

Original Research Article

Reasons and types of domestic violence against married women: a community based cross sectional study in urban slums of Pune, India

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ABSTRACT

Background: Worldwide, domestic violence against females is common across religion, culture, socio economic class and ethnicity. Objective was to assess reasons and types of domestic violence against married women in urban slums of Pune.

Methods: A community based cross sectional study was undertaken amongst 405 married women above 18 years of age. Chi square test was used to find an association between the different demographic variables with respect to domestic violence. Univariate logistic regression was used to find the Odds ratio between the domestic violence and different risk factors.

Results: Prevalence of domestic violence was 37.28%. Commonest reasons reported for domestic violence was 'not doing household work properly' (23.47%). Duration of marriage ($p < 0.05$), total number of children ($p < 0.05$), type of family ($p < 0.05$) and alcohol consumption by husband were significantly associated with domestic violence.

Conclusions: Present study revealed that duration of marriage, total number of children, type of family and alcohol consumption by husband are the factors significantly associated with domestic violence against married women. Sessions on de-addiction and preventing the family from domestic violence arising due to it can be taken.

Keywords: Alcohol consumption, Domestic violence, Married women, Urban slum

INTRODUCTION

Domestic violence was a major contributor to the global burden of ill health with respect to female morbidity leading to depression and psychological trauma sexually transmitted diseases, injuries, murder and suicide.¹ In 1993, The World Human Rights Conference conducted in Viennain, identified gender- based violence as a violation of human rights. In the same year, United Nations declaration, defined violence against women as "any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to a woman, including threats of such acts, coercion or arbitrary deprivations of liberty, whether occurring in public or private life".² According to the WHO, worldwide the prevalence of violence ranging from 10% to 69% and almost one-third of women are

suffering from physical and sexual violence.³ In India, where family structure is patriarchal, patrilineal and patrilocal, women are particularly vulnerable to both physical and psychological violence. It is prevalent across all castes, religious groups, socioeconomic classes and regions.⁴ Reports of National Family Health Survey (NFHS-5) revealed that a burden of domestic violence as 29.3% among ever-married women in the age group of 18-49 years.⁵ The abuser controls and tortures the victim by violence. Women have long been considered as weak, exploitable and defenceless. Many young females are aware of their vulnerability and need for protection, whether physical, economic or social. She has been exploited at practically at every step of her life because of her weakness. For fear of future penalties, they are unable to make decisions, exercise their own fundamental rights, or even express their own opinions.⁶ The Sustainable

Development Goal (SDG) target 5 is to eliminate all forms of violence against women and girls. The two indicators of progress towards this are the rates of intimate partner violence (IPV) and non-partner violence.⁷ In India, Prevention of domestic violence act exists since 2005 but the problem is still persistent. Women who are less educated, young, nonworking women, lower household income, alcoholic partner and belonging to lower caste, are at more risk of spousal violence.⁸ Factors causing domestic violence must be studied to prevent domestic violence. The health professionals can play major role in these cases by recognizing and counselling the woman and family members. The medical fraternity needs to be sensitized with this issue so that we can contribute to this issue and help in decreasing this heinous act. With this background present study was planned with the objective to assess reasons and types of domestic violence against married women in urban slums of Pune.

METHODS

Study design and study setting

This was a community based cross-sectional study. Present study was conducted at field practice area of Urban Health Training centre (UHTC) of a Private Medical College, Pune, Maharashtra. There are total 11 slums under urban health training centre. Out of those, one slum with total population of 881 was selected by using convenience sampling. Data were collected by visiting house to house. When the houses in one slum were covered then another adjacent slum area with the population of 1030 having similar geographical and sociodemographic characteristic was covered in order to achieve the desired sample size.

Study duration

The study was conducted from 1st September 2019 to 31st October 2021.

Sample size

Considering the prevalence of domestic violence against women in Maharashtra 21.4% according to NFHS 4 (2015-16), sample size was calculated.⁹ With 95% confidence interval and permissible error as 20% and non-respondents 10%, calculated sample size was 405.

Study participants

Married women were selected on the basis of inclusion and exclusion criteria.

Inclusion criteria

Married woman above 18 years of age with marital age of minimum 6 months in the selected urban slums and willing to participate in the study were included.

Exclusion criteria

Seriously ill, women with psychological illness, women who do not want to talk about domestic violence were excluded.

