

Consequences of the Exposure to Abuse in the Family of Origin Among Victims of Intimate Partner Violence in Nicaragua

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Intimate partner violence (IPV) has serious consequences for women, and their vulnerability is increased if their experiences related to abuse occurred at an early age. This study examines the risk of experiencing stressful life events (SLE) during the lives of Nicaraguan victims of IPV in situations of extreme poverty according to their exposure to episodes of violence in their family of origin. In the study participated 136 women victims of IPV living in the marginal areas of the city of León (Nicaragua). They were contacted through the Nicaraguan Commissariat for Women (CW). The results indicate an increased risk of experiencing SLE in the lives of those who suffered abuse in their family of origin and/or witnessed abuse of their mother. Identifying abuse suffered in childhood is a priority because of its consequences, as growing up in environments that tolerate violence may lead to a chronification of subsequent abuse.

Public Policy Relevance Statement

There are few studies conducted in Nicaragua on child victimization that show the transmission of violence in the family context to the subsequent perpetration of violence in relationships. The lack of resources to help victims makes violence part of family dynamics with serious implications for the health of women and children. Intimate partner violence has serious consequences for women; however, exposure to violence in the family of origin not only influences the subsequent victimization, but also has serious problems for the health of the victims. In addition, vulnerability increases in contexts of extreme poverty.

Intimate Partner Violence (IPV) and Child Maltreatment (CM) are social and public health problems with a high level of prevalence worldwide (Gracia, López-Quiñez, Marco, & Lila, 2018; Huecker & Smock, 2018). They are two forms of family violence (a broader concept which frequently includes these types of domestic violence) with shared characteristics and risk factors (Daro, Edleson, & Pinderhughes, 2004; Gracia, Rodríguez, Martín-Fernández, & Lila, 2017). Each of these types of family violence creates other interrelated forms of violence, and the cycle of abuse continues from childhood into adult relationships (Huecker & Smock, 2018). In addition, the patriarchal family model, based on male hegemony, leads to the development of power dynamics among its members involving the use of violence (Buvinic, Morrison, & Shifter, 1999; Morrison & Orlando, 1999). This social organization provides legitimacy for the head of the family's right to control his wife and

children, demand their obedience and use violence against any threat to the male hegemony (Ruggles, 2015).

In particular, IPV occurs in all cultures and countries in the world, regardless of their economic context or level of development (Carlshamre, 2005; Heise & García-Moreno, 2002). It occurs more often in private spaces, but it is a public problem that affects all societies (Winstok & Eisikovits, 2011). According to the World Health Organization (WHO, 2017), one third of women worldwide suffer from IPV. However, this incidence may be two or three times higher in less developed countries (Andrés-Pueyo, López, & Álvarez, 2008). In Latin America, research on the prevalence of IPV has presented inconsistent data because of the diversity of the methodology used and the plurality of definitions (Cuevas, Sabina, & Milloschi, 2012). Nevertheless, estimates suggest that between 19.5% and 70% of women have suffered from violence at some point in their life (Denham et al., 2007; Hass, Dutton, & Orloff, 2000; Heise & García-Moreno, 2002; Murdaugh, Hunt, Sowell, & Santana, 2004; Raj, Silverman, & Amaro, 2004). Other authors have found that two out of three victims of abuse in childhood are victims of this type of abuse as adults (Classen, Palesh, & Aggarwal, 2005).

The data for the prevalence of CM worldwide are alarming, as more than 50% of children experienced some form of physical,

This article was published Online First December 27, 2018.

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sexual or psychological violence or neglect in 2016 (Hillis, Mercy, Amobi, & Kress, 2016). CM has become a priority on political agendas, and reducing violence in childhood is one of the Sustainable Development Goals (Devries et al., 2018). It has been estimated that around six million children in Latin America and the Caribbean have suffered some form of severe violence, and approximately 80,000 children have died due to violence in the family environment (Buvinic et al., 1999), although the statistics available on child abuse are incomplete (Buvinic, Morrison, & Orlando, 2005). Some authors report that 40% of women in Latin America are victims of physical abuse in childhood (Briere & Elliott, 2003). In addition to the above, there appears to be a correlation between violence and high rates of poverty in these countries (Arriagada, 2005; Ellsberg, Peña, Herrera, Liljestrand, & Winkvist, 1999).

