



Women who experience child abuse are more likely to be victims of intimate partner violence in Peru

Las mujeres que sufren de maltrato infantil tienen una mayor probabilidad de ser víctimas de violencia ejercida por la pareja en Perú

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ABSTRACT: *Objectives:* To determine the association between child abuse and intimate partner violence victimization among married or cohabiting Peruvian women aged 18 years old or older. *Methods:* Cross-sectional study analyzing secondary data from the National Survey on Social Relationships 2015. To find the association between child abuse and intimate partner violence victimization, a multinomial logistic regression adjusted for possible confounding variables was performed. *Results:* Data from 1,084 married and cohabiting women were included. The prevalence of child abuse was 49.6% (95%CI 45.8–53.3) and the prevalence of intimate partner violence victimization was 64.2% (95%CI 60.5–67.8). An association was found between child abuse and intimate partner violence victimization (relative risk ratios 5.72, 95%CI 3.71–8.83). *Conclusion:* Married or cohabiting women in Peru who experienced childhood maltreatment are more likely to experience intimate partner violence in adulthood.

Keywords: Gender-based violence. Domestic violence. Intimate partner violence. Child abuse. Surveys and questionnaires. Cross-sectional studies.

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RESUMEN: *Objetivos:* Determinar la asociación entre el maltrato infantil y la victimización por violencia ejercida por la pareja en mujeres peruanas casadas o convivientes mayores de 18 años. *Métodos:* Estudio transversal de análisis de datos secundarios de la Encuesta Nacional sobre Relaciones Sociales 2015. Para encontrar la asociación entre el maltrato infantil y la victimización por violencia ejercida por la pareja se realizó una regresión logística multinomial ajustado por posibles variables de confusión. *Resultados:* Se incluyeron datos de 1084 mujeres casadas y convivientes. La prevalencia de maltrato infantil fue del 49,6% (IC95% 45,8–53,3) y la prevalencia de victimización por violencia ejercida por la pareja fue del 64,2% (IC95% 60,5–67,8). Se encontró asociación entre el maltrato infantil y la victimización por violencia ejercida por la pareja (razones de riesgo relativo 5,72, IC95% 3,71–8,83). *Conclusiones:* Las mujeres casadas o convivientes de Perú que sufrieron maltrato infantil tienen una mayor probabilidad de sufrir de violencia ejercida por la pareja en la adultez.

Palabras clave: Violencia de género. Violencia doméstica. Violencia de pareja. Maltrato a los niños. Encuestas y cuestionarios. Estudios transversales.

INTRODUCTION

It is estimated that one billion children worldwide have been victims of physical, psychological, sexual abuse, and neglect in the last year¹. The World Health Organization (WHO) defines child abuse as the abuse and neglect suffered by those under 18 years of age, which can cause damage to the health, development, and dignity of the child².

Psychological abuse includes denigration, ridicule, intimidation, discrimination, rejection, and other non-physical forms of hostile treatment that are caused by caregivers and that have negative effects on the cognitive, social, emotional, and physical development of the child^{3,4}. Physical abuse includes those acts committed by caregivers that cause or have the potential to cause physical harm³.

Violence by intimate partners affects 15 to 71% of women throughout their lives and occurs in the form of isolated incidents or in cycles that can last several years⁵. In Peru, the psychological violence exerted by husbands or partners toward women has decreased considerably, from 69.4% in 2014 to 58.9% in 2018. However, physical violence has barely decreased in this same period, going from 32.3% in 2014 to 30.7% in 2018⁶.

Evidence suggests that child abuse, either psychological or physical, is related to a higher risk of victimization by intimate partner violence when the person becomes an adult⁷⁻⁹. The risk of suffering from psychological, physical or sexual violence in adulthood increases 2 to 4 times in those who have experienced some form of physical or sexual abuse in childhood⁸. In addition, it is recognized that child abuse and intimate partner violence are problems that affect public health¹⁰⁻¹².

However, most of the studies that have analyzed this relationship have done so independently, either on victimization by psychological violence or on victimization by physical violence that occurred in adult women, the latter more frequently. Few studies have

evaluated the interrelationships between the types of child abuse associated with the interrelationships between the types of intimate partner violence¹³.