Research tool

Pre-designed and pre tested questionnaire. The questionnaire was first prepared in English. It was validated by a panel of experts and then translated into the local language (Marathi) and retranslated in English.

Data collection

Before data collection approval was taken from institutional ethics committee. At first, Anganwadi Worker (AWW) from selected slum was contacted and explained about the study. Co-operation of Anganwadi worker and Medical Social Worker (MSW) was sought for building rapport in the area. Verbal consent of each participant was taken before starting the interview. The data were collected visiting house to house by the interviewer using interview method. During data collection the houses having no married women, locked or participants with exclusion criteria were skipped. Domestic violence history that the study participants experienced in last one year was considered. Amongst recently married women who had completed 6 months of marriage, history of domestic violence in last six months was considered. Interviews were taken in the local language at their households in a room where none of the family member was present other than the participant. For security of the participant and confidentiality of the information, only one woman per household was interviewed. If there was more than one married woman in the house, then the youngest married woman of the household was considered as a study participant. In case someone entered the place during the interview then questions related to general health of the woman were asked or woman was convinced to come to nearby anganwadi centre to complete data collection.

Operational definitions

Domestic violence

Domestic violence is defined as any behaviour, act, action or omission by the respondent, injures or harms the person, or jeopardises person's life, health, limb, safety and encompasses sexual assault, physical and emotional abuse.¹⁰

Urban slum

A compact area of about 60-70 households or at least 300 population with poorly built and congested tenements in the unhygienic environment usually with lacking the proper sanitary and drinking water facilities and inadequate infrastructure.¹¹

Family

Nuclear family: The married couple with their minor children who are still considered dependents.¹²

Joint family: Number of married couples and their children residing in the same household. All the males in the home are related by blood and the ladies are their spouses, widows of family kinsmen and unmarried daughters.

Extended family: Extended families may comprise the grandparents, parents, grandchildren, cousins, aunts and uncles residing in the same household.

Education

Categories in education: illiterate, primary (any level of literacy below class VII), middle (class VIII pass, class IX pass), higher (pass up to 12th standard), graduation, post-graduation.¹³

Occupation

Occupation categorised as Professional, semi-professional (e.g., school teachers), skilled worker (long training in complicated work e.g., driver), semi-skilled worker (jobs that require some training e.g., factory labourer, car cleaner), unskilled worker (no education or training required e.g., domestic servant, peon, watchman), unemployed (no job Irrespective of education level).

Socioeconomic status

The modified Kuppuswamy socioeconomic status (SES) scale has a total score of 1 to 29 and divides families into five socioeconomic classes: “upper class, upper middle class, and lower middle class, upper lower and lower socio-economic class.”

Age at marriage

The age of woman when she got married was considered.

Alcohol consumption

The person consuming alcohol on the basis of frequencies like daily, weekly, fortnightly or occasionally.

Anganwadi worker

Under the Integrated Child Development Services (ICDS) scheme, the Anganwadi workers (AWWs) are the part time workers appointed to render the health services in the community.¹¹

Data analysis

The data were entered in excel sheet and analysed by using Statistical Package for Social Sciences (SPSS) (IBM SPSS Chicago USA version 25). Mean and the standard deviation were employed to convey the numerical data's meaning. The frequency and percentage of categorical data were shown. Chi square test was used to find an association between the different demographic variables, risk factors with respect to domestic violence. ‘t’ test was used to test the significant mean difference of age and duration of marriage those who were exposed to domestic violence and not exposed. Univariate logistic regression was used to find the Odds ratio between the outcome variable domestic violence and different risk factors. Throughout the result 5% significance level was used. All results were shown by 95% of confidence interval. P value <0.05 was considered as significant.

RESULTS

The majority of participants, 113 (27.90%), were in the age category of 31-35 years, followed by 105 (25.93%) in the age group of 26-30 years. The average length of marriage was 6-10 years for 118 (29.14 percent) and 11-15 years for 103 (25.43 percent) of the participants, respectively. 98 (64.05 percent) of the 153 participants earned between 5000 and 10,000 INR per month. The majority of participants (397 (98 percent) were Hindu, followed by Muslim (1.73%) and Christian (0.25%). Consumption of alcohol was seen in 158(39.01%) participants' husband. Only 9 (2.22%) husbands were staying out for the job while majority (97.77%) were staying with their wife. Maximum number of participants 243 (60%) were living in nuclear families, 99 (24.44%) were living in joint families and 63 (15.56%) were living in extended families. There were 113 (27.90%) participants who had only one child and maximum number of children noted were 4 (n=1) in one participant. Maximum number participants (53.33%) had 2 children, while there were 20 (4.92%) participants who were without children at the time of the study (Table 1).