Meanwhile, IPV has many negative consequences for women and for children exposed to abuse (Evans, Davies, & Dilillo, 2008; Fusco & Fantuzzo, 2009). Some research suggests that there is a relationship between victimization in childhood and victimisation in adulthood (Arata, 2002; Martínez-Torteya, Bogat, von Eye, & Levendosky, 2009). Witnessing IPV between parents could be a risk factor for suffering from it in the next generation (Foshee et al., 2011), since it would encourage tolerance of violence due to the learning process that takes place during childhood (Expósito, 2011). The intergenerational transmission of violence theory refers to the influence of the family environment on children who after being exposed to violence, learn to use it or tolerate it as a consequence of their social learning, and adopt beliefs in which violence is devoid of its aggressive character and is normalized in everyday relationships (Black, Sussman, & Unger, 2010; Franklin & Kercher, 2012; Gámez-Guádxix & Calvete, 2012; Martínez, Robles, Utria, & Amar, 2014; Roberts, Gilman, Fitzmaurice, Decker, & Koenen, 2010). Exposure to violence between parents and experience of child abuse therefore appears to be related to the subsequent perpetration of and victimisation from IPV (Capaldi, Knoble, Shortt, & Kim, 2012). However, in the opinion of Machisa, Christofides, and Jewkes (2016), adverse childhood experiences and IPV perpetrated by men need to be explained using a combination of theories of trauma, feminism and the intergenerational transmission of family violence.

Various studies appear to suggest that exposure to violence in childhood leads to behavioral and emotional problems (Alcántara, López-Soler, Castro, & López, 2013; Rivett, Howarth, & Harold, 2006; Sternberg, Baradaran, Abbott, Lamb, & Guterman, 2006). Sternberg et al. (2006) found that minors exposed to abuse are more likely to have emotional and behavioral problems than minors who are not exposed to this kind of violence (depression, personality disorders and substance abuse) (Abbey, Zawacki, Buck, Clinton, & MacAuslan, 2004; Champion et al., 2004; Dobash & Dobash, 2004; Godbout, Lussier, & Sabourin, 2006; Pickering, Farmer, & McGuffin, 2004; Roy & Janal, 2006). That may be associated with posttraumatic stress disorder and an attempt to alleviate the pain associated with the trauma by medication (Amor, Bohórquez, & Echeburúa, 2006; Brady, Killeen, Brewerton, & Lucerini, 2000; McFarlane, 2000). In the United States, six out of 10 people in the general population have been exposed to adverse childhood experiences (neglect, physical/psychological abuse, sexual abuse and IPV), leading to serious health problems for those who experienced them (Brown, Perera, Masho, Mezuk, & Cohen,

2015). Reiser, McMillan, Wright, and Asmundson (2014) argues that adverse childhood experiences such as child abuse and dysfunction in the home affect health in adulthood, and as such it is necessary to provide a broader scientific basis than that reported in the existing literature.

Thus, family violence leads to a number of negative consequences, since in addition to physical injury, it has a major psychological impact and is a risk factor for long-term health. Taking into account that child maltreatment and dysfunction home environments have an impact during adulthood, a broader scientific basis than that found in the literature is required (Reiser et al., 2014). However, the victim's vulnerability increases when they are living in poverty in countries with low levels of development, where there is a lack of support mechanisms that can provide them with assistance (Haarr, 2010). In the opinion of sources of Commissariat for Women (CW) in León (Nicaragua), the use of violence seems to be part of the values and beliefs that govern family dynamics. As shown in Table 1, where the complaints that were registered from 2013 to June 2015 appear, most aggressors have a kinship relationship with the victims. On the other hand, the same institution has reported that violence occurs to a greater extent toward women over the age of 18, however, more than 25% of the complaints were filed for violence against children under 18 years of age.

