

ca. 1990s

A group photograph of nursing researchers and activists at Denison Memorial Library, University of Colorado, Denver

Courtesy National Library of Medicine

During the 1990s, these nurses, all members of the Nursing Consortium on Violence and Abuse, conducted three major research projects on domestic violence and health, all funded by the Centers for Disease Control and the National Institutes of Health.

From left to right: Yvonne Ulrich, Laura McKenna, Barbara Parker, Karen Landenburger, Judith McFarlane, Christine King, Josephine Ryan, Doris Campbell, Jacquelyn Campbell, Daniel Sheridan



RESEARCH AND RECOGNIZE

DOMESTIC VIOLENCE

EMPOWER AND CHANGE

GUIDELINES FOR THE TREATMENT OF BATTERED WOMEN VICTIMS IN EMERGENCY ROOM SETTINGS



1995 National Organization for Women (NOW) anti-violence rally, Washington, DC

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In the mid-1990s, the movement against domestic violence continued to fight for change nationwide. Across the country, activists gathered in support of victims of domestic violence and called for an end to violence.

EMPOWER AND CHANGE

GUIDELINES FOR THE TREATMENT OF BATTERED WOMEN VICTIMS IN EMERGENCY ROOM SETTINGS

CONFRONTING VIOLENCE: IMPROVING WOMEN'S LIVES

ACTIVISTS AND REFORMERS in the United States have long recognized the harm of domestic violence and sought to improve the lives of women who were battered.

During the late 20th century, nurses took up the call. With passion and persistence they worked to reform a medical profession that overwhelmingly failed to acknowledge violence against women as a serious health issue. Beginning in the late 1970s, nurses were in the vanguard as they pushed the larger medical community to identify victims, adequately respond to their needs, and work towards the prevention of domestic violence. This is their story.

CHANGE REFORM EDUCATE AGITATE EMPOWER RECOGNIZE COGNIZE IDENTIFY RESEARCH ADVOCATE

The National Library of Medicine produced this exhibition with support from the Office of Research on Women's Health.

