Intimate partner violence (IPV) is experienced by 1 in 4 women living in the United States, and this violence is most likely to occur in women’s early childbearing years. IPV in pregnancy has well-documented negative effects on labor and delivery outcomes and morbidity, but few studies have considered effects of IPV in pregnancy using a biopsychosocial framework, limiting our understanding of the mechanisms contributing to the intergenerational transmission of risk. This presentation will integrate mixed-methods data from two on-going, longitudinal studies of low-income, pregnant women (n=101, n=55) to examine the effects of recent violence and childhood adversity on women’s biological, psychological, and social functioning during pregnancy. Preliminary data regarding the effects of women’s biopsychosocial functioning on dyadic and intergenerational processes will be presented (e.g., breastfeeding, infant adjustment). Conclusions will focus on the implications of the study for developing multi-systemic care for pregnant women exposed to violence.