This article examines the consequence of abuse in childhood among women victims of IPV living in a situation of extreme poverty who were exposed to violence in their family of origin (witnessing abuse of their mother, suffering from physical abuse before the age of 18 years old, and suffering from sexual abuse before the age of 18 years old). The use of violence appears to be part of the values that are guide family dynamics. As such, in Nicaragua there seems to be an acceptance of the use of violence against women, children and adolescents (Tinoco et al., 2015). This problem is aggravated by the situation of extreme poverty that is passed down from generation to generation (Vázquez & Panadero, 2016).

Method

Participants

The participants in the research were 136 women in living poverty, who were victims of IPV in León (Nicaragua). Over half of the city's approximately 185,000 inhabitants live below the poverty line, with significant groups of people living in extreme poverty (Vázquez, 2016).

This group is difficult to access, and lives subject to a particularly severe range of stressful situations (Vázquez, Panadero, & Rivas, 2015). The criterion for inclusion in the sample was being a woman over 18 years of age, a victim of IPV and being in a situation of poverty. These criteria were established taking into account household income levels and the geographical location of the home.

The interviewees, whose mean age was 32 years old, had on average two children. Just over half were married or in a stable union (56%). The most common level of education is basic. As regards the situation of abuse, the interviewees began to live with their abuser at an average age of 20 years old and had been living with him—or had lived with him—for an average of 9 years.

Table 1. *Relationship Between Aggressors and Victims*

	Total		2013		2014		2015	
	%	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%	<i>n</i>
Couple	29.4	1,691	33.1	703	27.7	663	25.8	325
Ex couple	20.0	1,155	19.7	418	21.0	492	19.3	245
Father	13.9	800	8.8	187	15.1	364	19.7	249
Sons	5.0	291	4.6	97	5.2	124	5.6	70
Grandparents	.7	34	1.1	23	.5	11	.0	0
Uncles	2.5	136	1.7	36	3.0	71	2.3	29
Brothers	5.8	335	7.0	149	5.3	128	4.6	58
Cousins	2.4	132	1.6	35	3.0	71	2.0	26
Brothers in law	1.8	100	1.8	39	1.8	45	1.3	16
Boyfriends	2.0	115	1.8	38	2.2	53	1.9	24
Friends	.8	43	.5	11	.7	17	1.2	15
Neighbors	3.9	227	4.0	86	3.5	83	4.6	58
Unknown	.6	29	.7	14	.6	14	.1	1
Step parents	1.7	92	1.4	30	1.6	40	1.8	22
Others	10.5	594	12.2	258	8.9	213	9.8	123
Total			100	2,124	100	2,389	100	1,261

Forty-two percent were living with their abuser when the interview took place. In addition, all the interviewees were victims of psychological and physical violence, and 67% had suffered from sexual violence. The abuse occurred on a daily basis for one in four interviewees, and several times a week in 45% of cases. As for stressful life events (SLE) experienced before the age of 18 years old related to abuse in the family of origin, about half had witnessed violence toward their mother and suffered from physical abuse for the first time at an average of 4 years and 10 years of age, respectively. 25% suffered from sexual abuse at an average age of 13 years old (see Table 2).

Instruments

For the study, an abridged version of the List of Stressful Vital Events for socially excluded groups (L-SVE) was used (Vázquez & Panadero, 2016), an instrument developed from the review of existing instruments (Brugha & Cragg, 1990) and used in previous research with various groups in social exclusion (Guillén, Panadero, Rivas, & Vázquez, 2015; Vázquez et al., 2015). The instrument collects information on 24 possible stressful life events suffered by the interviewees. These stressors included items related to exposure to violence in the family of origin, such as witnessing violence and/or having suffered from physical and sexual abuse before the age of 18, and adverse childhood experiences that the participants experienced to varying degrees. The instrument also includes a variety of stressful life events suffered throughout life. In the present study, Cronbach's alpha stands at 0.75, which indicates an acceptable level of internal consistency.

