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Pave Project Research Update 1

Intimate Partner Violence Among Pregnant Women: Preliminary Findings from Interdisciplinary Research Conducted in Northern Tanzania

Key Findings

- Violence is common during pregnancy: almost a third of the pregnant women in this study reported exposure to intimate partner violence during pregnancy,
- Different forms of violence often co-occur: women who experience one form of violence – physical, sexual, or emotional – are often also exposed to another form of violence,
- Some acts of violence are more common than others – slapping/choking; intimidation; and sexual pressure occurring particularly frequently,
- For some women, intimate partner violence is a routine part of pregnancy,
- Intimate partner violence is often a lonely experience: the vast majority of the pregnant women in this study told no one about their husband's violence against them,
- Kinship practices of patrilineality and patrilocality deepen women's vulnerability to intimate partner violence

Introduction

This research update presents preliminary findings from the Tanzanian part of the interdisciplinary research project PAVE (*The Impact of Violence on Reproductive Health in Tanzania and Vietnam*).

Violence against women is a global public health problem. According to a recent report from WHO, 35% of women worldwide have experienced either physical and/or sexual violence.¹ Pregnant women constitute a particularly vulnerable sub-group, with prevalence rates of intimate partner violence (IPV) during pregnancy ranging between 2.3% and 57.1% in sub-Saharan Africa.² In Tanzania, research conducted by the World Health Organization (WHO) has found that intimate partner violence is a common problem and that women who have experienced partner violence are more likely than other women to report health problems and suicidal thoughts.³ There is, however, a lack of knowledge of the impact of IPV on pregnant women's health and lives. On this background, the PAVE project focuses on the intersections between intimate partner violence and women's reproductive health, investigating particularly how violence affects the mental health of pregnant women and the outcomes of their pregnancies.



Methodology

Combining epidemiological and ethnographic approaches, the PAVE project aims to generate insights into the prevalence, forms, and consequences

of intimate partner violence. In Tanzania, PAVE project data was collected in Moshi district over a two-year period, from 2014 to 2016. The project included a cohort study involving 1,116 pregnant women recruited at two health care clinics and an ethnographic study involving repeated in-depth interviews with 47 women who were recruited through the cohort study.

Each of the 1,116 pregnant women participating in the cohort study was 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 the women's physical and mental health status; their exposure to violence; and the health of their infants. To assess the women's exposure to partner violence, the gold standard WHO questionnaire to investigate women's health and violence against women was used. A team of six female interviewers – who were selected and trained by the PAVE project – conducted the cohort study interviews. Based on the cohort study, a group of 47 pregnant women living with partner violence were purposefully selected and invited to take part in a series of ethnographic interviews. The interviews were conducted by the two PhD students working on the PAVE project and explored in depth how women experienced the violence they lived with and how they coped with it.

The PAVE project 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 College (KCMC), 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.

Main Findings

1. Violence is common during pregnancy

The research found/results revealed that pregnancy offers no immunity to violence: almost a third of the pregnant women (30.3%) reported exposure to partner violence during their current pregnancy. The most common form of violence was emotional violence; this was reported by 22.8% of the women.

- 1 World Health Organization. Global and regional estimates of violence against women: prevalence and health effects of intimate partner violence and non-partner sexual violence. Geneva. 2013
- 2 Shamu S, Abrahams N, Temmerman M, Musekiwa A, Zarowsky C., 2011. A Systematic Review of African Studies on Intimate Partner Violence Against Pregnant Women: Prevalence and Risk Factors. *PLoS One*. 2011;6(3):e17591.
- 3 García-Moreno C, Jansen HA, Ellsberg M, Heise L, Watts C. WHO Multi-country Study on Women's Health and Domestic Violence against Women Initial results on prevalence, health outcomes and women's responses. *World Health*. 2005.

Sexual violence was reported by 15.4% of the women, and 6.3% of the women reported physical violence during their pregnancies (Figure 1).