Guest Curator: Catherine Jacquet, PhD
Designer: The Design Minds

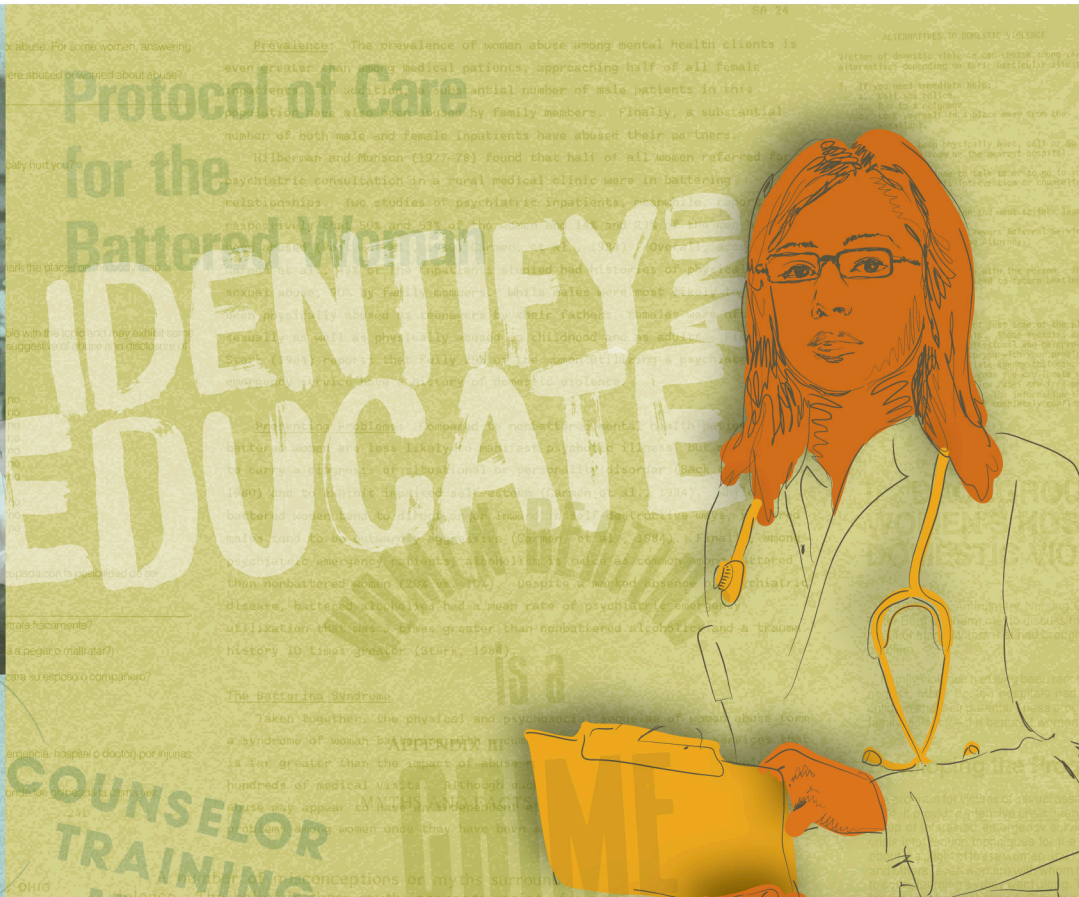
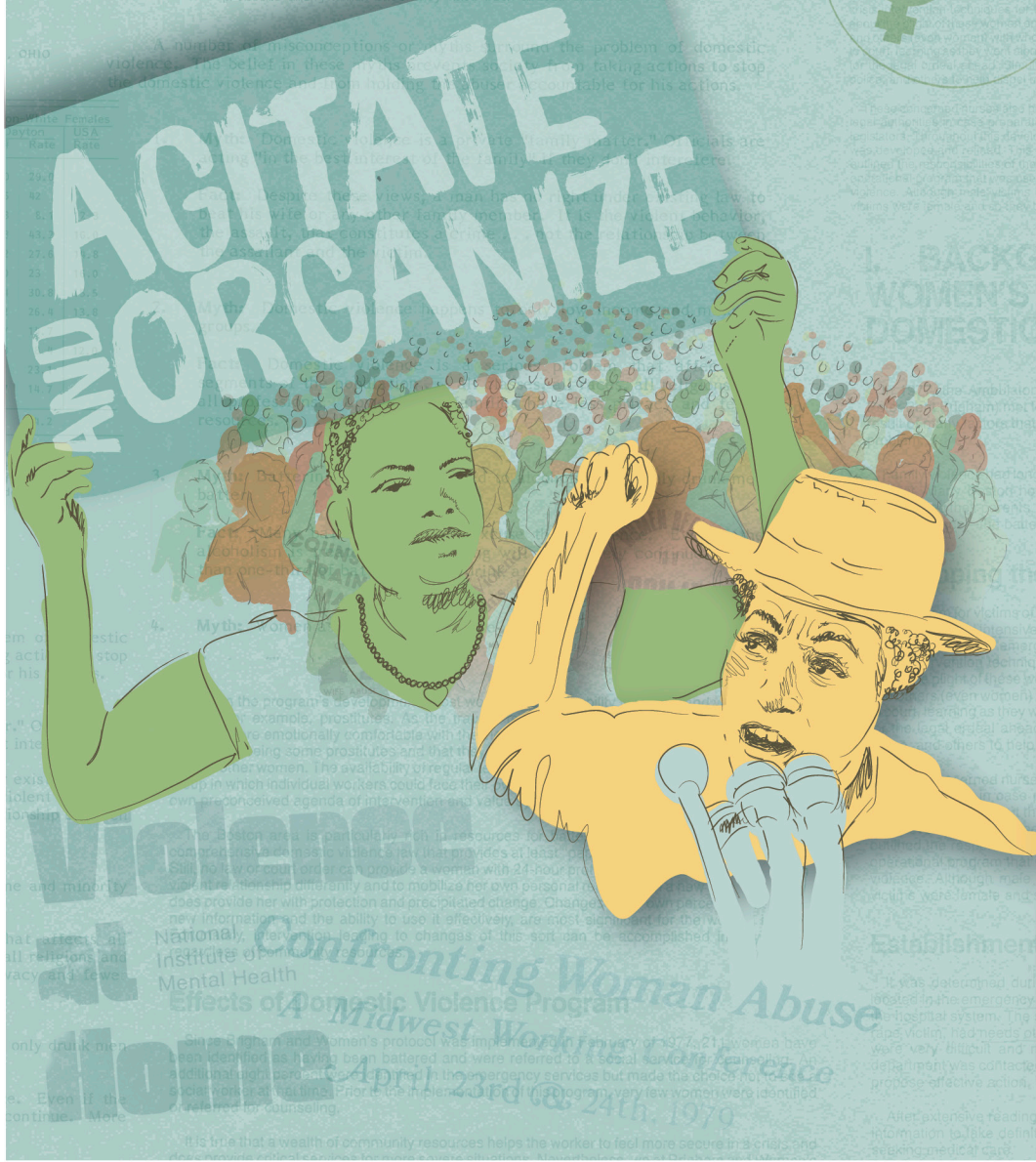
www.nlm.nih.gov/confrontingviolence

