

Healing Begins at Home

Understanding the Connection Between Domestic Violence, Maternal Health Equity & Child Welfare

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A Note on Wellness & Care

Before we begin, we want to acknowledge that the topics we'll explore today — domestic violence, intimate partner violence, and maternal health — can be heavy, personal, and emotionally activating. You may have your own lived experiences connected to this content.

- ✔ You are invited to take care of yourself throughout this session. That might look like stepping away for a moment, taking a breath, or simply sitting with what comes up for you. There is no right or wrong way to be present today.

Take a breath

Pause and breathe whenever you need to

Step away

It's okay to take a moment outside this space

Reach out

Connect with a trusted person if something comes up

Honor your limits

You don't have to share anything you're not ready to share

Your wellbeing matters — in this space and beyond.



SAY HER NAME

Before we discuss data and systems, we pause to acknowledge the humanity behind the numbers. Too many women — particularly **Black women and marginalized women** — have lost their lives to intimate partner violence while pregnant, postpartum, parenting, or attempting to survive abuse.

We honor them today. Not as statistics. Not as headlines. But as **mothers, daughters, sisters, caregivers, and community members.**

📄 Reflection: "What does safety look and feel like for families during pregnancy and early parenting?"

Defining Domestic Violence & Intimate Partner Violence

Domestic Violence

A pattern of behaviors used to gain or maintain **power and control** over another person within a family or household relationship — between spouses, intimate partners, co-parents, family members, or dating partners.

Intimate Partner Violence (IPV)

Abuse or aggression in a romantic or intimate relationship — occurring regardless of age, race, gender identity, sexual orientation, income, religion, or education level.

IPV Includes More Than Physical Violence

- Physical & emotional abuse
- Verbal abuse & sexual violence
- Financial abuse & reproductive coercion
- Isolation & stalking
- Threats & intimidation
- Digital/technology-based abuse

IPV, Pregnancy & Maternal Health Data

1 in 3

Women Affected


Experience intimate partner violence during their lifetime.

#1

Leading Cause

Homicide is among the leading causes of death during pregnancy and postpartum in the U.S.

IPV during pregnancy is associated with **delayed prenatal care, miscarriage, preterm birth, low birth weight, maternal complications, and postpartum depression**. Pregnancy can increase vulnerability to violence and coercive control.

 Black women in NJ are disproportionately impacted by severe maternal morbidity, maternal mortality, chronic stress, inequitable healthcare treatment, and barriers to culturally responsive care. Structural racism, economic inequities, trauma, and violence all contribute.

Recognizing the Signs — And What NOT To Do

Knowing the warning signs of IPV can save a life. Equally important is knowing how to respond — and what to avoid.

⚠ Warning Signs of IPV

Physical & Visible Signs

- Unexplained injuries, bruises, or frequent "accidents"
- Flinching, fearfulness, or startling easily
- Wearing concealing clothing regardless of weather

Behavioral & Emotional Signs

- Withdrawal from friends, family, or community
- Partner speaks for them, controls their phone or money
- Anxiety, depression, low self-esteem, or hopelessness
- Missing appointments, especially prenatal visits
- Partner is overly controlling, jealous, or monitoring

During Pregnancy

- Late or inconsistent prenatal care
- Partner insists on attending all appointments
- Signs of fear, shame, or reluctance to speak freely

🚫 What NOT To Do

- ❌ Don't ask "Why don't you just leave?" — leaving is the most dangerous time
- ❌ Don't confront the abuser — this can escalate danger
- ❌ Don't share what they told you without their permission
- ❌ Don't pressure them to make decisions before they're ready
- ❌ Don't minimize or dismiss what they share
- ❌ Don't promise confidentiality you can't keep (especially in mandated reporter roles)

✅ What TO Do Instead

- ✅ Listen without judgment
- ✅ Believe them
- ✅ Ask: "Are you safe?"
- ✅ Offer resources — don't force them
- ✅ Follow their lead and respect their timeline
- ✅ Connect them to trained DV advocates

⚠ Safety planning should always be led by the survivor. Your role is to support — not to rescue.

