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Abstract Title:

Intimate Partner Violence during Pregnancy: A survey among Maltese women

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Abstract

Intimate partner violence is a global issue, reaching women across all socio-economic class, cultural and racial distinctions. It is the primary cause of morbidity in women aged between 19 and 44 years. Pregnant women exposed to intimate partner violence are more likely to experience psychological illness and adverse pregnancy outcomes; however, in Malta, research investigating abuse during pregnancy has remained fairly unexplored. This study aimed to assess the frequency of intimate partner violence during pregnancy and investigate the socio-demographic variables and pregnancy outcomes associated with abuse during pregnancy.

A survey research design was used. The sample comprised of 380 Maltese postnatal women, recruited by convenience, non-proportional quota sampling technique (response rate of 78.9%, n=300). Data was collected at the postnatal wards by a modified version of the validated WHO violence against women instrument. The tool was translated into Maltese and tested using test-retest reliability. The WHO ethical considerations were adhered to and ethical approval was obtained. IBM SPSS (22) was used to generate frequencies and cross-tabulations using the Pearson's Chi-square test.

Findings demonstrated that 22.3% (n=66) of participants were exposed to one or more acts of psychological, verbal, physical or sexual abuse by their intimate partner during pregnancy. Psychological and verbal abuse were the most common forms of violence experienced, followed by physical and sexual abuse. Pregnancy was neither found to protect women nor increase their chances of experiencing physical acts of violence. Several socio-demographic and pregnancy-related variables were found to significantly increase women's risk of experiencing intimate partner violence during pregnancy; including: young age, being older than 35 years, low education, working as a housewife, single marital status or living with the partner out of wedlock, illicit drug use, unplanned pregnancy, having an infant weighing less than 1kg at birth, requiring hospital admissions and experiencing physical injuries during pregnancy.

Using the ecological model and the gender theory, this research discussed how violence during pregnancy cannot be fully understood unless cultural, religious and societal issues are considered. Several recommendations were proposed; including the introduction of routine screening for abuse



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during pregnancy, the need to educate health professionals on identification and management of violence during pregnancy and to organize public awareness campaigns.

The ratio of intimate partner violence during pregnancy in Malta is 1-2 in every 5 women.

During pregnancy, abuse might change to psychological and sexual violence perhaps because the damage caused in these forms of violence is less noticeable.