

"My sister was advising me. She told me that if the life in my relationship was difficult and I can't tolerate it, I may opt for leaving and go back home to restart afresh. She was very open and frank with me...This was different from what my mother was advising me, to stay in the relationship because that is what men are like."

"We received information from his family that he needs to reconcile with me so that I go back to stay with him and take care of the children. My parents asked them to come with him for a meeting so that they hear the actual story from me and him. During the meeting, he requested forgiveness in front of his parents and my parents. He was told not to beat me again otherwise my parents will take me from him for good."

The members of the natal family advised the victim to consider the situation carefully before thinking of leaving. By contrast, some women reported that younger relatives were more likely to encourage victims to leave an abusive partner.

Emotional support

Victims of partner violence reported that their natal family was ready to continue showing them love and empathy even though their partners thought that they were of no value. A 23-year-old woman with primary education, on her third pregnancy and with one child living and engaged in selling clothes in a nearby market, described her faith in prayers and spiritual support:

"There is hope in prayers, I tell you. Satan is very strong in interfering with God's plan between the two of you in your relationship. Loving parents should hold you in prayers and my mother is very good in praying. Once I tell her to pray for me, she knows I am in trouble and she starts praying. I can tell you that prayers work and my husband comes the next day changed. Then I believe that the prayers have helped."

Women reported that, in times of trouble, they felt the intimacy, affection and warmth from their natal relatives and that made them get energized despite the challenges in their relationship. The interviewed women said that their natal relatives prayed for them and they (the women) took that as a sign of emotional support.

Practical support

Most women reported that the experience of physical violence from their partner was accompanied with limitations in financial support which caused more suffering and limited their ability to leave the abusive relationship. A 28-year-old woman with primary education, housewife, with one child and residence close to the natal family, explained:

"For example, after beating me, he would go to work without even leaving a cent for food while knowing that I have no work and nothing to buy food for me and the children. I really depended on my sister who was ready to listen to my challenges and give me money for food. He would then come home that evening, eat food and sleep, even without asking where I was getting money. That is how the life goes."

However, in many cases, the natal family was there to provide money for expenses such as food and child care but this assistance came with the need to keep it a secret: all women who reported financial support from the natal family stressed that the partner could not know that support was provided.

Reconciliation and mediation

Making sure that disputes are settled in events where the relationship is near separation was reported by some of the interviewed women to be the responsibility of the natal family. A 26-year-old mother of one, with primary education, narrated what happened at the natal family where she was living following her separation from her partner a week earlier:

Conclusion

This study has revealed that physical, emotional and sexual violence during pregnancy affects one-third of all women in the study area in Tanzania. The study has also demonstrated that social support is associated with decreased risk of experiencing these forms of violence and also increases help-seeking behaviour. The natal relatives are willing to support women who experience partner violence during pregnancy; however, they often encouraged the women to stay in their marriage so that they continue taking care of their children. The emotional and practical support provided to victims of partner violence also aimed at supporting the family and the children. Many women are therefore likely to continue living in violent situations for the sake of children and the family. Stakeholders supporting victims of violence need to understand the fears and priorities of victims of violence and structure interventions to address their priorities. There is an urgent need to understand the coping mechanisms employed by women who continue to stay in a violent relationship and the long term effects of violence to their children.

References

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About the project

The PAVE project (The Impact of Violence on Reproductive Health in Tanzania and Vietnam) is funded by DANIDA (the Danish International Development Agency) and conducted in collaboration between Tanzanian, Danish, and Vietnamese researchers from four universities: Kilimanjaro Christian Medical University College (KCMUCo), Hanoi Medical University, University of Copenhagen, and University of Southern Denmark. In Tanzania, ethical approval of the research was obtained from KCMC's Research Ethics Committee.

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PAVE PROJECT RESEARCH UPDATE 4 INTIMATE PARTNER VIOLENCE DURING PREGNANCY AND THE ROLE OF SOCIAL SUPPORT: RESEARCH FINDINGS FROM NORTHERN TANZANIA

KEY FINDINGS

- Violence against women during pregnancy is common in Tanzania: almost one out of three pregnant women in this study reported having been a victim of violence by their partner during pregnancy.
- Social support, especially in the forms of having someone who will offer financial assistance or who can be counted on for other support, is associated with decreased risk of experiencing intimate partner violence during pregnancy.
- The majority of women who are victims of partner violence during pregnancy disclose their experience to their own family rather than to the family of their partner: the natal relatives mostly encourage women to stay in their relationship to care for their children.

