression
- Sleep disturbance
- Emotional distress
- Separation anxiety
- Fear of being alone
- Externalizing behaviors
- Trauma symptoms
- Language delays
- Attachment disorders

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Infancy and Early Childhood

- Developmental delays
- · Somatic problems (preschool)
- Sleep disturbances
 - Insomnia
 - Nightmares
 - Sleepwalking
 - Enuresis

- Self regulation difficulties • Reactivity to verbal conflict
- Internalizing symptoms

Touch • Primary form of mother/infant communication · Respond to infant needs • Communicate safety and security • Teach infants how to regulate themselves • Infants learn to initiate touch • Communicate needs and feelings

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Bernard et al. 2022

- 174 mother/infant dyads · Infants 12 months of age
 - 32% mothers IPV pregnancy

 - 25% mothers IPV post-partum
- Pregnancy / post-partum IPV
- No differences maternal touch
- No differences infant affectionate touch
- Boy infants more likely to use negative touch behaviors to mother





Childhood Impact

Internalizing Symptoms

Anxiety

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- Depression
- Withdrawal
- Somatic complaints
- Poor sleep
- School avoidance
- Disordered eating
- Suicidal ideation
- Suicidal behaviors

- **Externalizing Behaviors** Attention problems
- Poor academic performance
- Aggression
- Bullying behaviors
- Unruly behaviors
- Difficulty forming and maintaining relationships with
- High risk behaviors

Childhood Impact

- Additional negative exposures
- Frequency of exposure
- Persistence of exposure
- Child age at time of exposure
- Developmental stage at time of exposure



School-aged Children



- Internalizing behaviors
- Withdrawal
 Anxiety
- Externalizing behaviorsAggressionDelinquency
- Decline social competence
- Decline school performance
- Increase sleep disturbance
- More responsive to aggressive cues
- Attempt to intervene in violence

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Adolescence Impact

- Physical, mental, and social developmental changes
- · Puberty and sexual development
- Abstract thinking
- · Defined sense of self
- · Leveraging independence
- Define other people in relationship to themselves
- · Greater cognitive skills
- Intervene in IPV



- **Adolescent Impact**
- Aggression
- High-risk behaviors
- Academic failure
- Teen dating violence
 - Physical violence
 - 1 in 12 U.S. teens • Sexual violence
- Adolescent relationships set the stage for future relationships

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Prior to Screening

All states mandatory child maltreatment reporting

· Intentional or unintentional injury to child

Know your state law defining IPV mandated reporting

- Use of weapon or presence of a child
- · Child Welfare Gateway
- https://www.childwelfare.gov/topics/systemwide/lawspolicies/statutes/witnessdv

Reporting without state specific requirements

- · Futures Without Violence
- https://www.futureswithoutviolence.org/domestic-violence-and-health-care-protocols/
- Consult with social work

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Decision to Report

- Assess potential risk to child
- Caregiver ability to protect the child
- Caregiver social supports
- Linkage to community resources

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- Could compromise IPV survivor's safety
- Assure caregiver report is not punitive
- Offer caregiver the option of reporting themselves
- Inform CPS of efforts made by caregiver to protect child
- Support caregiver before, during, and after report

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Screening for IPV

- · Identify available, affordable, and evidence-based community resources for IPV victim and children
- Inform caregiver of any mandatory reporting and/or reporting if concern for safety of child
- · Aware of cultural attitudes towards violence against women
- · Evidence-based tool



Evidence-based Screening Tools

Hurt, Insult, Threatened & Scream (HITS)
Sherin et al. (1998): http://www.ctcadv.org/files/4615/6657/9227/HPO HITS Screening Tool 8.19.pdf

Women Abuse Screening Tool (WAST)

Brown et al. (2000): http://womanabuse.webcanvas.ca/documents/wast.pdf

Humiliation, Afraid, Rape, Kick - Children (HARK-CSohal, Eldridge, & Feder (2007): https://www.metroallianceforhealthyfamilies.org/Media/PDF/MAHFDomesticViolenceHARK-C.pdf

Slap, Threatened & Thrown (STaT)

- Have you ever been in a relationship where your partner pushed or slapped you?
 Have you ever been in a relationship where your partner threatened violence?
 Have you ever been in a relationship where your partner has thrown, broken or punched things?
 Paranjape & Liebschutz (2003)



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Evidence-based Screening Tools

Abuse Assessment Tool

http://chipts.ucla.edu/wp-content/uploads/downloads/2012/01/Abuse-Assessment-Screen-AAS.pdf
Center for HIV Identification, Prevention, and Treatment Services (2012)

Safe Environment for Every Kid (SEEK)

Dubowitz et al. (2011): https://seekwellbeing.org/

Bright Futures Pediatric Intake/Family Psychosocial Screen

https://www.brightfutures.org/mentalhealth/pdf/professionals/ped_intake_form.pdf Children's Hospital Association (2018)

Social Needs Screening Tool

https://www.aafp.org/dam/AAFP/documents/patient_care/everyone_project/hops19-physician-form-sdoh.pdf American Academy of Family Physicians (2018)

Accountable Health Communities Screening Tool

https://innovation.cms.gov/files/worksheets/ahcm-screeningtool.pdf Centers for Medicare & Medicaid Services (2017)