U.S. National Library of Medicine



AUGUST 26, 1976 Women rally in City Hall Plaza, in Boston to speak out against violence against women

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COUNSELOR TRAINING MANUAL #2

1989 The American College of Obstetricians and Gynecologists defines for member physicians "The Battered Woman"

Courtesy American College of Obstetricians and Gynecologists

The American College of Obstetricians and Gynecologists' first bulletin on domestic violence outlined the definition, incidence, and public health impact of abuse, and stressed the importance of identifying victims and providing methods for medical intervention.

Surgeon General's Workshop on Violence and Public Health Report

Leesburg, Virginia

1985 Surgeon General's Workshop on Violence and Public Health: Report, Health Resources and Services Administration

Courtesy National Library of Medicine

The surgeon general's workshop on Violence and Public Health brought together over 150 experts from across disciplines to discuss recommendations on the evaluation, prevention, and treatment of violence, including child abuse, child sexual abuse, rape and sexual assault, and spouse abuse.

acog technical bulletin

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THE BATTERED WOMAN

Definition	Incidence
Domestic violence and spouse abuse are terms referring to violence occurring between partners in an ongoing relationship, regardless of whether they are married (1). A battered woman has been defined as any woman over the age of 16 with evidence of physical abuse on at least one occasion at the hands of an intimate male partner (2). The battered wife syndrome has been defined as a symptom complex occurring as a result of violence in which a woman has at any time received deliberate, severe, and repeated (more than three times) physical abuse from her husband, with the minimal injury of severe bruising (3). Richwald and McCluskey have categorized verbal abuse, threat of violence, throwing an object, throwing an object at someone, pushing, slapping, kicking, hitting, beating up, threatening with a weapon, and use of a weapon. Most definitions also incorporate concepts of intentionality and the repetitive nature of the assaults (4). It can be seen from these definitions that violence is viewed most often as physical abuse. In most violent relationships, however, mental abuse and intimidation are an integral component of the abuse syndrome. Regardless of how it is defined or the form it takes, abuse represents a significant clinical problem that warrants further evaluation. In 1985, the Surgeon General of the United States sponsored a workshop on violence and public health in an effort to focus attention on this and similar problems, in the hope of helping to reduce the incidence of violence in society and providing more effective help for its victims (5).	It is difficult to ascertain the exact incidence of domestic violence. One estimate based on the work of several investigators has placed the annual number of cases of domestic violence in the United States at 1.3 million; it has also been estimated to occur in up to 50% of all familial relationships (1, 6, 7). A study performed at Yale University reported that 3.8% of women who came to the surgical services and 3.4% of women who came to the psychiatric services of the emergency department had been victims of battering (2). The U.S. Department of Justice's Bureau of Justice Statistics reports that 57% of 450,000 annual cases of family violence were committed by spouses or ex-spouses and that the wife was the victim in 93% of cases. In one-quarter of these cases, at least three similar incidents had been reported within the previous 6 months (8). Furthermore, it has been estimated that between one-third and one-half of all female homicide victims are murdered by their male partners (9). For a variety of social, emotional, and economic reasons, the incidence of battered women is probably severely underreported throughout the world.
Public Health Impact	It is difficult to obtain statistics on the morbidity of battering. In the Yale study, 79% of the women in the series had received serious injuries to the head, 5% had lacerations requiring sutures, and 62% had contusions and soft tissue injuries (2). In all series, the areas most commonly injured in women were the



OCTOBER 25, 1992 Activists with the Asian Task Force Against Domestic Violence participate in the first Jane Doe Walk for Women's Safety in Boston

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As the movement against domestic violence evolved, women of color and immigrant women called attention to their specific needs.

