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Domestic Violence & Pregnancy: The challenge of framing a European-wide research question

by Prof. Caroline Andries, Nicola Buckley, Ils De Bal*, dr. Kristien Roelens, Prof. Ingunn Studsrød, Prof. Marleen Temmerman, An-Sofie Van Parys, Halliki Voolma, Prof. Elisabeth Willumsen

This article will focus on the topic of domestic violence and pregnancy, and the process of framing a comparative research question between three countries: UK, Norway and Belgium.

Did you know that worldwide 2 to 8% of pregnant women are victim of domestic violence (Taillieu et al., 2010; Gazmararian et al., 1996)? Moreover, it is well known that violence around the time of pregnancy can have a negative impact on physical and mental well-being of both mother and child. Possible negative consequences include a late entry in prenatal care, miscarriage, infections, depression, post traumatic stress disorder, low birth weight, premature delivery, or even development disorders among newborns.¹ Research of the last 20 years made it clear that violence is a significant factor in maternal and prenatal morbidity. It is obvious that pregnant women need special attention. Luckily there are some organizations throughout the world helping these women but still too many future-mothers are not detected, do not know where to go to, are not helped.



In the UK, Norway and Belgium; three CSOs (Civil Society Organizations) – each in its own way – battle against violence in general, and more specifically violence against pregnant women. To be able to help these women in a better way, they need to have more knowledge about the phenomenon and about possible ways

to deal with it. Scientific knowledge, available from international literature, is mostly Anglo-Saxon and needs to be adapted to the European context. An example of this European context is that Europe hosts the largest number of immigrants with 64 million people in 2005.² Therefore, it is essential to take all these different ethnic backgrounds into account because they could have an impact on domestic violence during pregnancy.

Within PERARES, we have the opportunity to help these CSOs through Science Shops-initiatives. Our primary goal is to frame a mutual research question. The first step in this process is to map the different needs of three CSOs and key partners: Stavanger Shelter (NO), Cambridge Women's Aid (UK), Beweging tegen Geweld (B). The second step is to frame one research question that will lead to a comparative study, performed in the 3 partner-countries.

In the preparation stage, the Science Shops³ together with their partner-CSOs assembled information, exchanged experiences and discussed the needs on the topic of domestic violence during pregnancy. This resulted in a draft framework of existing needs. During this gathering process it became visible that there were some clear distinguishing features which could be tracked back to the work of the CSOs. As two CSOs are shelters, needs were directly derived from victims and social workers' experiences whereas the other CSO is not a shelter and is focused on intermediaries.

To frame a mutual research question, a transnational workshop with CSOs, experts and Science Shops was organized in February 2011 in Brussels. During this workshop, the topic was reframed into "domestic violence AND pregnancy" instead of "domestic violence during pregnancy" as violence often occurs before pregnancy at times when the pregnancy is being anticipated, and often lasts even when the mother has given birth.

Throughout the discussion, it became obvious that other key topics needed to be clarified and defined, such as: What is violence? What is partner-violence? Who is included in the population of immigrants? Who are relevant caretakers and healthcare providers for women who may be affected by domestic violence?

Working in different countries implies unavoidably different habits and regulations as we encountered barriers to frame a mutual question. Whereas in the UK and Norway, student researchers are ethically allowed to work directly with victims, in Belgium this poses more ethical issues. In the UK and Norway, it is common

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¹ Bailey et al., 2010; Taillieu et al., 2010; Zlotnick et al., 2010; ; Macy et al., 2007; Sanchez et al., 2007; Silverman et al., 2006; Boy & Salihu, 2004; Tilley & Brackley, 2004; Jasinski, 2004; Janssen et al., 2003; Espinosa & Osborne, 2002; McFarlane, et al., 2000

² Latest figures known are from 2005 and reported in the 4th World Migration Report. United Nations, Department of Economic and Social Affairs; Population Division. "Report: Trends in total migrant Stock: the 2005 Revision", p. 2.

that pregnant women go to the midwife for their prenatal care and. In Belgium, women are mostly cared for by gynaecologists. These international differences challenges even more the framing of one mutual research question.

