

Domestic violence twice as likely to start for pregnant women after HIV diagnosis

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Credit: Drexel University

A diagnosis of HIV during pregnancy makes domestic violence twice as likely to start for some women after their baby has been born, according to new research led by a Drexel University researcher.

Ali Groves, PhD, research assistant professor in Drexel's Dornsife School of Public Health, found that among [women](#) who have not had a history of [intimate partner violence](#), those who were diagnosed with HIV are twice as likely to suffer it afterward compared to women who are not diagnosed with HIV.

"It is valuable to have a picture of who is at risk because intimate partner [violence](#) negatively affects HIV positive women's ability to adhere to their medications and to engage in care, both of which can negatively affect their health and well-being, as well as the well-being of their infants," said Groves. "Better knowing who's at risk means we can implement prevention interventions in the antenatal and postnatal clinic setting to positively impact their health."

The study, published in *AIDS and Behavior*, used data from an urban township in the KwaZuluNatal Province of South Africa, the province that experiences the highest HIV prevalence in the country. Numbers were collected from 1,015 women in steady (six months or more) relationships at the time of collection.

"We believe this research will translate beyond South Africa because relationship factors that contribute to HIV positive women's vulnerability to intimate partner violence are not unique to just that country," Groves explained.

Groves and her team actually began the study with the hypothesis that women who were diagnosed with HIV during pregnancy and had already experienced violence in their relationship would be more likely to have that violence increase.

But the data showed that the women who didn't previously have a history of violence in their relationship were twice as likely to experience violence after the HIV diagnosis during their pregnancy.

The women who had already experienced violence in their relationship saw no significant change following their HIV diagnosis in pregnancy—so while the levels of violence they experienced didn't increase, it didn't decrease, either.

"This suggests that something about the HIV positive diagnosis is bringing stress into the relationship for those without a history of intimate partner violence," Groves said. "On the other hand, in those with a history of intimate partner violence, there was no difference in risk between HIV positive and HIV negative women. This suggests that the HIV positive diagnosis may not be new source of anger or increased [relationship](#) stress, as it may have already been suspected."

Given their findings, Groves and her team feel that more [domestic violence](#) intervention efforts should be targeted at women who haven't already experienced it. These efforts could even be built into programs already being given on how to prevent transmission of HIV from mother to child.

And since the study showed that violence levels in women who already had a history of it stayed relatively steady, interventions for them remain just as important.

"As we found, women with a [history](#) of intimate partner violence continue to experience it postpartum," Groves said. "Intimate [partner](#) violence has significant negative consequences for both women and their children during the period before and after pregnancy, and these consequences are not limited to HIV positive women. As such, effective interventions to reduce women's risk of violence are desperately needed."

More information: Allison K. Groves et al, HIV Positive Diagnosis During Pregnancy Increases Risk of IPV Postpartum Among Women

with No History of IPV in Their Relationship, *AIDS and Behavior* (2017). [DOI: 10.1007/s10461-017-1868-5](https://doi.org/10.1007/s10461-017-1868-5)

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