

Better pregnancy outcomes linked to reduction of armed conflict in Colombia

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A new study has linked a July 2015 ceasefire of conflict violence in Colombia with better pregnancy outcomes for women who conceived after the ceasefire began. Giancarlo Buitrago of Universidad Nacional de Colombia in Bogotá, Colombia, and Rodrigo Moreno-Serra of the University of York, U.K., present these findings in the open-access

journal *PLOS Medicine*.

Previous research has suggested the possibility that women living in areas with armed [violence](#) experience adverse pregnancy outcomes. However, methodological problems or inappropriate data have hampered prior investigations into these associations.

To better understand these associations, Buitrago and Moreno-Serra examined pregnancy outcome data for women who conceived before and after a ceasefire of [conflict](#) violence was declared in Colombia on July 20, 2015. The ceasefire called for a halt in violence by the guerrilla group FARC (Fuerzas Armadas Revolucionarias de Colombia), which was later followed by a final peace agreement between the government and FARC.

The analysis included data for more than 3 million women living across Colombia who were pregnant between 2013 and 2017. It found that the women were indeed exposed to fewer conflict events, on average, after the ceasefire began, and this reduction was associated with lower risks of stillbirths and perinatal mortality—death of the child before or shortly after birth.

In areas with greater numbers of FARC-related conflict violence events, stillbirths decreased by up to 9.53 deaths per 1,000 pregnancies, and [perinatal mortality](#) decreased by up to 10.69 deaths per 1,000 pregnancies. No statistically significant associations were found between miscarriages and reduced exposure to conflict violence.

These findings are in line with other evidence for the benefits of reduced exposure to conflict violence in early pregnancy, and suggest that the peace process in Colombia is contributing to better population health. The authors note that their findings also highlight the need for countries with long-running [armed conflict](#) to make special efforts to protect

[pregnant women](#).

The authors add that "the results in our paper uncover some less researched consequences of armed conflicts for health. We find that, beyond the tragic loss of life amid armed conflicts, which in Colombia is estimated to have reached over 200,000 deaths, exposure to conflict violence is also linked to worse pregnancy outcomes. Pregnancies of women exposed to more intense conflict violence in Colombia were more likely to result in a stillbirth or perinatal death, particularly if mothers were exposed to violence during the early stages of pregnancy. This has often been an undocumented, 'invisible' health penalty associated with protracted conflicts. While we still need further research to fully understand the most important biological pathways linking violence exposure to [pregnancy](#) outcomes, our study has important implications for policy. First, it suggests that the de-escalation in violence brought about by the ongoing Colombian peace process has been contributing to better health, and therefore that the peace process in the country should be protected and strengthened. Second, it indicates the high relevance of devising focused health policies that can protect pregnant women in contexts of protracted violence, as these [women](#) represent a particularly vulnerable group in those settings."

More information: Giancarlo Buitrago et al, Conflict violence reduction and pregnancy outcomes: A regression discontinuity design in Colombia, *PLOS Medicine* (2021). [DOI: 10.1371/journal.pmed.1003684](https://doi.org/10.1371/journal.pmed.1003684)

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