Therefore, the objective of this study was to determine the association between child abuse and partner violence in married or cohabiting Peruvian women over 18 years of age. It is hypothesized that women who have been victims of child abuse are more likely to suffer from partner violence in adulthood. Likewise, it was sought to determine the interrelationships between the different types of child abuse and violence exerted by the partner.

METHODS

A cross-sectional study of secondary data analysis of the National Survey on Social Relations (*Encuesta Nacional sobre Relaciones Sociales – ENARES*) 2015 was carried out, which was carried out between August 10th and October 11th, 2015 by the National Institute of Statistics and Informatics (*Instituto Nacional de Estadística e Informática – INEI*) in a Peruvian sample of national representation. The purpose of the ENARES 2015 was to quantify family and school violence in Peru; it was carried out in urban and rural areas of the 24 regions of Peru and in the Constitutional Province of Callao¹⁴.

The complex sampling of the ENARES 2015 was probabilistic, of areas, stratified, three-staged, and independent in the study domain. The sampling frame was based on statistical information from the 2007 National Population and Housing Census, updated in 2013. It had three sampling units: A primary unit made up of the urban area that included blocks and the rural area that included populated centers. A secondary unit made up of houses. A tertiary unit that was made up of people¹⁴.

To meet the objective of this study, survey A “Family, economic, and sexual violence against women” was analyzed, which included women aged 18 years old or older, who lived in private homes in urban and rural areas of the country. This survey included 1,596 households, of which 1,056 were urban and 540 rural, grouped into 177 clusters, of which 132 were urban and 45 rural¹⁴.

In order to avoid biases in data collection, the following considerations were taken: The word “violence” was avoided in the technical documents, because it could inhibit the responses of the informant. The data collection instruments had a clear and simple language. In cases of sexual violence, cards were used that allowed only the code to be answered. Personal interviews were conducted in a private setting and were conducted only by women. The pollsters provided emotional support in the event of revictimization or latent violence¹⁵.

For the present study, data from married or cohabiting women over 18 years of age were included and data from widowed, separated, divorced or single women and incomplete data were excluded. Survey A of ENARES 2015 has six parts and consists of four databases, which were joined as described in the participant selection flowchart (Supplementary Material).

Psychological abuse in childhood was measured by the question: Do you remember if the people you lived with in your home have ever insulted or offended you when you were

a child, up to the age of 11?; response alternatives were closed and dichotomous (yes, no). Physical abuse in childhood was measured by the question: Have the people you lived with ever hit you when you were a child, up to the age of 11?; response alternatives were closed and dichotomous (yes, no) (Supplementary material).

Based on these questions, the independent variable “child abuse” was created, whose categories were: no abuse, only psychological abuse, only physical abuse, and both types of child abuse.

Psychological violence was considered positive if at least one of the 18 questions referring to different situations of psychological abuse exerted by the husband (partner) at some point in their life was answered affirmatively. The answers to these questions were closed and dichotomous (yes, no). Physical violence was considered positive if at least one of the 14 questions referring to different situations of physical aggression exerted by the husband (partner) was answered affirmatively, at some point in their life. The answers to these questions were closed and dichotomous (yes, no) (Supplementary material).

Based on these questions, the independent variable called “victimization by partner violence” was created, whose categories were: no violence, only psychological violence, only physical violence, and both types of partner violence.

Sociodemographic variables included were age (years); marital status (cohabiting, married); origin (urban, rural); education (no studies, elementary / middle school, high school, higher education). Additionally, other variables were incorporated, which were selected for their association with intimate partner violence, according to previous studies, such as the number of marriages / cohabitations¹⁶ (once, more than once); number of children¹⁷ (no children, 1 to 2, 3 to 4, more than 5); abortion¹⁸ (no, yes); recent work¹⁷ (no, yes), disability¹⁹ (no, yes); economic dependence on the household²⁰ (husband, woman interviewed, both, other members), and health insurance²¹ (no, yes).

