

Professor awarded CDC grant for research into perinatal violence

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Margaret Mary Downey, PhD, MSW

In July, [Margaret Mary Downey, PhD, MSW](#), received a [National Violent Death Reporting System \(NVDRS\)](#) New Investigator Award from the American Public Health Association and the Centers for Disease Control and Prevention.

NVDRS is the only state-and jurisdiction-based violent death reporting system to provide comprehensive data on suicides, homicides, deaths from legal intervention, and unintentional firearm deaths. Dr. Downey, a reproductive and maternal health

expert, will use the award to analyze NVDRS records related to violent deaths in the perinatal period.

“Peripartum homicide and suicide are both, in many ways, very preventable losses,” Downey said. “People access health and social services during this time more frequently and in a more engaged way than perhaps ever before. I hope to contribute generalizable knowledge about how risk for violent death manifests and goes unaddressed, despite contact with systems positioned to help.”

Dr. Downey will be the first researcher to explore the narrative text files in the NVDRS database using a computational text analysis technique called Epistemic Network Analysis. This technique will allow her to analyze and visualize the narrative data to quantify the magnitude of pregnancy-associated violent deaths. Her research will identify patterns in the characteristics of the victims, the perpetrators, or the contexts in which the violence occurs.

Long-term, the project aims to improve screening and intervention methods for people at risk of perinatal violent death. Dr. Downey hopes the research will encourage policymakers to recognize and honor the time and resources healthcare and social service providers dedicate to screening for and assessing those risks.

“We might find that some unexpected person or institution was in a position to intervene and help a pregnant person at risk,” Downey said.

This project is directly informed by Dr. Downey’s work with Dr. Maeve Wallace, who found in 2020 that [homicide is a leading cause of death among pregnant and postpartum women in Louisiana](#). Downey hopes to pinpoint where opportunities for intervention in these violent death cases are routinely missed – and what social determinants of risk are not being properly assessed.

“I’m interested in what clinical and social care encounters can tell us about who has power, who needs what, and how to live together,” Downey said. “I think we should ask how the social world shapes the impact of tools like intimate partner violence screening surveys on providers and patients alike. Then, we can continue to meaningfully improve them or reform them.”

Dr. Downey encourages social workers to think about a time when they felt safe enough to ask an authority figure for help. How did that person speak and act? What was going on in that moment, politically or personally? Context and nuance are key

for violence prevention. Hopefully, Dr. Downey's research will shed some light on the demographic and contextual factors most relevant to risk of perinatal violent death.

"Too often, maternal mortality comes down to analyzing an individual's genetics, physiology, behavior, or decisions," Downey said. "We would do better to think about how we might leverage our positions as social workers to help organize formal and informal networks of care for an individual client, family, or even community."