Procedure

Access to the interviewees was possible thanks to the support provided by various associations and institutions working with women living in poverty in León, including the CW of the Nicaraguan National Police. The associations and the CW took the necessary measures to guarantee the safety of the victims.

The information was obtained using a heteroapplied structured interview that was applied by two interviewers with previous experience in this type of study, and lasted between 45 and 80 min. The interviews began by explaining the objectives of the research, and the participants were asked for their informed consent. 51.6% of the women were interviewed in their homes, 38.9% in the offices of the CW in León, and 9.5% in the offices of various associations.

Data Analysis

The database was developed and processed with SPSS (Version 22.0 for Windows, IBM, Armonk, NY). The variables were defined as "having witnessed abuse of her mother," "having suffered physical abuse before age 18," and "having been sexually abused before age 18." The participants were assigned a score of 1 if they had suffered from the above events, and 0 if they had not. These were compared to various stressful life events experienced by the interviewees using the chi-square analyses. In order for a result to be considered statistically significant, a probability of committing a Type I error of $p \leq .05$ was adopted. Cramer's V statistic was applied to analyze the effect of the association between the variables ($.10 \leq V \leq .29$, weak ratio; $.30 \leq V \leq .49$, moderate ratio), and the risk was examined using the odds ratio (OR) with 95% confidence intervals (CI). The minimum sample size required for the main analyses was calculated using the G*Power software package (Version 3.0 for Windows). For a size with effect .5, a significance of .005 and a power of .95, the sample size required for the analyses would be 80 participants. The sample therefore exceeded the necessary size.

Results

As shown in Table 3, concerning the SLE experienced during their lives, about half of the interviewees drank excessively and one in 10 consumed drugs in excess. More than 35% had been abused by someone other than their partner and 16% had been

Table 2. *Sociodemographic Characteristics of the Sample. Cohabitation, Abuse, and SLE Experienced Before the Age of 18 in the Family of Origin Among Women Living in Poverty Who are Victims of IPV in León (Nicaragua)*

	<i>n</i>	%	Mean (<i>SD</i>)
Mean Age (<i>SD</i>)			31.67 years (8.921)
Number of children (DT)			2.23 (1.655)
Marital status			
Single	33	24.3	
Married	31	22.8	
De facto union	46	33.8	
Separated	22	16.2	
Divorced	4	2.9	
Level of education			
No education	4	2.9	
Primary education	93	68.4	
Medium level of education	24	17.7	
Higher education	15	11.1	
Age at which she began to live with the abuser			19.91 years (4.929)
Length of time spent living with the abuser			9.16 years (6.789)
Lives with her abuser	57	41.9	
Duration of the abuse			6.25 years (5.481)
Type of abuse			
Psychological	136	100	
Physical	136	100	
Sexual	91	66.9	
Frequency of the abuse			
Daily	32	24.2	
2–3 times/week	59	44.7	
Fortnightly	30	22.7	
Once a month	11	8.3	
IPV (Before 18 years old)			
Witnessed violence against her mother	63	46.3	4.2 years ¹ (5.85)
Suffered from physical abuse	63	46.3	10 years ¹ (4.766)
Suffered from sexual abuse	34	25	12.92 years ¹ (2.965)

Note. IPV = Intimate partner violence; SLE = stressful life events.

¹ Age at which they suffered from SLE (before 18 years old) for the first time in their life.

sexually assaulted. Lastly, in terms of crimes experienced, more than 46% suffered from nonpartner domestic violence, 35% suffered injuries as a result of the abuse, one in four interviewees had been sexually assaulted and one in 10 had been the victim of a homicide attempt.