Statistical analysis was performed with Stata version 16 for Windows. Due to the complex sampling of ENARES 2015, the module “Analysis of survey data” was used, where expansion factors were included, and weighted results were obtained with the *svy* command in the analyses (univariate, bivariate, and multivariate).

In the univariate analysis, absolute frequencies, percentages and weighted percentages were calculated, with their 95% confidence intervals (95% CI). In the bivariate analysis, the chi-square test was used to evaluate possible differences between the categories of intimate partner violence. Since the dependent variable has more than two categories, a multinomial logistic regression was performed and both crude and adjusted relative risk ratios (RRR) were obtained, with their 95% CIs. P values lower than 0.05 were considered significant.

In order to apply multinomial regression, the assumption of independence of irrelevant alternatives (IIA) was evaluated through the Hausman and Small-Hsiao tests²². With the Stata *collin* command, the existence of multicollinearity was assessed if the variance inflation factor (VIF) was greater than 10.

The interrelationships between child abuse and intimate partner violence were observed using a Sankey diagram, prepared with the SankeyMATIC online application (<http://sankeymatic.com>).

The study project was approved by the Ethics Committee of Universidad Científica del Sur (registration code: 319-2020-PRE15). The data of ENARES 2015 are freely accessible and do not allow the identification of the participants.

RESULTS

Survey A of ENARES 2015 had records of 1,599 women, including those married ($n = 544$) and cohabiting ($n = 540$). Widows ($n = 122$), divorced ($n = 12$), separated ($n = 167$), and single ones ($n = 214$) were excluded; no incomplete data were found, leaving 1,084 records for the final analysis (Supplementary material). The Hausman and Small-Hsiao tests had p values > 0.05 , fulfilling the IIA assumption, so multinomial logistic regression could be applied.

The mean age of the women was 43.7 years (95%CI 42.8–44.6), ranging from 18 to 90 years. The majority came from the urban area (77.4%), had a maximum of middle school education (42.8%), had only had one marriage/cohabitation (85.4%), had children (96.7%), between one and two children (46.4%), did not have an abortion or previous loss (73.7%), did not have a recent job (53.3%), did not have a disability (99.1%), were economically dependent of men (57.6%), and had health insurance (77.9%) (Table 1).

Of the total number of women considered for the study, 551 (49.6%) (95%CI 45.8–53.3) stated that they suffered from abuse in childhood, of these 180 (16.5%) suffered only psychological abuse, 84 (7.7%) suffered only physical abuse, and 287 (25.3%) suffered both types of abuse (Table 1).

Likewise, 701 (64.2%) (95%CI 60.5–67.8) stated that they were victims of violence exerted by their partner, of these, 357 (33.1%) were victims only of psychological violence, 30 (2.8%) were victims only of physical violence, and 314 (28.3%) were victims of both types of violence (Table 1).

In the bivariate analysis, marital status, education, number of children, abortion, recent work, disability, economic dependency, and childhood abuse showed significant differences according to the different categories of partner violence.

The highest proportion of victimization due to psychological and physical violence exerted by the partner occurred when the woman suffered physical abuse in childhood. However, the highest proportion of both types of violence occurred when the woman suffered from both types of abuse in childhood (psychological and physical) (Supplementary material).

In the crude model, the significant results were presented in the category of both types of violence (psychological and physical) exerted by the partner. Women who suffered from both types of abuse (psychological and physical) in childhood were up to almost seven times as likely to suffer from both types of partner violence in adulthood (Table 2).