Table 1: Distribution of participants according to sociodemographic characteristics.

Sociodemographic characteristics		N (%)
Age (years)	≤25	38 (9.38)
	26-30	105 (25.93)
	31-35	113 (27.90)
	36-40	76 (18.77)
	41-45	57 (14.07)
	>45	16 (3.95)

Continued.

Sociodemographic characteristics		N (%)
Duration of marriage (years)	Total	405 (100.00)
	≤5	60 (14.81)
	6-10	118 (29.14)
	11-15	103 (25.43)
	16-20	68 (16.79)
	>20	56 (13.83)
	Total	405 (100.00)
Income of the participants per month	≤5000	42 (27.45)
	5001-10000	98 (64.05)
	10001-15000	11 (07.19)
	>15000	2 (01.31)
	Total	153 (100.00)
Religion	Hindu	397 (98.02)
	Muslim	7 (1.73)
	Christian	1 (0.25)
	Total	405 (100)
Alcohol consumption by husband	Yes	247 (60.99)
	No	158 (39.01)
	Total	405 (100)
Husband staying out for job	Yes	9 (2.23)
	No	396 (97.77)
	Total	405 (100)
Type of family	Nuclear	243 (60.00)
	Joint	99 (24.44)
	Extended	63 (15.56)
	Total	405 (100)

Table 2: Distribution of participants according to reasons of domestic violence.

Reasons of domestic violence	Frequency	Percentage
Not doing household work properly	92	23.47
Free and social nature	49	12.5
High tone during dialogue	46	11.73
Jealousy of husband	46	11.73
Doubt of extra-marital relations	41	10.46
Laughing without reason	31	7.9
Disrespectful behaviour with elders in the family	25	6.38
Demand for male child	16	4.08
Alcohol abuse by husband	14	3.57
Husband has problems at work place	10	2.55
Dressing fashionably	10	2.55
Close relations with friends	5	1.28
Low job satisfaction	5	1.28
For study related issue of children	1	0.26
For her money	1	0.26
Total	392*	100

*multiple response.

Commonest reasons reported for domestic violence was 'not doing household work properly' (23.47%) followed by 'free and social nature' (12.50%), 'high tone during dialogue' (11.73%), 'jealousy of husband' (11.73%), or 'doubt of extra-marital relations' (10.46%). Other reported reasons were laughing without reasons 31 (7.90%), disrespectful behaviour with elders in the family

25 (6.38%), and demand of male child 16 (4.08%) (Table 2).

There was overlap of different types of abuses experienced by the participants. The commonest type of domestic violence experienced by the participants was emotional abuse 146 (69.19%). The percentage of

physical abuse was also higher and that was experienced by 45 (21.33%) (Table 3).

Table 3: Distribution of participants according to type of domestic violence.

Type of domestic violence among all exposed to domestic violence	N (%)
Emotional abuse	146 (69.19)
Physical abuse	45 (21.33)
Economical abuse	16 (7.58)
Sexual abuse	4 (1.90)
Total	211*

*multiple response

It was observed that duration of marriage is an important demographic character as those who are married from

less than 10 years [OR=1.51, CI=1.01-2.27] likely to have more domestic violence than those who are married more than 10 years. Duration of marriage is significantly associated with domestic violence as evident by $p<0.05$. Similarly, those whose husband are consuming alcohol (OR=2.32, CI=1.54-3.52) are significantly associated with domestic violence ($p<0.001$) than those who don't consume alcohol. Total number of children are also associated with domestic violence. It has been seen that those who have total number of children less than or 2 [OR = 2.16, CI=1.12-4.17) with $p<0.05$] presumably have more domestic violence than those have children more than 2. It has also been observed that those who were living in the joint/extended family [OR =1.59, CI=1.05-2.40) with $p<0.05$] significantly have more domestic violence than those who are having nuclear family (Table 4).

Table 4: Univariate logistic regression analysis of demographic characteristic with domestic violence.