By means of sharing experiences, including the most urgent needs, and agreeing upon barriers and definitions, we managed to formulate a common goal and research question:

“To explore how to overcome the barriers that health care providers face in identifying and responding to the needs of pregnant women experiencing domestic violence, with a secondary focus on immigrant women within that group.”

The formulation of the question was a very intense process which led to mutual understanding of the topic and the cultural/legislation differences of the partner countries and organizations.

This process was led by an experienced Science Shop and supported by two starting Science Shops. The double goal is to end the process with three Science Shops established at the three universities (University of Cambridge, University of Stavanger, Vrije Universiteit Brussel) and a maximum application of the recommendations formulated in the study of Domestic Violence and Pregnancy.

PERARES Partners in this workpackage:

- **Science Shops:**
 - Nicola Buckley, University of Cambridge
 - Elisabeth Willumsen, University of Stavanger
 - Ingunn Studsrod, University of Stavanger
 - Jozefien De Marrée, Vrije Universiteit Brussel
 - Ils De Bal, Vrije Universiteit Brussel
- **Civil Society Organizations:**
 - Monica Monsen, Stavanger Shelter
 - Angie Stewart, Cambridge Women’s Aid
 - Koen Dedoncker, Beweging tegen Geweld – ZIJN vzw
- **Other related organizations/experts:**
 - Bente Jensen, University of Stavanger
 - An-Sofie Van Parys, Int. Center for Reproductive Health
 - Caroline Andries, Vrije Universiteit Brussel
 - Halliki Voolma, University of Cambridge:

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Structuring PER in Higher Education through research with CSOs in curricular activities and partnerships with local municipalities

Emma Mc Kenna and Eileen Martin, Queen’s University Belfast

The overall aim of this work package is to strengthen the position of Science Shops and similar community engaged research initiatives in Higher Education Institutions (HEIs). The big issues for many people involved in Science Shop are ensuring this type of work becomes a core function of the HEI, and securing funding to ensure the long term success of the projects. Many of us spend much of our time making funding applications, and in some cases having to refocus organisational goals in order to ensure that funding is secured. And over the years many initiatives have failed due, at least in part, to lack of funding and a failure to embed the practice in the core work of the HEI.

This workpackage is interested in looking at how Science Shops have managed to become embedded in HEIs. It asks how policy has supported (or indeed hindered) Science Shop initiatives in order to make recommendations for how new and emerging Science Shops go about developing the policy context for their own work. This includes policy within higher education institutions as well as policy at local, regional and international levels which underpins the context within which the HEI works.

This has been approached in a number of different ways. Firstly information is being collected on how policies relating to Science Shops are embedded within different countries and different HEIs. Some background information was initially gathered via a questionnaire (and many thanks to all those who responded to it) and qualitative information will be gathered via a further qualitative research phase. Science Shop type initiatives are being asked to complete a short template detailing where they believe there is policy support for the type of work they do, and indeed whether they have managed to influence policy in their favour. We have

suggested that in order to complete the template, Science Shop staff may wish to have discussions with policymakers and senior staff members within their HEI, thus offering an opportunity to engage in some indirect lobbying. If you would like to offer your Science Shop as a case study please contact QUB Science Shop: science.shop@qub.ac.uk

Another element of this workpackage is examining where Science Shop type activities are linked into the core teaching requirements of HEIs. This part of the work is examining where learning with CSOs is being built into the academic curriculum in different countries. There is a particular interest in how this happens at a postgraduate level. The next stage will be to pilot curriculum interventions from one country in another country to see whether what works in one context is likely to be replicable in other contexts.

A further element of the work is in examining how Science Shops reward student participation via offering a prize for the best project carried out. The goal of this element of the work is to see whether it would be possible to create an international Science Shop prize for the best project carried out.

Final deliverables will include a handbook examining the ways in which Science Shops have become strategically embedded within HEIs and Four short policy reports aimed at local and national policy levels with a view to impacting on HE policy agenda in these regions,

If you would like more information or would like to be involved with this work, please contact Eileen Martin or Emma McKenna at The Science Shop, Queen’s University Belfast. science.shop@qub.ac.uk