In the adjusted model, results were similar to the ones in the gross model. It is shown that women who suffered from both types of abuse (psychological and physical) in childhood

Table 1. Sociodemographic characteristics of married or cohabiting Peruvian women over 18 years of age, 2015.

	n	%	%*	95%CI*
Age (years), mean		43.7	43.7	42.8–44.6
Marital status				
Cohabiting	543	50.1	49.8	46.3–53.3
Married	541	49.9	50.2	46.7–53.7
Origin				
Urban	673	62.1	77.4	76.1–78.8
Rural	411	37.9	22.6	21.2–23.9
Education				
No studies	114	10.5	8.0	6.4–9.9
Elementary/Middle school	352	32.5	28.5	25.3–31.9
High school	433	39.9	42.8	39.5–46.1
Higher education	185	17.1	20.7	17.6–24.3
Number of marriages/cohabitation				
One	923	85.1	85.4	82.8–87.7
More than one	161	14.9	14.6	12.3–17.2
Number of children				
Childless	34	3.1	3.3	2.3–4.7
1–2	470	43.4	46.4	43.3–49.6
3–4	332	30.6	30.7	28.0–33.5
More than 5	248	22.9	19.6	17.2–22.2
Abortion				
No	811	74.8	73.7	70.7–76.6
Yes	273	25.2	26.3	23.4–29.3
Recent work				
Yes	512	47.2	46.7	42.5–50.9
No	572	52.8	53.3	49.0–57.5
Disability				
No	1,075	99.2	99.1	98.2–99.6
Yes	9	0.8	0.9	0.4–1.8

Continue...

Table 1. Continuation.

	n	%	%*	95%CI*
Economic dependence				
Women	54	4.9	5.0	3.7–6.7
Men	638	58.9	57.6	53.9–61.2
Both	269	24.8	25.1	22.0–28.6
Others	123	11.4	12.2	10.1–14.7
Health insurance				
No	224	20.7	22.1	19.1–25.4
Yes	860	79.3	77.9	74.6–80.9
Child abuse				
No abuse	533	49.2	50.4	46.6–54.2
Only psychological abuse	180	16.6	16.5	13.8–19.6
Only physical abuse	84	7.7	7.7	6.1–9.6
Both types of abuse	287	26.5	25.3	22.1–28.9
Intimate partner violence				
No violence	383	35.3	35.8	32.2–39.5
Only psychological violence	357	32.9	33.1	29.9–36.6
Only physical violence	30	2.8	2.8	2.0–4.0
Both types of violence	314	29.0	28.3	25.0–31.8

*Weighted according to complex sampling of the National Survey on Social Relationships (ENARES) 2015. Others: son, daughter, father, mother, all members of the family or others who do not belong to the household.

were more than five times more likely to suffer from both types of violence (psychological and physical) exerted by their partner in adulthood (RRR 5.72; 95%CI 3.71–8.83), adjusted for marital status, education, number of children, abortion, and economic dependence on the household (Table 3). No multicollinearity was found between the variables included in the adjusted model (VIF <10 and the maximum condition number <30).

In the interrelationships between child abuse and intimate partner violence, three important flows can be seen: a large flow between women who were not abused in childhood and those who were not victims of intimate partner violence in adulthood. Another large flow between women who suffered from both types of abuse in childhood and those who were victims of both types of intimate partner violence in adulthood. Finally, a small flow between women who suffered physical child abuse and those who were victims of physical violence exerted by their partner in adulthood (Figure 1).

Table 2. Gross model between covariates and intimate partner violence in married or cohabiting Peruvian women over 18 years of age, 2015.