Demographic characteristic		Domestic violence		Total	OR (95%CI)	P value
		Yes	No			
Education of participants	≤SSC	109	185	294	0.97 (0.62-1.92)	0.89
	>SSC	42	69	111	1	
Occupation of participants	Unemployed	98	145	243	1.39 (0.92-2.11)	0.12
	Employed	53	109	162	1	
Age at marriage (years)	≤22	111	170	281	1.37 (0.88-2.14)	0.17
	>22	40	84	124	1	
Duration of marriage (years)	≤10	76	102	178	1.51 (1.01-2.27)	0.046
	>10	75	152	227	1	
Total number of children	≤2	138	211	349	2.16 (1.12-4.17)	0.02
	>2	13	43	56	1	
Type of family	Joint/extended	71	91	162	1.59 (1.05-2.40)	0.03
	Nuclear	80	163	243	1	
Education of husband	≤SSC	64	109	173	0.98 (0.65-1.47)	0.92
	>SSC	87	145	232	1	
Alcohol consumption by husband	Yes	78	80	158	2.32 (1.54-3.52)	0.001
	No	73	174	247	1	
Total income of family per month	≤20000	67	104	171	1.15 (0.77-1.73)	0.50
	>20000	84	150	234	1	

DISCUSSION

In the present study domestic violence was noted in 151 participants out of 405. Hence the prevalence of domestic violence was 37.28%.¹⁴ The similar result is also supported by Daruwalla et al where they found that 35% out of the total had experienced at least one instance of coercive control. Sharma et al mentioned that the prevalence of domestic violence against women in Delhi experienced in past 12 months was 38%.¹⁵ According to NFHS-5 data, the prevalence of spousal violence among the ever-married women age 18-49 years is 25.2%.¹⁶ The commonest type of domestic violence experienced by the participants was emotional abuse 146 (69.19%). The similar results are seen in the study by Garg et al, Bhattacharya et al mentioned that verbal/psychological

violence was the most common form of domestic violence (85.7%).^{17,18} In the current study, women having lesser duration of marriage were more prone to experience domestic violence as compared to more duration of marriage. However, the results were mentioned by Kundapur et al were different, the frequency of violence towards intimate partners was found to be 40.5% in a South Indian city, and rose with marital length, from 5.5% after five years to 33.3% after ten to twenty years of marriage.¹⁹ Alcohol consumption was found to be significantly associated with domestic violence. The results are in consensus with Marlene et al, conducted study on the impact of married women's husbands' alcohol intake in three low-income regions of Greater Mumbai.²⁰ Domestic violence levels varied greatly by drinking habit, with problem drinkers being

more likely to engage in domestic abuse than sociable or overindulgent drinkers. The results are also in consensus with Garg et al and Agumasie et al and who also supported in their studies that alcohol intake is connected with domestic violence against women.²¹ The domestic violence levels varied significantly by drinking pattern, with moderate drinkers being more likely to commit domestic abuse.^{Error! Bookmark not defined.,22}

This might be because alcohol affects judgement, promotes disinhibition, paranoia, and hostility, all of which contribute to domestic violence perpetration. Commonest reasons reported for domestic violence was 'not doing household work properly followed by 'free and social nature, 'high tone during dialogue', 'jealousy of husband' or 'doubt of extra-marital relations'. Other reported reasons were laughing without reasons, disrespectful behaviour with elders in the family and demand of male child. The similar kind of causes are mentioned in the study by Rajesh Kumar et al.²³ The causes of domestic violence broadly categorized as personality traits, jealousy between the spouses, establishing power and getting control over the women. Similar findings are observed by Sharma et al who explored the violence against women and its solutions. She has mentioned that after marriage, the woman is obligated to live with her husband, never returning to her parents' house. At her husband's house, she must accept and respect the prevalent norm of the "Bahu's" (daughter-in-law's) lower position, which requires her to adapt and be patient and courteous toward all family members, especially those considerably younger than her else facing domestic violence.⁶

CONCLUSION

Present study revealed that duration of marriage, total number of children, type of family and alcohol consumption by husband are the factors significantly associated with domestic violence against married women. The negative effects of domestic violence against women impacts the women as well as the family and society, therefore there should be community awareness through the mass media. In order to empower women against the domestic violence, overall education of girl child will help in strengthening self-esteem. As alcohol consumption was found to be strongest significant factor associated with domestic violence, few sessions on de-addiction and preventing the family from any sort of violence arising due to it can be taken along with help of psychiatry department.

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