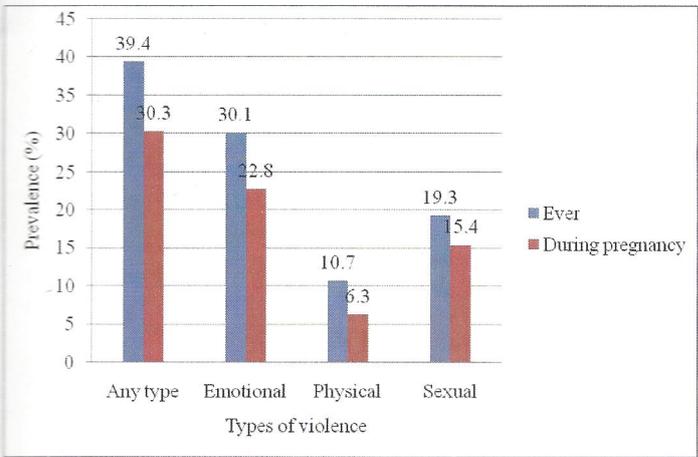


Figure 1: Prevalence of different types of violence before and during pregnancy (n = 1,116)

2. Different forms of violence co-occur

The study found that different forms of violence often co-occur: women who are exposed to one form of violence are often also exposed to another (Figure 2). The most common combination of forms of violence is the combination of emotional and sexual violence; this was reported by 17.8% of the women who lived with violence. The combination of physical and emotional violence was reported by 6.2% of the women and 9.8% of the women experienced all three forms of violence during their pregnancies.

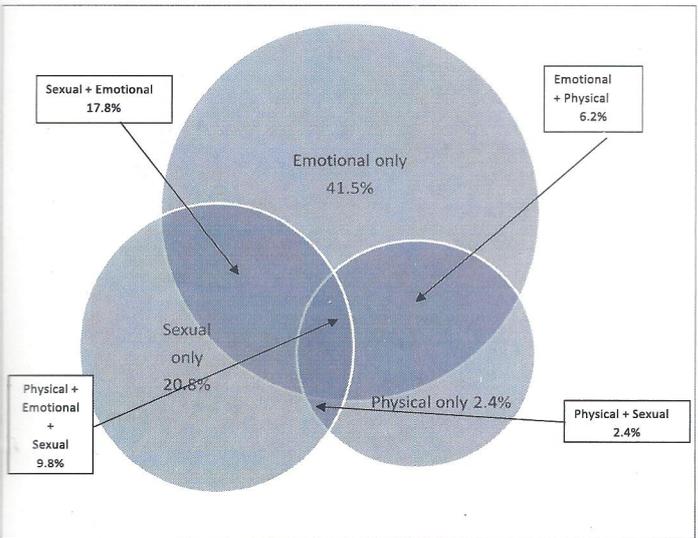


Figure 2: Co-existence of different types of violence (n=340)

3. Some acts of violence are more common than others

Following the WHO methodology, the PAVE project assessed pregnant women’s exposure to violence by asking them whether they had experienced specific acts of violence such as physical slapping or beating, emotional intimidation, or sexual pressure. Results showed that some acts of violence were more common than others. Of the women who had experienced emotional violence, 53% reported that their husband had done something to intimidate them on purpose. Of the women reporting physical violence, 53.8% had been slapped; while sexual violence most often referred to experiences of being pressured to have sexual intercourse against one’s will (51.1%) (Figure 3).

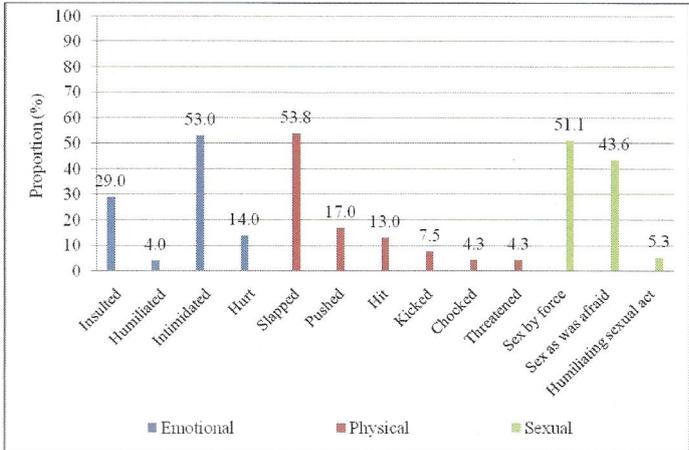


Figure 3: Acts of violence during pregnancy (n = 340)

4. For some women, violence is a routine part of pregnancy

The PAVE project assessed how often women had been exposed to violence during their pregnancies. The results showed that for some women, intimate partner violence was a routine part of pregnancy. In the second trimester of their pregnancies, 8.3% of the women reporting physical violence had already experienced this form of violence more than five times; 10.1% of the women living with emotional violence had experienced this more than five times; and 6.8% of the women reporting sexual violence had been exposed to this form of violence more than five times during their pregnancies (Figure 4).