	Only psychological violence	Only physical violence	Both types of violence
	RRR (95%CI)	RRR (95%CI)	RRR (95%CI)
Age (years)	0.99 (0.98–1.00)	1.00 (0.98–1.04)	1.01 (0.99–1.01)
Marital status			
Cohabiting	1	1	1
Married	0.82 (0.61–1.11)	1.68 (0.76–3.74)	0.70 (0.49–0.98)
Origin			
Urban	1	1	1
Rural	1.01 (0.69–1.47)	0.88 (0.37–2.07)	1.23 (0.85–1.79)
Education			
No studies	0.67 (0.36–1.25)	1.72 (0.49–5.98)	2.19 (1.11–4.34)
Elementary/Middle school	1.25 (0.79–1.97)	1.38 (0.49–3.91)	3.12 (1.80–5.40)
High school	1.19 (0.77–1.84)	0.53 (0.17–1.61)	1.91 (1.13–3.22)
Higher education	1	1	1
Number of children			
Childless	1	1	1
1–2	1.64 (0.76–3.55)	0.92 (0.11–8.08)	2.25 (0.84–6.02)
3–4	1.72 (0.74–4.01)	0.97 (0.11–8.61)	2.67 (0.95–7.46)
More than 5	1.73 (0.74–4.04)	2.64 (0.30–23.3)	2.67 (1.63–13.4)
Abortion	1.27 (0.89–1.83)	1.46 (0.58–3.67)	2.66 (1.85–3.82)
Recent work	1.16 (0.85–1.57)	0.81 (0.38–1.75)	1.79 (1.29–2.48)
Disability	1.06 (4.83–2.32)	2.31 (0.37–14.3)	0.22 (0.02–1.87)
Dependence (women)	0.91 (0.38–2.16)	1.48 (0.28–7.72)	2.79 (1.38–5.66)
Health insurance	0.79 (0.52–1.18)	1.00 (0.36–2.74)	0.82 (0.54–1.23)
Child abuse			
No abuse	1	1	1
Psychological abuse	1.43 (0.95–2.15)	1.85 (0.64–5.32)	2.73 (1.65–4.52)
Physical abuse	1.85 (1.07–3.22)	4.63 (1.47–14.64)	3.27 (1.67–6.41)
Both types	1.97 (1.27–3.04)	1.33 (0.43–4.07)	6.78 (4.40–10.44)

RRR: relative risk reduction.

Table 3. Adjusted model between child abuse and partner violence in married or cohabiting Peruvian women over 18 years of age, 2015.

	Only psychological violence	Only physical violence	Both types of violence
	RRR (95%CI)	RRR (95%CI)	RRR (95%CI)
Child abuse			
No abuse	1	1	1
Only psychological abuse	1.40 (0.92–2.11)	1.79 (0.60–5.30)	2.45 (1.47–4.08)
Only physical abuse	1.95 (1.09–3.05)	4.45 (1.36–14.61)	3.17 (1.60–6.30)
Both types of abuse	1.93 (1.25–2.97)	1.20 (0.42–3.44)	5.72 (3.71–8.83)

Final model adjusted for those variables that were associated in the gross model: marital status, education, number of children, abortion, and economic dependence on the home. RRR: relative risk ratio.



Figure 1. Sankey diagram showing the interrelationships between child abuse and partner violence in adulthood in married or cohabiting Peruvian women over 18 years of age, 2015.

DISCUSSION

The findings of the study show that abuse in childhood influences the acceptability of violence exerted by the partner in adulthood, regardless of other variables such as education, number of children, history of abortion, and economic dependence on the home, which according to other studies are factors that condition intimate partner violence.

CHILD ABUSE

49.6% of the women admitted having suffered some type of abuse in childhood. This figure is high if we compare it with a study in the United States, where children themselves reported up to a 10% prevalence of abuse²³ or in the United Kingdom, where almost 20% of young people aged 11-17 years old experienced abuse and neglect before becoming adults²⁴. However, if studies in Latin America are considered, these prevalences increase considerably. A systematic review that included studies carried out in Latin America and the Caribbean found a global prevalence of psychological abuse of 60% and a global prevalence of physical abuse of 30%²⁵, results more in line with the findings of the present study

PARTNER ABUSE

64.2% of the women admitted having been a victim of violence exerted by their partner, either psychological, physical or both. These results are similar to the high prevalences (greater than 50%) reported in studies conducted in India^{26,27}, Thailand²⁸, and Pakistan²⁹. However, in a systematic review of 24 countries in the Americas, the proportion of women who reported physical or sexual violence ranged between 14 and 17% in Brazil, Panama, and Uruguay and more than half (58.5%) in Bolivia. This review found a 30.6% prevalence of physical violence in Peru, a figure in accordance with the findings of the present study³⁰.