INTRODUCTION

Violence against women is recognized as a major public health problem that relates to gross violation of women's human rights and affects millions of women worldwide.¹ In Tanzania, four in ten women experience violence by their intimate partner during their lifetime.² Although the prevalence of intimate partner violence during pregnancy is not precisely known, its consequences include: pregnancy loss, miscarriage, stillbirth, preterm birth and low birth weight.

Thus, there is a need to explore the factors that can decrease exposure to violence and increase chances of seeking help in order to inform future interventions and reduce the resulting complications of violence, especially during pregnancy. Social support has the potential to be such a factor. Tanzanian women make use of informal social support networks for maternal and child care but it remains unclear whether such networks influence the risk of exposure to partner violence during pregnancy. In this study, social support is defined as any form of assistance that women may receive from other people, be it their trusted friend, a family member or through supportive social networks such as their natal family or their partner's family. Social support may be perceived) or actually received by the beneficiary.

A cohort study with a total of 1,116 participants was conducted. The women were interviewed four times: at enrolment (which took place no later than week 24 of the pregnancy); in the second trimester; at delivery; and six weeks postpartum. Besides basic socio-demographic information, the cohort study interviews included information on various forms of social support including communication with natal family and family of the partner respectively, perceived support from natal family and family of the partner, group support, practical social support and emotional support.

To assess women's exposure to partner violence, the WHO questionnaire to investigate women's health and violence against women was used. Based on the cohort study, twenty pregnant women living with partner violence were selected through purposive sampling and invited to take part in a series of ethnographic interviews.

MAIN FINDINGS

1. Violence against women is common during pregnancy

The results of the research showed that almost one out of three women (30.3%) were victims of violence by their partner while they were pregnant. The most common form of violence was emotional violence (22.8%), followed by sexual violence (15.4%) and physical violence (6.3%) (Figure 1).

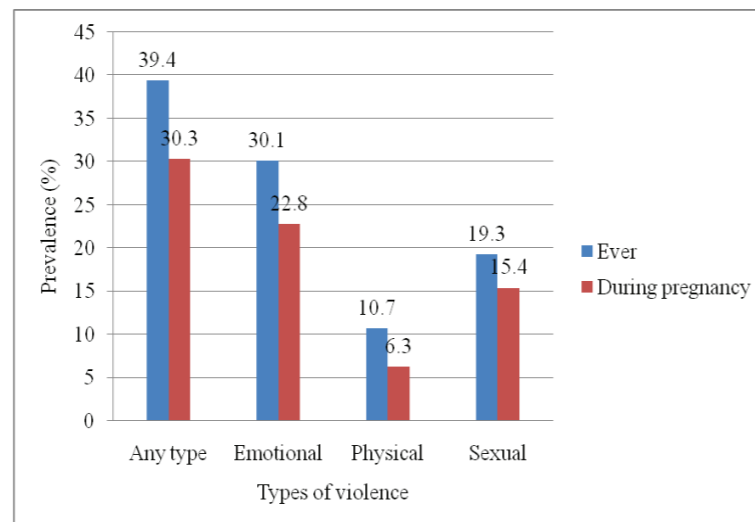


Figure 1. Prevalence of different types of violence before and during pregnancy (n = 1,116)

2. Social support received by women

Communication with the family

A slightly higher proportion of the interviewed women communicated on a weekly basis with the family of their origin than they did with the family of the partner (Figure 2). However, 22.0% of them never communicated, or did it only once a year, with the family of the partner. About 18.0% of the women never communicated, or only once a year, with their family of origin.

