

Routine enquiry about intimate partner violence in antenatal care. Two qualitative studies that explore women and midwives perspective.

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Background: Intimate partner violence (IPV) during pregnancy may jeopardize the maternal and fetal health. In recognition of the significant public health impact of IPV, the Norwegian department of health recommends in a new guideline from 2014 that health professionals ask women about exposure to violence as a part of routine antenatal care.



Conclusion: Women wish to talk about IPV to the midwife. Midwives need to be aware of the facilitators and barriers to communication about IPV in antenatal care. Midwives are attentive of the guidelines and make some efforts to implement them. However, further educational and structural support is needed to enable midwives to routinely ask all pregnant women about violence during antenatal care.

Objective: To explore how women of different ethnical backgrounds wish to communicate about their experiences with intimate IPV during pregnancy and to explore midwives experience with routine enquiry about violence.

Results: Even though none of the women was asked about IPV during antenatal care, they thought this was an arena to address the it. Facilitators to talk about IPV with the midwife were a trustful relationship; information about possible negative health outcomes for the newborn due to IPV; and knowing that the midwife could help them. The main barriers to talk about IPV with the midwife were: the women were accompanied by their partner, fear that the Child Welfare Service would take away their children after disclosure and cultural acceptance of violence. All midwives asked about violence, but it varied to what extent they did this. Personal engagement was an important factor that made it easier for midwives to ask about violence. Lack of time, fear and organizational support were barriers.

References: Garnweidner-Holme LM et al. Talking about intimate partner violence in multi-cultural antenatal care: A qualitative study of pregnant women's advice for better communication in South-East Norway. *BMC Pregnancy and childbirth*. 2017 17:80

Henriksen L et al. "It is a difficult topic" – A qualitative study about midwives' experiences with routine enquiry of intimate partner violence in antenatal care. *BMC Pregnancy and childbirth*. 2017 17:165

Methods: Individual interviews with eight women who had experienced IPV during pregnancy and eight midwives who worked in antenatal care. Participants were purposively recruited at three crisis-shelters (women) and eight Mother and Child Health Centers (midwives) in Norway.

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