Testing a domestic violence enhanced perinatal care intervention in China

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CONTEXT
Intimate partner violence (IPV) is a serious social and health issue. In China, the lifetime prevalence of IPV across seven provinces was nearly 35% for physical violence and about 56% for psychological violence (Cui et al., 2012). IPV has significant impacts on Chinese women’s health such as depression and suicidal ideation (Chan et al., 2010; Xu et al., 2020; Yanqiu et al., 2011). It is prevalent during pregnancy and in the postpartum period, causing tremendous effects on maternal and child health such as maternal depression, preterm birth, low birth weight, and impaired child neuropsychological development. The Chinese health authorities have invested considerably in the system to improve health care for pregnant women, but the health care needs of pregnant women experiencing IPV, and their children exposed to IPV, remain largely unmet. No IPV intervention and prevention programmes have been implemented in the country to help women experiencing IPV in the perinatal period. Therefore, there is a pressing need to integrate these types of interventions into perinatal care to address the health needs of both abused mothers and their children exposed to IPV.

PROJECT AIM
The proposed project will adapt the Domestic Violence Enhanced Home Visitation Program (DOVE) for the context of perinatal care in China. DOVE is a structured IPV intervention integrated into the perinatal home visitation program in the United States (Sharps et al., 2016). The aim of the proposed project is to test the feasibility and acceptability of the adapted DOVE intervention in reducing maternal IPV and infant exposure to IPV and improving maternal and infant health.

STUDY CONTRIBUTION
Our research will provide preliminary evidence on the feasibility and acceptability of our “DOVE in China” adaptation in reducing IPV and its effects on maternal and child health. It will provide a foundation upon which to implement a subsequent effectiveness trial, to provide evidence critical for integrating and scaling up of DOVE in China through existing perinatal care services. Our research may have implications for the development of policies and practice guidelines regarding integrating an IPV intervention into perinatal care in China. Our intervention may have the potential to be replicated nationally and improve the health of abused mothers and their children.