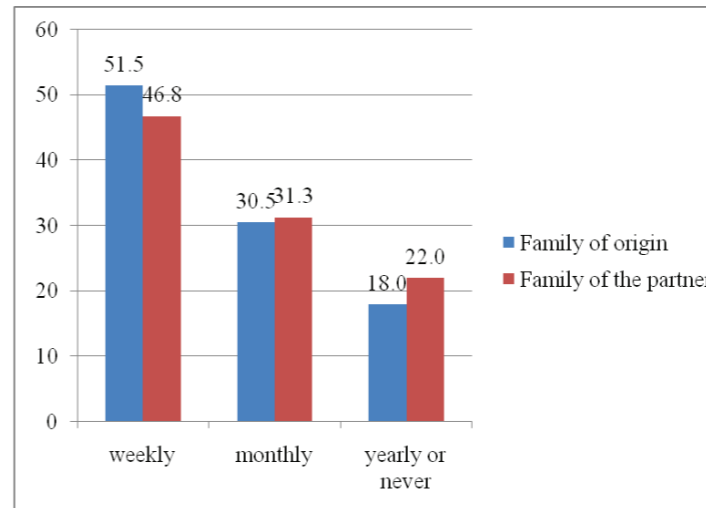


Figure 2. Frequency of communication with natal family and family of the partner (n=1,116)

Perceived support from family

One in four women (26.1%) reported that they did not expect any support from the family of the partner in case of problems. On the other hand, although more women trusted that they would receive support from their natal family, a large minority (15%) did not expect to be supported by their family of origin.

Group support

Attending women's or other specific group associations was also assessed. These associations included organizations like women's or community groups, religious groups or political associations. About 14% of women reported regularly attending meetings of such associations on a monthly basis.

Emotional support

Of all forms of support provided to women during pregnancy, the most common was emotional support, where 93.5% of the interviewed women reported receiving emotional support (Figure 3).

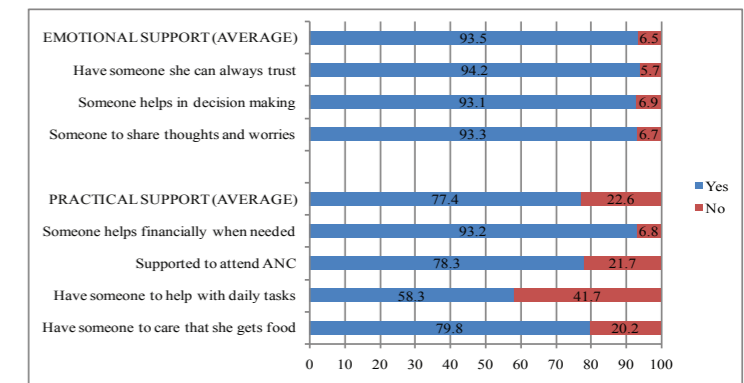


Figure 3. Proportion of women receiving different forms of emotional and practical support (n=1116)

Practical support

More than three quarters (77.4%) of the interviewed women received practical support during pregnancy (Figure 3). Most women reported that they had someone who would help them financially, followed by those who had someone who cared that they got food (79.8%). Nearly six out of ten women (58.3%) had someone to help them with daily tasks.

3. Social support is associated with decreased risk of experiencing partner violence during pregnancy

Of all forms of social support provided, these three forms of support were significantly associated with risk of experiencing partner violence during pregnancy: communication, perceived support and practical support.

Women who had reason to believe that a member of their natal family would offer support when in need were less likely to experience repeated episodes of violence as compared to women who did not expect any support from their own family. This implies that strong family ties and networks established between the woman and her family are associated with decreased risk of exposure to violence during pregnancy. An association between financial dependency and intimate partner violence was also found: women who reported having no one to depend on financially had more than three times increased risk of experiencing repeated episodes of partner violence when compared to those who had reason to hope they would help them financially.

4. Social support by the family focuses on encouraging the woman to stay in the relationship

The qualitative research showed that women who choose to disclose their experience of violence with their families were encouraged to stay in their relationship. Further, the support provided by natal relatives aimed mainly at supporting the women to continue staying in their marriage. When comparing the advice she received from her mother and that from her sister, a 28-year-old woman with one living child and working in business noted a difference:



ABOUT THE STUDY

The aim of this study was to determine the association between social support and intimate partner violence during pregnancy, among women attending antenatal care in Moshi Municipality in northern Tanzania. Data collection was conducted over a two-year period, from 2014 to 2016, to generate insights into the prevalence, forms and consequences of intimate partner violence. Quantitative and qualitative approaches were used to collect data from pregnant women who were recruited at two health centres.