Table 4 shows statistically significant differences between the participants who had witnessed gender-based violence against their mother and those who had not. Higher percentages were found for excessive drinking, nonpartner physical assault, having been the victim of sex offenses and nonpartner domestic violence

Table 3. *Stressful Life Events Suffered During Their Life by Women Victims of IPV Living in Poverty in León (Nicaragua)*

	<i>n</i>	%	<i>M</i> (<i>SD</i>)
Drunk excessively	61	44.9	21.8 years ¹ (6.363)
Excessive drug consumption	14	10.3	22.3 years ¹ (8.098)
Physical attacks by people other than her partner (after 18 years old)	48	35.3	24.9 years ¹ (9.528)
Sexual assaulted (after 18 years of age)	22	16.2	24.2 years ¹ (6.828)
Non-partner domestic violence	63	46.3	
Injuries	48	35.3	
Sexual offences	33	24.3	
Attempted murder/homicide	14	10.3	

Note. IPV = Intimate partner violence.

¹ Age at which they suffered from SLE for the first time in their lives.

Table 4. Relationship Between Having Witnessed Abuse of Their Mother and Suffering From Stressful Life Events Throughout Their Life Among Women Victims of IPV Living in Poverty in León (Nicaragua)

	Has she witnessed abuse?		<i>p</i>	Cv	Odds Ratio	95% CI
	No (<i>n</i> = 73)	Yes (<i>n</i> = 63)				
Drunk excessively	44.8	44.9	.986	.002	1.006	[-.519, 1.978]
Excessive drug consumption	1.5	18.8	.001	.285	15.321	[1.943, 120.8]
Physical attacks by people other than her partner (after 18 years old)	23.9	46.4	.006	.235	2.757	[1.323, 5.745]
Sexual assaulted by people other than her partner (after 18 years of age)	16.4	15.9	.94	.006	.966	[-.388, 2.405]
Non-partner domestic violence	31.3	60.9	.001	.296	3.407	[1.68, 6.911]
Injuries	31.3	39.1	.342	.081	1.408	[-.694, 2.856]
Sexual offences	14.9	33.3	.012	.215	2.85	[1.233, 6.588]
Attempted murder/homicide	13.4	7.2	.235	.102	.503	[-.159, 1.589]

Note. IPV = Intimate partner violence.

among those who had witnessed abuse of their mother. The odds ratio indicates that nonpartner domestic violence is significantly higher among those who had witnessed abuse of their mother ($OR = 3.407$; 95% CI [1.68–6.911]).

Table 5 shows that a higher percentage of the interviewees who suffered physical abuse before the age of 18 years consumed drugs in excess, suffered physical assault by people other than their partner, had been victims of injuries and sexual offenses, had been victims of sexual assaults after 18 years old, and been victims of nonpartner domestic violence. The odds ratio shows that the risk of suffering from these stressful life events was higher among participants who had been victims of physical abuse before age 18, especially for sexual offenses ($OR = 5.345$; 95% CI [2.193–13.031]) and nonpartner domestic violence ($OR = 6.582$; 95% CI [3.108–13.936]). There is also a relationship with a moderate effect between having suffered from physical abuse before the age of 18 years and nonpartner domestic violence.

Finally, in Table 6, higher percentages were found among those interviewed who suffered from sexual abuse before the age of 18 years for excessive drinking, suffering from physical assault from people other than their partner, injuries, sexual assault after 18 years old, sexual offenses and nonpartner domestic violence. The odds ratio shows that the risk is significantly higher among the interviewees who had suffered from sexual abuse at an early age, especially in relation to being injured ($OR = 9.541$; 95% CI [3.909–23.286]) and suffering physical attacks from persons other

than their partner ($OR = 7.8$; 95% CI [3.274–18.582]). Moderate relationships are observed between suffering from sexual abuse before the age of 18, and suffering from injuries and physical attacks by people other than their partner.