The Intersection: Domestic Violence, Maternal Health Equity & Child Welfare

Domestic violence, maternal health equity, and child welfare do not exist in isolation — they are deeply interconnected systems that shape the safety, health, and futures of families. When we understand how these forces overlap, we can respond with greater compassion, coordination, and effectiveness.



Violence Shapes Health

Intimate Partner Violence (IPV) during pregnancy increases risk of preterm birth, low birth weight, and maternal mortality — especially for Black women.

Health Inequity Enables Harm

Systemic racism and lack of culturally responsive care leave survivors without safe options, perpetuating cycles of abuse.

Children Are Always Affected

Even without direct physical exposure, children in homes with IPV experience toxic stress that profoundly shapes their development.



Addressing one without the others leaves families incomplete in their healing. A whole-family, trauma-informed approach is essential.

Communities Facing Heightened Vulnerability

While IPV affects all communities, certain populations face increased risk and greater barriers to support:

1 in 4

Women Affected

Women experience severe intimate partner physical violence in their lifetime

43%

Latina Women

Of Latina women experience IPV in their lifetime

2x

Indigenous Women

Face domestic violence at twice the national rate

1 in 3

LGBTQIA+ Individuals

Experience IPV compared to 1 in 4 heterosexual women

2-3x

Black Women

Black women experience IPV at 2-3 times the rate of white women and face higher rates of fatal violence

Black & Indigenous Women

Facing compounded structural and systemic inequities

Latina & Immigrant Communities

Language barriers and immigration fears limit access

LGBTQIA+ Individuals

Stigma and lack of affirming services create gaps

Young Parents & Families in Poverty

Including adolescents and survivors with disabilities

Mental Health, Child Development & Child Welfare

Impact on Mothers & Caregivers

Experiencing IPV during pregnancy or postpartum can cause anxiety, depression, PTSD, chronic stress, panic attacks, sleep disturbances, suicidal ideation, and substance use as a coping response.

Child Welfare Intersection

Survivors often fear losing custody, child welfare involvement, being blamed, or retaliation — causing many to avoid seeking help, fearing systems will **punish rather than support** them.

Impact on Babies & Young Children

Exposure to violence and chronic stress affects brain development, attachment, emotional regulation, language, sleep, behavior, and learning readiness.

Toxic Stress

Prolonged adversity without protective support contributes to developmental delays, anxiety, hypervigilance, and emotional dysregulation. **Children do not have to directly witness violence to be impacted.**

The Role of Doulas & Midwives

Douglas and midwives are trusted support people who spend significant time with families during pregnancy, birth, and postpartum. Their relationship-centered approach allows them to recognize warning signs others may miss.



Safe & Trusting Relationships

Building emotional trust, reducing isolation, creating affirming and culturally responsive spaces, and validating survivor experiences.




Early Identification

Noticing fearfulness, controlling behaviors, missed appointments, unexplained injuries, emotional distress, or signs of coercion — then connecting families to DV services, mental health support, and legal advocacy.



Advocacy & Safety Planning

Navigating healthcare systems, encouraging informed decision-making, advocating for respectful care, and reducing fear and shame during disclosure.

 Prenatal and postpartum visits are critical opportunities for IPV screening, safety planning, mental health support, referrals, and early intervention.

What You Can Do: A Call to Action

Change begins with each of us. Here's how you can show up for families in your community.

