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Title:

Partner violence during pregnancy, psychosocial factors and child outcomes in Nicaragua

The objectives of the thesis was to explore partner violence during pregnancy in Nicaragua – its prevalence and characteristics, how women perceive, understand and cope with it, its association with specific child outcomes such as low birth weight (LBW), small for gestational age (SGA) and preterm birth, and possible pathways. A cross-sectional community-based study was conducted with 478 pregnant women and for a sub-sample of 147 salivary cortisol was measured. A case-referent hospital-based study was organized including 303 mothers immediately after delivery. In-depth interviews were conducted with women survivors to increase understanding of partner violence during pregnancy.

The prevalence of emotional, physical and sexual partner abuse during pregnancy was 32.4%, 13.4% and 6.7% respectively. Seventeen percent of the victims suffered all three types of violence and in two thirds the abuse was severe and repeated. Half of the abused women had experienced punches and kicks directed to the abdomen; however, only 14% had sought health care and very few had disclosed the abuse or contacted police or authorities. Adolescent mothers, unwanted pregnancy and late registration for antenatal care or no check-ups were more likely among victims. The access to social resources facilitated the women's ability to cope with the abuse, but the pregnancy itself was a barrier to receiving support from family, friends or society. The ability to confront abuse was determined by a complex interplay of factors such as economic independence, severity of abuse, access to social resources, implications for important others (i.e. children), socioeconomic group and a personal ability to cope with social norms.

Low social resources, high levels of emotional distress and attempted suicide were associated with violence during pregnancy. Abuse during pregnancy was also found as an independent risk factor for LBW. Sixteen percent of LBW was attributed to physical abuse by a partner during pregnancy. A significant association between abuse during the index pregnancy and SGA was found.

Partner violence during the pregnancy, low social resources and emotional distress were associated with higher levels of salivary cortisol. Pregnant women with high cortisol values were significantly more likely to give birth to SGA babies. A substantial decrease of birthweight, 142 grams, was estimated to be associated with increases in cortisol due to violence exposure.

Partner violence during pregnancy is a serious social problem that impacts the rights, health and wellbeing of both the woman and her unborn child. The studies call for prioritization of intervention programmes for prevention and detection of violence, treatment and rehabilitation of the victims and the perpetrators, and change of the structural causes producing violence in society