National IPV Resources

- Domestic Violence Hotline 1-800-799-7233 https://www.thehotline.org/
- National Coalition Against Domestic Violence https://ncadv.org/get-help
- National Network to End Domestic Violence https://nnedv.org/
- National Resource Center on Domestic Violence https://www.nrcdv.org/
- Office of Violence Against Women https://www.justice.gov/ovw/domestic-violence
- Domestic Violence Resource Center https://www.acf.hhs.gov/fysb/fv-centers
- Live Your Dream https://www.liveyourdream.org/get-help/domestic-violence-resources.html · National Center on Domestic Violence, Trauma & Mental Health
- http://www.nationalcenterdvtraumamh.org/resources/national-domestic-violence-organizations/
- Resources for Supporting Victims of Domestic Violence <a href="https://www.onlinemswprograms.com/resources/supporting-survivors-domestic-violence-resources-r

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IPV Plan of Care

- > Create safety plan for self and children with the IPV survivor
- > Provide IPV community resources
- Phone numbers
- Web sites
- IPV shelter
- · Survivor-centered mental health care
- Trauma-focused care for children and survivors
- · IPV community mentor/advocate
- > Provide legal resources to IPV survivor
- > Help IPV survivor think through social supports



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Adolescents

- Does the person you are dating get mad at you if you do not respond to his/her calls or texts right away?
- Does the person you are dating ever monitor your phone or texts?
- Has the person you are dating ever hit, kicked, choked, or otherwise physically hurt you?
- Has the person you are dating ever threatened to hurt or kill you?
- Has the person you are dating ever done anything sexually that made you feel uncomfortable?



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Adolescents

- Healthy relationship anticipatory guidance
- Discuss potential limits to confidentiality prior screening
- If disclose safety concerns may need to inform parents, child protective services, and law enforcement
- · Assess lethality
 - o Weapon, strangulation, serious bodily injury
 - $\circ \quad \text{Report and inform caregiver} \\$
 - o Safety planning
- Consult other members of the health care team



Healing for Exposed Children

- · Eliminate trauma exposure
- Educate caregivers regarding negative impact
- · Mental health therapy
 - o Trauma-focused cognitive behavioral therapy
 - o Eye movement desensitization and reprocessing

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Pediatric Health Care

- Thorough head to toe cutaneous exam
- Explore discipline with caregiver and child
- Use anogenital exam as an opportunity to educate

Discipline Screening

Caregiver

- ➤ How do you discipline your child?
- > How does your partner discipline your
- Does anyone ever spank your child with their hand?
 - · Where on their body?
 - How often? Has it ever left a mark?
- Does anyone ever hit your child with an object?
 What object?

- Where on their body?How often?Has it ever left a mark?
- Do you or anyone else ever use other physical methods of discipline?
 - Pinching/pulling hair/kicking
- Do you or anyone else ever use nonphysical methods of discipline?

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Discipline Screening

Child



- > What happens when you get in trouble?
- > What does Mom do when you get in
- > What does Dad do when you get in trouble?
- > Does anyone ever hit/whoop/spank you?
 - · What do they hit you with?
 - · Where on your body do they hit you?
 - · How often do you get hit?
 - Does it ever leave a mark on your body?

Sexual Abuse Education and Screening

- Explain to the child that everyone has private parts – parts of their body that no one should touch, kiss, tickle, hurt, or put anything in.
- What are your private parts?
 - · Have the child verbally tell you or point to their private parts
- What should you do if anyone bothers or tries to bother your private parts?
- Do you tell or keep it a secret?

- Who could you tell if anyone bothered your private parts?
 - Make sure the child can name at least two adults
- You could also tell your teacher, nurse practitioner (doctor, nurse, etc.), or a policeman
- Has anyone ever touched, tickled, kissed, or hurt your private parts?
- Who is allowed to help you with your private parts if you need help?



Youtube video

https://youtu.be/ryLBCu097ns

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Case Study #1

- 22 month old Michelle presents to primary care provider for a well child check accompanied by her mother
- Mother endorses IPV on universal screening
- Child will not answer when asked about the injury
- Mother states she fell and hit her eye on coffee table



Case Study #1

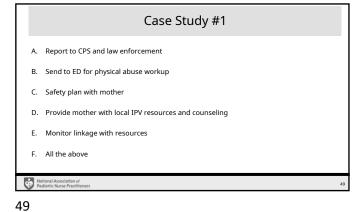
- As exam progresses PNP asks child again about her eye.
- Child answers Dada
- Mother starts crying and states that father accidentally hit child last night when she was holding her. Mother states he meant to hurt me not Michelle. He never hurts her.
- No additional injuries noted on physical exam
- What interventions are indicated?

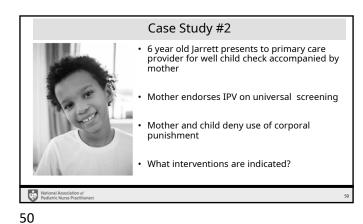
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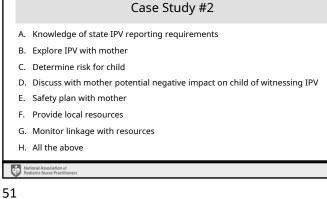
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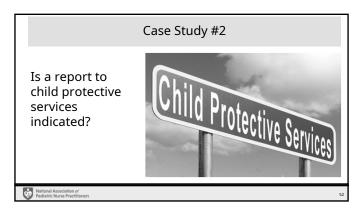
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Case Study #3

- 9 year old Melia presents to ED for dysuria and vaginal bleeding
- No concerns for sexual abuse
- PNP is seeing patient
- Mother endorses IPV on universal screening and the use of corporal punishment
- You explore IPV with mother
- · What interventions are indicated?





Case Study #3

- A. Anogenital exam with sexual abuse education and screening
- B. Safety planning with mother
- C. Local IPV resources
- D. Report to CPS and law enforcement
- E. Survivor-focused mental health
- F. Trauma-informed mental health
- G. All the above

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Questions?

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