Discussion

As has been pointed out by various authors (Evans et al., 2008; Fusco & Fantuzzo, 2009), the information obtained in this study reveals relevant data and provides a better understanding of the consequences that seem to arise from exposure to violence in the family of origin among women suffering from IPV in Central America. In addition, it could facilitate the development of culturally appropriate prevention and support strategies, while promoting legislative action to protect women, children, and adolescents in environments in which there seems to be a relationship between violence and poverty (Arriagada, 2005; Buvinic et al., 1999; Ellsberg et al., 1999).

Nearly half of the victims of IPV interviewed reported having witnessed violence against their mother and having suffered from physical abuse in childhood. Suffering from experiences of this type may have led to other SLE that they subsequently experienced. The data reveal the existence of a relationship between childhood victimisation and suffering from abuse in adulthood, as pointed out by other authors (Arata, 2002; Capaldi et al., 2012; Foshee et al., 2011). This could be a consequence of the use of

Table 5. Relationship Between Having Suffered From Physical Abuse Before the Age of 18 and Suffering From Stressful Life Events Throughout Life Among Women Victims of IPV Living in Poverty in León (Nicaragua)

	Was she physically abused?		<i>p</i>	Cv	Odds Ratio	95% CI
	No (<i>n</i> = 73)	Yes (<i>n</i> = 63)				
Drunk excessively	31.5	60.3	.001	.289	3.304	[1.631, 6.695]
Excessive drug consumption	2.7	19	.002	.268	8.353	[1.791, 38.95]
Physical attacks by people other than her partner (after 18 years old)	21.9	50.8	.000	.301	3.677	[1.75, 7.728]
Sexual assaulted by people other than her partner (after 18 years of age)	9.6	23.8	.025	.193	2.946	[1.116, 7.781]
Non-partner domestic violence	26	69.8	.000	.438	6.582	[3.108, 13.936]
Injuries	20.5	52.4	.000	.332	4.253	[2.003, 9.030]
Sexual offences	11	39.7	.000	.334	5.345	[2.193, 13.031]
Attempted murder/homicide	9.6	11.1	.771	.025	1.179	[-.39, 3.564]

Note. IPV = Intimate partner violence.

Table 6. Relationship Between Having Suffered From Sexual Abuse Before the Age of 18 and Suffering From Stressful Life Events Throughout Life Among Women Victims of IPV Living in Poverty in León (Nicaragua)

	Was she sexually abused?		<i>p</i>	Vc	Odds Ratio	95% CI
	No (<i>n</i> = 102)	Yes (<i>n</i> = 34)				
Drunk excessively	35.3	73.5	.000	.333	5.093	[2.148, 12.08]
Excessive drug consumption	3.9	29.4	.000	.363	10.208	[2.947, 35.36]
Physical attacks by people other than her partner (after 18 years old)	23.5	70.6	.000	.426	7.8	[3.274, 18.58]
Sexual assaulted by people other than her partner (after 18 years of age)	11.8	29.4	.016	.208	3.125	[1.206, 8.1]
Non-partner domestic violence	35.3	79.4	.000	.383	7.071	[2.804, 17.84]
Injuries	22.5	73.5	.000	.462	9.541	[3.909, 23.29]
Sexual offences	14.7	52.9	.000	.386	6.525	[2.739, 15.55]
Attempted murder/homicide	9.8	11.8	.745	.028	1.227	[-.358, 4.19]

Note. IPV = Intimate partner violence.

violence as a strategy for resolving conflicts, the general climate of abuse in some societies (Tinoco et al., 2015) and behaviors that legitimize IPV toward women, which are based on sexist beliefs and deep-rooted patriarchal structures (Buvinic et al., 1999; Heise & García-Moreno, 2002; Ruggles, 2015). Exposure to violent episodes at an early age may have had a number of negative consequences that affected the lives of the victims (Classen et al., 2005). Furthermore, the environment may have influenced the normalization and tolerance of violence due to the social learning that takes place in childhood (Black et al., 2010; Franklin & Kercher, 2012; Gámez-Guádix & Calvete, 2012; Martínez et al., 2014; Roberts et al., 2010), within what could be considered the theory of the intergenerational transmission of violence (Black et al., 2010; Franklin & Kercher, 2012; Gámez-Guádix & Calvete, 2012; Martínez et al., 2014; Roberts, Gilman, Fitzmaurice, Decker, & Koenen, 2010).

