

**PREVALENCE AND ASSOCIATED FACTORS FOR
DOMESTIC VIOLENCE AMONG PREGNANT WOMEN
ATTENDING KISUMU DISTRICT HOSPITAL, KENYA**

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ABSTRACT

Domestic Violence (DV) during pregnancy is a serious global public health problem associated with higher rates of unintended or adverse pregnancies, abortions, neonatal and infant outcomes and mental disorders. Almost half of women in Kenya suffer DV in their lifetime; however, little is known about the prevalence and correlates of IPV during pregnancy. The main objective of this study was to determine the prevalence and factors associated with domestic violence among women attending antenatal clinic (ANC) at Kisumu (KDH). This was a cross sectional study, carried out among pregnant women who were randomly selected and interviewed using a structured questionnaire. The main issues included: socio-demographics, HIV status, DV experience (in a lifetime, during current pregnancy and 12 months before current pregnancy) and drug use by male partner. Data was coded and analyzed using *Epi-info*. The mean age of the 300 participants was 23.7 years (± 5 SD). One hundred and ten (36.7%) women experienced at least one form of violence during pregnancy. Psychological violence was the most common (29%; 87), followed by sexual (11.7%; 35) then physical (9.7%; 29). Physical abuse in a lifetime was experienced by 78 (26%) women of whom 24 (31%) reported moderate to severe injuries. Women who experienced violence during pregnancy were more likely to have witnessed maternal abuse in childhood (AOR 2.52; 95% CI [1.27, 5.01], been then or married previously (AOR 3.83; 95% CI [1.4-10.51], been in a polygamous union (AOR 3.09; 95% CI [1.44, 6.64], been multi-parous (AOR 1.96; 95% CI [1.16, 3.32] or had a partner who took alcohol (AOR 2.25; 95% CI [1.31-3.86]. Having a partner who attained tertiary education was protective against DV (AOR 0.38; 95% CI [0.2-0.73]. In conclusion, this study found that DV was common among women attending ANC at KDH. Screening for DV as an integral part of routine antenatal

care and appropriate interventions to reduce the burden of violence experienced by pregnant women and the unborn baby is urgently needed.