

Investigating the Association Between Household Gender Dynamics, Intimate Partner Violence, Mothers' Mental Health, Child Abuse, and Child Stunting in Rwanda

Akademisk avhandling

Som för avläggande av Jean Nepo Utumatwishima medicine doktorsexamen vid Sahlgrenska akademien, Göteborgs universitet kommer att offentligen försvaras i hörsal Arvid Carlson, Medicinargatan 3, Göteborg, den 24 oktober, klockan 13.00

av JEAN NEPO UTUMATWISHIMA

Fakultetsopponent:

HELENA HILDENWALL, Docent, Karolinska Institutet, Sverige

Avhandlingen baseras på följande delarbeten

- I. *UTUMATWISHIMA JEAN NEPO, 2024, HOW DO HOUSEHOLD LIVING CONDITIONS AND GENDER-RELATED DECISION-MAKING INFLUENCE CHILD STUNTING IN RWANDA? A POPULATION-BASED STUDY. PLOS ONE, 19(3), E0290919.*
- II. *UTUMATWISHIMA JEAN NEPO, 2024, WOMEN'S EXPOSURE TO INTIMATE PARTNER VIOLENCE AND ITS ASSOCIATION WITH CHILD STUNTING: FINDINGS FROM A POPULATION-BASED STUDY IN RURAL RWANDA. GLOBAL HEALTH ACTION, 17(1).*
- III. *UTUMATWISHIMA, JEAN NEPO, 2025, POOR MENTAL HEALTH IN MOTHERS IS ASSOCIATED WITH CHILD STUNTING: FINDINGS FROM A POPULATION-BASED CROSS-SECTIONAL STUDY IN RWANDA, UNDER REVIEW AT BMJ OPEN.*
- IV. *UTUMATWISHIMA JEAN NEPO, 2025, CHILD DISCIPLINING PRACTICES AND THEIR ASSOCIATION WITH CHILD STUNTING IN RWANDA: INSIGHTS FROM A POPULATION-BASED STUDY, UNDER REVIEW AT PLOS ONE.*

**SAHLGRENKA AKADEMIN
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JEAN NEPO UTUMATWISHIMA

Avdelningen för samhällsmedicin och folkhälsa, Institutionen för medicin, Sahlgrenska akademien, Göteborgs universitet, Sverige, 2025.

Abstract

Child stunting is a major public health challenge in low- and middle-income countries. This thesis examines household and maternal factors associated with stunting in Rwanda's Northern Province, with a focus on gender dynamics, social support, intimate partner violence (IPV), child disciplining, and mothers' mental health. A cross-sectional population-based study was conducted among 601 mothers and their children aged one to 36 months, selected through simple random sampling. Data were collected using standardized questionnaires, including WHO items on IPV, the Mini International Neuropsychiatric Interview for mental health, and UNICEF MICS questions on child disciplining. Household socioeconomic status was assessed with the Multidimensional Poverty Index, and child stunting was measured using WHO anthropometric standards. Logistic regression models were applied to identify associated factors. Stunting affected 27.1% of children, with higher prevalence among boys and in those aged 25–36 months. Mothers' exposure to physical IPV before pregnancy and sexual IPV during pregnancy increased the risk of stunting in their children, as did mothers' major depressive disorder. Lack of social support, particularly absence of help during illness and lack of guidance, was also significantly associated. Children whose mothers used both physical and non-physical disciplining methods were more likely to be stunted.

The findings show that child stunting is influenced not only by nutrition but also by household dynamics, mothers' well-being, and gendered social structures. Public health programs should integrate mothers' mental health care, IPV prevention, social support, and non-violent parenting education into existing nutrition and child health strategies to achieve sustainable reductions in stunting.

Keywords: CHILD GROWTH, CHILD STUNTING, INTIMATE PARTNER VIOLENCE, MENTAL HEALTH DISORDERS, CHILD VIOLENCE, HOUSEHOLD LIVING CONDITIONS, SOCIAL SUPPORT, RWANDA

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