Meanwhile, according to the findings of various authors (Alcántara et al., 2013; Rivett et al., 2006; Sternberg et al., 2006), exposure to violence may have triggered problems in the victims' behavior, leading to high rates of substance abuse, that may have been the result of the consequences that violence appears to have (Pickering et al., 2004; Roy & Janal, 2006; Sternberg et al., 2006). The prevalence of substance use found in the sample is higher than that reported in other studies of victims of IPV, which estimate that alcohol consumption does not exceed 20% (Amor et al., 2006).

Differences were found between the participants who had experiences related to violence at an early age and alcohol and drug use, as has been reported elsewhere (Abbey et al., 2004; Dobash & Dobash, 2004). Furthermore, the probability of substance use found among the participants is high. The data obtained are therefore consistent with other studies, which found that exposure to and suffering from violence leads to emotional and behavioral problems among the victims (Gracia et al., 2018; Huecker & Smock, 2018; Pickering et al., 2004; Roy & Janal, 2006; Sternberg et al., 2006), and that substance abuse may have been a coping mechanism to relieve the trauma resulting from the violence experienced (Brady et al., 2000).

Suffering from sexual abuse before the age of 18 seems to be related to subsequently suffering from more SLE. Despite the limited number of studies and the disparity of data due to methodological diversity (Cuevas et al., 2012), some studies have found that two of every three victims of sexual abuse in childhood are

victims of this type of abuse in adulthood (Classen et al., 2005). Similarly, the results show that sexual abuse could lead to an increased risk of suffering from sexual offenses, physical attacks from people other than their partner in the familiar context and suffering injuries. The study data therefore seem to confirm the relationship between victimisation in childhood and victimisation in adulthood (Arata, 2002; Capaldi et al., 2012; Foshee et al., 2011; Martínez-Torteya et al., 2009).

In conclusion, abuse must be identified during childhood, because of its short- and long-term consequences for the victims. This is particularly important in societies like Latin America, where rates of abuse of women and girls can reach 70% (Denham et al., 2007; Hass et al., 2000; Murdaugh et al., 2004; Raj et al., 2004). This shows the level of impunity for the use of violence, which could encourage the reproduction of violent patterns in intrafamily dynamics. Given the limited number of studies of samples in environments of extreme poverty, it is necessary to establish new lines of research to determine the extent of multiple experiences of victimisation in societies like Nicaragua, where there is neither an extensive support network nor the resources to deal with IPV. Making their situation visible could therefore lead to structural changes that could minimize their vulnerability.

Although the scientific literature has studied exposure to violence, it is necessary to provide a broader scientific basis than the existing one (Reiser et al., 2014), since the studies undertaken in this region have been limited (Buvinic et al., 2005) and the findings could be underestimates of a situation in which human rights are being violated. Raising awareness of the circumstances in this specific context, which is common in many countries in Central America, is therefore an issue that can be broadened to provide international organizations with knowledge to help eradicate violence. This is particularly relevant considering that violence against minors and women are a public health problem worldwide (Winstok & Eisikovits, 2011).

Despite the fact that the eradication of CM and IPV is a priority on most political agendas (Devries et al., 2018), the normalization of violence, poverty and lack of resources in Nicaragua means that this problem is far from being eliminated. There have been no aid mechanisms since the abolition of the CW, the only institution specializing in providing support and treatment for survivors of family violence. Based on studies with survivors of CM and IPV, awareness-raising initiatives should therefore focus on raising

awareness of the consequences of violence for health, its possible intergenerational transmission, the support measures available, and female empowerment.

Keywords: intimate partner violence; stressful life events; intergenerational transmission; poverty; Latin America

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