CHILD ABUSE ASSOCIATED WITH SUFFERING INTIMATE PARTNER VIOLENCE IN ADULTHOOD

Women who suffered psychological and physical abuse in childhood were more than five times as likely to be victims of intimate partner violence in adulthood. Numerous studies endorse this finding, although with a global analysis, without considering the interaction of the different types of violence exerted by the partner. For example, in a study conducted on a national sample in the United States, it was found that women who had suffered physical abuse in childhood were up to three times as likely to suffer from intimate partner violence⁹. Likewise, in a cohort of 3,322 Australian women, 1.76 and 2.76 times the probability of suffering victimization by physical violence was reported in those who had experienced physical and emotional abuse in childhood, respectively³¹. However, these data are not homogeneous and vary according to the form of measurement, both of child abuse and violence exerted by the partner, proof of this is that in a recent meta-analysis it is recognized as an important limitation that few studies have distinguished the unique effects of a specific type of child abuse on the various types of violence exerted by the partner³², something that this study does foresee.

One possible explanation for these results is that women with experiences of child abuse accept these violent behaviors as “normal and acceptable”. Therefore, instead of developing

coping to resolve conflicts, these people tend to produce attitudes of tolerance to violence exerted by their partners³². The intergenerational transmission of violence, also called the “cycle of violence”³³, explains how children who observe or suffer from aggressive behaviors learn to tolerate and normalize victimization by violence in adulthood³⁴; that is, abused children are more likely to become abusive or perpetrating parents³⁵, or victims of marital violence³⁶; the latter, especially in women³⁷.

The interrelationships found lead us to suppose that the situations of occurrence or not of child abuse, condition considerable proportions of occurrence or not of violence exerted by the partner. In other words, events that occurred in childhood, whether positive or negative, have a significant impact on adulthood. Likewise, the low occurrence of abuse and physical violence in women reaffirms the hypothesis that physical violence does not occur in isolation, but in conjunction with other types of violence. These findings, although preliminary, motivate us to rethink the measurement of intimate partner violence in future studies.

In Peru there is Law 30364 “Law to prevent, punish, and eradicate violence against women and members of the family group” promulgated on January 1st, 2017, which establishes sanctions and re-education mechanisms for aggressors, and protection measures and care for victims³⁸. In addition, there is the Ministry of Women and Vulnerable Populations, an entity in charge of promoting, executing, and supervising public policies in favor of women and vulnerable people, in order to guarantee their rights and a life free of violence³⁹. However, high numbers of femicides are still reported, reaching 165 cases in 2019, the highest number since 2009⁴⁰, which describes a problem that is still far from being solved.

Studies that analyze secondary data to answer a research question have limitations that must be recognized, in order not to draw erroneous conclusions. One of the most important limitations is the lack of variables in the analyzed base, which could explain the event of interest; likewise, on some occasions, sample size is not sufficient to demonstrate the proposed association. In this sense, this research has the following limitations: First, the self-report of child abuse and violence exerted by the partner is conditioned by biases of social desirability and memory, which could under- or overestimate the real results of these variables. Second, the measurement of child abuse and victimization by intimate partner violence based on non-standardized questions or based on validated instruments could limit the comparability of the results. Third, other types of child abuse such as sexual abuse, neglect, or exposure to violence were not measured because they were not available in the analyzed database. Fourth, other types of intimate partner violence such as sexual or economic violence were not included, which could have provided a more complete measurement of this variable. Fifth, economic income, which is a variable that could empower women and that in turn would influence intimate partner violence⁴¹, was not available in the analyzed base. Sixth, as it is a cross-sectional study, causality cannot be established between the main variables. As a strength, it should be mentioned that the results of the present study are representative of the population of Peruvian women older than 18 years of age; this remarkable external validity allows comparability with population studies that address the same research variables.

In conclusion, married or cohabiting women in Peru who were victims of psychological and physical abuse in childhood have up to five times the probability of suffering psychological and physical violence exerted by their partner in adulthood. This study provides relevant and novel information on a public health problem in Peru. It is recommended to continue with this line of research including other variables of child abuse such as exposure, neglect, and sexual abuse. Likewise, it is important that future studies foresee the interrelationships of other types of intimate partner violence such as sexual or economic violence. Finally, these findings raise the need for strategies or policies aimed at preventing child abuse, since, as has been shown not only with this research, but also with the existing evidence, that this factor primarily influences the perpetration and victimization of violence as a couple.

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