**Supplementary material.**



Supplementary figure 1. Rarefaction curve analysis indicates sufficient sequences for calculating Shannon diversity indices. Alpha diversity indices were previously compared between the different groups as depicted in the figure ([1](#_ENREF_1)). Maternal faecal specimens had significantly higher alpha diversity indices compared to infant meconium specimens, while infant meconium specimens had significantly higher alpha diversities compared to infant faecal specimens collected at 4-12 and 20-28 weeks of life ([1](#_ENREF_1)).



Supplementary figure 2. Maternal lifetime exposure to IPV and *Weissella* in the infant faecal bacteria at (A) birth, (B) 4-12 weeks and at (C) 20-28 weeks. Values are presented on a log scale. IPV; intimate partner violence, *n.s.*; not significant.



Supplementary figure 3. Relationship between maternal prenatal psychological distress (SRQ-20) and abundances of infant faecal Veillonellaceae at (A) birth, (B) 4-12 weeks and at (C) 20-28 weeks. *n.s.*; not significant.



B

A

Legend:

Supplementary figure 4. Average relative abundances of genus-level faecal bacteria in 36 infants with longitudinal data collected from mothers with A) no/low lifetime exposure to intimate partner violence (IPV) (n=18) vs. B) high lifetime exposure to IPV (n=18).

Supplementary figure 5. Average relative abundances of genus-level faecal bacteria in 36 infants with longitudinal data collected from mothers with A) no/low recent intimate partner violence (IPV) (past year) exposure (n=21) vs. B) high recent IPV (past year) exposure (n=15).

A

B

Legend:

Supplementary figure 6. Average relative abundances of genus-level faecal bacteria in 36 infants with longitudinal data collected from mothers with A) no post-traumatic stress disorder (PTSD) (n=11) vs. B) PTSD (n=25).  PTSD were dichotomized according to non-exposed vs. trauma-exposed and suspected PTSD.

B

A

Legend:

Supplementary figure 7. Average relative abundances of genus-level faecal bacteria in 36 infants with longitudinal data collected from mothers with A) no symptoms of depression (BDI) (n=26) and B) symptoms of depression (n=10). A cut-off score of ≥20 was used to dichotomize participants into “probable moderate/severe clinical cases” versus “probable sub-threshold participants”

B

A

Legend:

Supplementary figure 8. Average relative abundances of genus-level faecal bacteria in 36 infants with longitudinal data collected from mothers with A) low risk for psychological distress (SRQ-20) (n=25) and B) with high risk for psychological distress (n=11). An SRQ-20 cut-off score of <8 was used to dichotomize participants into “low risk” versus “high risk”.

A

B

Legend:

Reference:

1. Claassen-Weitz S, Gardner-Lubbe S, Nicol P, Botha G, Mounaud S, Shankar J, et al. HIV-exposure, early life feeding practices and delivery mode impacts on faecal bacterial profiles in a South African birth cohort. Scientific reports. 2018;8(1):5078.