

**DETERMINANTS OF SPOUSAL VIOLENCE AND
ITS EFFECT ON UTILIZATION OF MATERNAL
AND CHILD HEALTH SERVICES AMONG EVER-
MARRIED WOMEN AGE 15-49 IN MYANMAR**

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ABSTRACT

Spousal violence is any abuse or violent action that occur between two individuals in a close relationship like marriage and has many forms including physical aggression or assault, sexual and emotional abuse, controlling or domineering. Spousal violence has become public health concern in both developed and developing nations, mainly in Asian and African regions. Around the world and in local South Asian countries, domestic or spousal violence during pregnancy become increasing which may be due to many causal factors. Screening of violence during antenatal visit can make window of opportunity to detect spousal violence. Main objective of this study was to assess the determinants of spousal violence and its effect on utilization of maternal and child health services among ever-married women age 15-49 in Myanmar. A total of 3,059 ever-married women were included to access for spousal violence domain and then 1,693 women are excluded from sample population and last, 1,366 women were included to access for effect of spousal violence on utilization of MCH services. About one in five ever-married women were experiencing spousal violence and it was more prone among poor and rural population. Major determinants of spousal violence were husband's alcohol consumption, number of marital control behaviors and number of decision in which women participate. After adjusting significant covariates of determinants of spousal violence, the relative risk for having no antenatal visits compared to having 4 and above antenatal visits among women experience spousal violence was 55% (RRR 1.55, 95%CI- 1.0, 2.3) i.e. higher compared to women not experienced spousal violence but not significant for women with 1-3 antenatal visits (RRR 1.0, 95%CI- 0.7, 1.5) compared to 4 and above antenatal visits. But, there was no significant association between spousal violence and institutional delivery among ever-married women (aOR 0.7, 95%CI- 0.5, 1.0). Husband's alcohol consumption and women empowerment indicators significantly influenced spousal violence, which intended to low antenatal care utilization. Encouraging women empowerment, developing protective mechanism collaboration with community for women of husband who drink alcohol and restricting easy availability of alcohol should be done among poor population in rural areas which are vulnerable population of experiencing spousal

violence. Further research using mix methods should be carried among rural poor population to identify root cause of spousal violence.