For Parents & Caregivers

- Know the signs of IPV and trust your instincts
- Reach out to a hotline or trusted provider — you don't have to face this alone
- Create safety plans for yourself and your children
- Connect with community doulas, midwives, and peer supporters
- Know your rights — you deserve safety, dignity, and support

For Community Partners

- Screen for IPV in prenatal, postpartum, and pediatric settings
- Build trauma-informed, culturally responsive practices
- Partner with DV organizations and maternal health advocates
- Remove barriers to care — language, transportation, fear of systems
- Advocate for policies that protect and support survivors

For Advocates & Leaders

- Center the voices of survivors — especially Black, Indigenous, and marginalized women
- Push for systemic change in child welfare, healthcare, and housing
- Fund community-based organizations doing this work
- Challenge policies that punish survivors
- Speak up, show up, and stay accountable

Every action — big or small — moves us closer to a world where every family is safe.

NJ Resources & Community Supports

Domestic Violence

Resources

NJ Coalition to End Domestic Violence (NJCEDV) — Statewide referrals to DV programs and AIP providers.

Website: www.njcedv.org

NJ Domestic Violence Hotline: 1-800-572-SAFE (7233) — available 24/7

SHE MATTERS — supporting BIPOC/ALAANA women, girls, femmes and co-conspirators addressing GBV, maternal health, healing & wellness and advocacy in NJ | www.shematterss.com

Maternal Health

Resources

Nurture NJ — New Jersey's statewide maternal and infant health initiative | www.nurturenj.com

Black Mamas Matter Alliance — centering Black women in maternal health advocacy, research, and policy | www.blackmamasmatter.org

COCNJ (Connecting our Communities for Change in NJ)

Coalition — advocacy, resource hubb, people to policy pipeline support | www.cocnj.org

Additional NJ Resources: SERV, Teen Support & Abuse Intervention



SERV: Services Empowering Rights of

Victims

Trauma-informed support for survivors of domestic violence, sexual violence, and human trafficking across NJ.

24/7 Crisis Hotlines:

- Sexual Violence & DV Hotline: 866-295-SERV (7378)
- Human Trafficking Hotline: 800-225-0196
- Passaic Sexual Violence Hotline: 856-408-3164

Services: Crisis intervention, emergency safe housing, safety planning, legal advocacy, counseling, case management, bilingual & culturally responsive services

Contact: serv@centerffs.org | Online chat available

Counties: Camden, Gloucester, Cumberland, and Passaic



Teen & Youth Support

Services

2ND FLOOR Youth Helpline — Confidential & anonymous for youth ages 10–24 navigating dating violence, mental health, family conflict, and crisis support. NJ

Call or Text (24/7): 888-222-2228 | www.2ndfloor.org

Love Is Respect — National resource for teen dating violence and healthy relationships.

Call: 866-331-9474 | Text: LOVEIS to 22522 | Chat available online | www.loveisrespect.org

Services: Safety planning, relationship education, support for teens experiencing abuse, digital abuse & consent education



Abuse Intervention Programs



Department of Children and Families – Abuse Intervention

Program

Supports accountability, behavior change, emotional regulation, and violence prevention for individuals using abusive behaviors in relationships.

Programs include: Accountability groups, healthy relationship education, power & control intervention, emotional regulation, trauma-informed behavior change, parenting/co-parenting support

Website: www.nj.gov/dcf



Support is available. Survivors deserve safety, dignity, healing, and community care.

Healing begins when survivors are believed, supported, and connected to care.



Closing Reflection & Affirmation

"What does it look like for communities to move beyond crisis response and truly support family safety, mental wellness, and healing?"

Safety & Dignity

Every family deserves more than survival.

Early Intervention

Healthy beginnings require communities willing to intervene early and respond compassionately.

Collective Care

Systems rooted in care — not harm — make healing possible.

Healing begins at home — and collective care helps make healing possible.



Thank You

For showing up. For listening. For caring.

Your presence in this space is an act of commitment — to the families you serve, to the communities you love, and to the work of healing. We are grateful for your time, your heart, and your dedication.

Dr. Waffiyah Saleem Idriss

UP Coalition | ACNJ

Together, we can build communities where every family is safe, seen, and supported.

Stay

Scan to stay connected with SHE

Stay Connected



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