Domestic violence (DV) can have a chronic and long-term health impact on individuals, children, and communities. Studies have found that women who experience DV are at increased risk for headaches, chronic pain, as well as acute and chronic injuries. (1)(2)(3)

Pregnant and newly parenting women are particularly vulnerable to the impact of domestic violence. Domestic violence often gets worse during pregnancy, resulting in increased risks for victims and adverse outcomes for babies including premature birth and low birth weight. (4)

For many victims of domestic violence, the first source of help is their medical provider, not law enforcement. Victims may be too frightened to involve the police or the courts because of threats of retaliation by the abuser or losing their children, home, etc. Many seek assistance and counseling through their doctor. The medical provider’s central role as first responder highlights the pressing need for well-trained medical staff able to identify domestic violence and respond with safety resources and supports.

Studies indicate that only 5-10% of primary care settings and 17% of OB/GYNs regularly ask about domestic violence. (5)(6)(7) Consequently, each day, doctors, nurses, and other healthcare providers interact with victims of domestic violence without providing them with simple interventions that could save lives, facilitate safety and healing, and improve the patient’s health.

DVB is a Health Issue

A NEW SERVICE MODEL

The DV-CHW project seeks to serve victims and survivors of domestic violence, and build the capacity of the health partners through training, professional development, and practice changes.

Once domestic violence is identified, connection to supportive resources is critical. The DV-CHW service model creates a process for a warm hand-off from the health professional to the DV-CHW, who will then provide community-based assistance that is easily accessible by the victim in a safe setting, offering help, discussing risks and developing a safety plan, getting connected to healthcare and supportive services that will foster safety for themselves and their children. The service is victim-centered and will be tailored to the goals and needs the victim/patient identifies.

The DV-Community Health Worker Collaborative Project aims to create a service that addresses DV as a health issue. It will increase health partner organizations’ knowledge of evidence-based practices to enhance their ability to address domestic violence as a health issue, and integrate domestic violence services into patient care plans. DV service partner organizations will increase their capacity to provide community services that address domestic violence as a health issue and integrate health services into victim service plans. Along with this capacity building, the project strives to improve patient-reported satisfaction with their health care services and patient-reported quality of life (self-defined).

A NEW SERVICE MODEL

DV victims have specific and extensive health care needs. Given the high prevalence of DV, current services are inadequate to address these needs. This service offers primary prevention and health promotion strategies. The creation of Community Health Workers for the State of Delaware is a new public policy priority. By creating CHW workers who can also address the special needs of families who experience domestic violence, we can help to:

- Increase access to services, which will positively affect the care and treatment of chronic medical issues often seen in victims of DV.
- Decrease the need for emergency medical services, as well as overall healthcare utilization and costs.

COLLABORATION

Multi-Dimensional Partnerships are the key!

PROJECT PARTNERS

CHILD, Inc. • Christiana Care • DCADV • Westside Family Healthcare • HMA

COLLABORATORS

LL Governor Hall-Lang • Division of Public Health • UD Partnership for Healthy Communities • DE Healthy Mother & Infant Consortium • DCADV

SERVICE DELIVERY

Address gaps in service delivery and improve access and engagement of victims into service

DV-CHWs will be employed by DV service providers but will provide services in client homes or other safe locations in the community.

Establish a referral process between DV-CHW and other health partners, behavioral/mental health providers, and DV service programs.

LONG-TERM IMPACT

Safe screening and intervention for victims

Creation of an innovative, sustainable service delivery model that integrates domestic violence services with medical services in order to comprehensively address health disparities and improve patient outcomes.

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