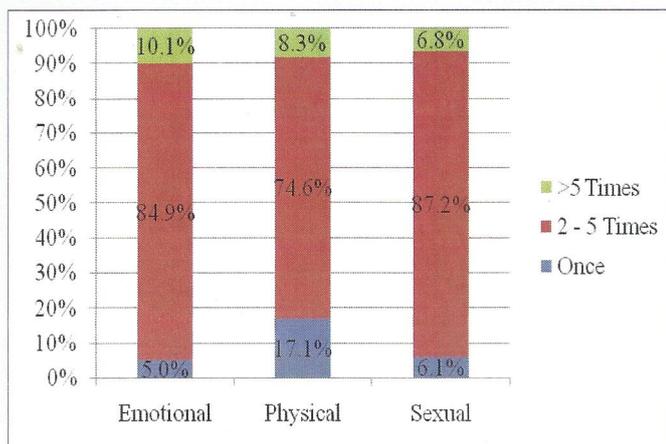


Figure 4: Frequency of violence during pregnancy (n = 340)

5. Most pregnant women do not disclose violence

Most of the pregnant women living with violence talked to no one about/did not tell anyone about their husband's behavior: 77% kept their experiences to themselves (Figure 5). Very few spoke, and of those very few, the largest group was to their family of birth, (16%), with negligible numbers speaking to friends /neighbours (3%), or with in-laws (3%). A few women informed religious leaders, legal support centres, and police. The qualitative interviews showed that women tended to keep their experiences of abuse to themselves out of concern that disclosure would make others blame them for their husband's behaviour. Further, many women doubted the effectiveness of the support they might receive from local organizations or authorities.

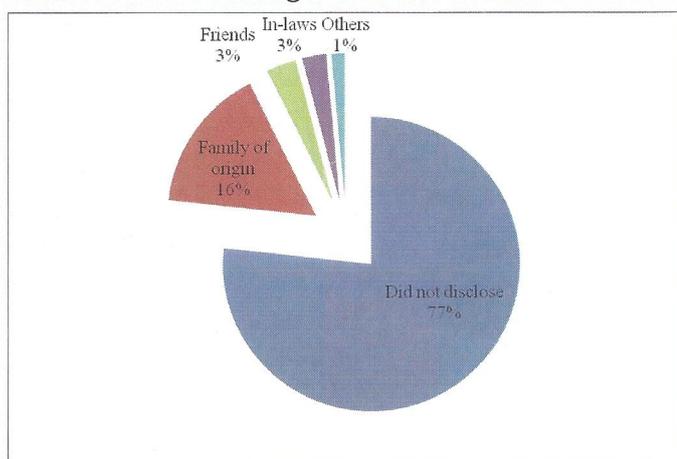


Figure 5. Women's disclosure of IPV (n=340)

6. Kinship practices deepen women's vulnerability to partner violence

The PAVE project's qualitative research findings show that kinship practices tend to deepen women's

vulnerability to partner violence. In the Moshi area, prescribed kinship is patrilineal and patrilocal. On getting married, women will usually leave their families of birth and join their husband's household. In many cases, this means that upon marriage, women will lose their own support networks of friends and family. In situations of conflict, this places women at a major disadvantage, as they will often lack a firm social foundation for support in the household and community where they live.

In most households, moreover, the husband is considered the head of the family and household property is considered to belong to him – even his wife will sometimes be regarded as part of his property. In the words of a 32-year-old woman: "He is giving his mother all the money and we remain with nothing...nothing even to support his wife and baby." Since women marry out of their natal families, it is usually sons who inherit the property of their parents. In situations of severe disagreements, it is therefore the wife, not the husband, who must leave their home. Many women living with partner violence explained that they continued to stay in an abusive relationship because leaving this relationship would entail losing their home and their children. One 40-year-old woman described what went on in her mind after her husband had slapped her:

I thought of taking this man to the police station... God forgive me for thinking that; and my baby, please never inherit that bad mind of mine/from me... In the past before the current pregnancy, fighting was normal and I had to live with it... Men don't want women to ask for this and that...you can be slapped just for a small reason of not taking your kid to bathe...just excuses.

Qualitative findings show, in short, that the patrilocal and patrilineal kinship practices that prevail in Northern Tanzania render it difficult for women to act upon and protest against their husband's violence against them.

