



Connecticut Coalition Against Domestic Violence

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**Member Organizations**

**The Center for Family Justice**  
Bridgeport, CT

**The Center for Empowerment & Education**  
Danbury, CT

**Domestic Violence Program United Services**  
Dayville, CT

**The Network**  
Enfield, CT

**Domestic Abuse Services Greenwich YWCA**  
Greenwich, CT

**Interval House**  
Hartford, CT

**Project SAGE**  
Lakeville, CT

**Chrysalis Domestic Violence Services**  
Meriden, CT

**New Horizons**  
Middletown, CT

**Prudence Crandall Center**  
New Britain, CT

**The Umbrella Center for Domestic Violence Services**  
New Haven, CT

**Safe Futures**  
New London County

**Domestic Violence Crisis Center**  
Norwalk, CT

**The Umbrella Center for Domestic Violence Services**  
Shelton, CT

**Domestic Violence Crisis Center**  
Stamford, CT

**Susan B. Anthony Project**  
Torrington, CT

**Safe Haven**  
Waterbury, CT

**Domestic Violence Program United Services**  
Willimantic, CT

**New CCADV Report Finds Concerning Pattern of Missed Interventions with Pregnant and Postpartum Individuals Relative to Intimate Partner Violence**  
*-Announces upcoming June conference focused on IPV and maternal mortality-*

**Glastonbury, CT** – Nearly a third of individuals who experienced a pregnancy-associated death in Connecticut between 2015 and 2021 had experienced intimate partner violence (IPV) at some point in their lifetime (33 of 102 individuals or 32%). This according to a [new report](#) released today by Connecticut Coalition Against Domestic Violence (CCADV) showing the increased risk for death faced by pregnant and postpartum individuals when experiencing or having experienced intimate partner violence (IPV). The report reveals a considerably greater portion of decedents experiencing IPV in their lifetime than was previously reported based on Connecticut Maternal Mortality Review Committee (MMRC) case narratives (32% vs 21%).

“Intimate partner violence has long been associated with a number of negative health outcomes, particularly during pregnancy,” said Meghan Scanlon, chief executive officer at CCADV. “This report offers an important opportunity for our state’s healthcare system to assess and strengthen screening and care procedures for pregnant individuals. It is our hope that the missed opportunities for intervention discussed in this report can be turned into positive change that saves lives.”

Between 2015 and 2021, 102 individuals experienced a pregnancy-associated death in Connecticut. Utilizing both MMRC case narratives and IPV service data provided by CCADV’s 18 member organizations, it was found that one in five, or 22, of these individuals experienced IPV during pregnancy or within one year postpartum. This represents 67% of the one-third of individuals who had experienced IPV at some point in their life. The manner of death for these twenty-two individuals included accidental overdose (9 individuals or 41%), intimate partner homicide (5 individuals or 23%), and suicide (2 individuals or 9%), among others.

The report also found a pattern of missed opportunities within the healthcare system to provide support to pregnant and postpartum individuals experiencing IPV. For instance, of 13 people who experienced IPV during pregnancy, 10 (78%) participated in prenatal visits. Of these 10 individuals, 60% were screened for IPV and none were referred for services. Ten individuals experiencing IPV during pregnancy sought hospital care for labor and delivery. Of those individuals, 6 were screened for IPV and none were referred for services. Finally, 7 individuals experiencing IPV postpartum sought emergency room care at least once. Of those individuals, 4 were screened for IPV and none were referred for services.

“It is alarming that 67% of individuals who died having experienced IPV at some point in their life experienced that violence during the pregnancy or within one year postpartum and, even when screened, that so few referrals for IPV services were made,” said Ashley Starr Frechette, CCADV Director of Health Professional Outreach. “It is critical that healthcare providers implement strong screening, education, and referral protocols for all pregnant and postpartum patients. The research is clear that this is a key point of intervention which Connecticut simply cannot afford to miss.”

Report findings suggest the need for more research relative to screening protocols and screener readiness. It is important that healthcare providers be comfortable screening, receptive to disclosures, able to integrate cultural considerations, understand basic safety planning, and be confident in making referrals for IPV services. The report also recommends strengthening pathways to care by increasing connections between health providers and IPV service organizations. This includes collaboration with suicide intervention, mental health and addiction treatment providers considering the co-occurring nature of these health issues.

Given the intersection of IPV and maternal mortality, CCADV will host a one-day conference – *Building a Better Community Response to IPV: Supporting Pregnant and Postpartum Birthing People in Connecticut* – on Friday, June 23<sup>rd</sup> at the Double Tree by Hilton in Bristol. The conference will feature individual and organizational level strategies that can be taken to advance health equity and increase positive health outcomes for birthing people who have experienced IPV. Aimed at healthcare providers, social workers, early intervention providers, and community providers, the cost to attend is \$70, which includes 5 CEU/CMEs. More information and registration is available at [bit.ly/BBCR2023](https://bit.ly/BBCR2023).

Thanks to a grant from the U.S. Department of Health and Human Services Office on Women's Health, CCADV's Health Professional Outreach Project has focused much of its work over the past two years on preventing maternal mortality due to IPV. This includes convening an advisory board that monthly brings together health and community providers, expanding our Purple Ribbon Project which seeks to provide domestic violence certification training to staff working in healthcare settings, and hosting free trainings that emphasize the importance of consistent screening and education. Said Devon Rayment, CCADV's Health Professional Outreach Project Manager, "Education at every health visit about the impact of IPV and the services available across the state is essential because not all victims may be ready to disclose when initially screened. We encourage all providers to reach out and partner with CCADV and our 18 member organizations to help reduce maternal mortality. Free training and educational materials are available."

Click here to download the report – [Intimate Partner Violence & Pregnancy-Associated Deaths in CT \(2023\)](#).

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*Connecticut Coalition Against Domestic Violence, Inc. is the state's leading voice for victims of domestic violence and those organizations that serve them. We are a membership organization of the state's 18 domestic violence organizations. Help is available to victims 24 hours a day, 7 days a week by visiting [www.CTSafeConnect.org](http://www.CTSafeConnect.org) or by texting/calling (888) 774-2900. For more information about CCADV, please visit [www.ctcadv.org](http://www.ctcadv.org).*