

Research Article

Intimate partner violence among ever married Group-D women workers in a medical institution

Shwetha T. M.*, Ashok J., Rajanna M. S., Rajesh S. S., Krishna Iyengar

Department of Community Medicine, Sri Siddhartha Medical College, SSAHE, Tumkur, India

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*Correspondence:

Dr. Shwetha T.M.,

E-mail: shwethatm29@gmail.com

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ABSTRACT

Background: Intimate partner violence (IPV) is the most common type of violence against women. It has adverse consequences on physical, mental and sexual health. Hence this study was conducted to study intimate partner violence among married Group –D female workers in a medical college campus, to document their help seeking for IPV and to assess their attitude towards intimate partner violence.

Methods: A cross-sectional study among married Group- D women workers in a medical college campus. Of the total 73, 60 Group- D workers who gave informed consent were interviewed using a semi-structured questionnaire. In addition, data on socio-economic characteristics was collected. Descriptive statistics, Chi –square test, Fischer’s exact test was used for analysis. Analysis was done using SPSS software version 18.

Results: The study showed that of 60 Groups –D women workers in a medical institution, 29 (48%) experienced life time IPV. Some socio-economic characters like type of family, type of marriage, husband’s education and alcohol intake by husband were significantly associated with IPV. Almost all (97%) said that the wife beating was unacceptable. Only 41% sought help for IPV.

Conclusions: IPV in Group-D married women of a medical institution was high with nearly 50% reporting IPV. Influencing factors such as type of family, type of marriage, educational status of husband and alcohol intake by husband were associated with IPV. The help seeking behaviour was not satisfactory.

Keywords: Intimate partner violence, Group –D women workers, Physical violence, Humiliation, Sexual violence

INTRODUCTION

Intimate partner violence (IPV) against women is the most prevalent yet relatively hidden form of violence against women and it is a global human rights and public health concern.^{1,2} Intimate partner violence is one of the most common forms of violence against women and includes physical, sexual, and emotional abuse and controlling behaviours by an intimate partner.³ Recent international estimates indicate that the percentage of women with a lifetime experience of IPV is as high as 71% (rural Ethiopia) and falls between 21% and 47% in

the majority of countries.^{2,3} According to NFHS3 data 37.2% of the ever married women experienced spousal violence in India.⁴

Intimate partner violence describes physical violence, sexual violence; stalking and psychological aggression (including coercive acts) by a current or former intimate partner.⁵ IPV affects physical, mental and reproductive health. Health consequences can be fatal and end in suicides. Physical violence is defined as any act or conduct which is of such a nature as to cause bodily pain, harm or danger to life, limb or health, or an act that impairs the health or development of the person

aggrieved, or and that included assault, criminal intimidation and criminal force. Psychological violence includes: name calling, any kind of accusations on woman's character and conduct, insults for not bringing dowry, preventing a woman from marrying a person of her choice, any form of threats or insults for not producing a male child. Sexual violence like forced intercourse, forcing his wife or mate to look at pornography or any other obscene pictures, material and child sexual abuse.

Different studies conducted in India indicates the association of IPV with different socio demographic factors, alcoholism and dowry.⁶⁻⁹ Employed women have been found to report violence more frequently than unemployed women in a number of other studies.¹¹⁻¹³ There are still grey areas in the understanding of IPV, its various forms and different factors bearing influence on it. Through this study we attempt to estimate the proportion of Group -D married women experiencing IPV and assess their influencing factors.

Objectives

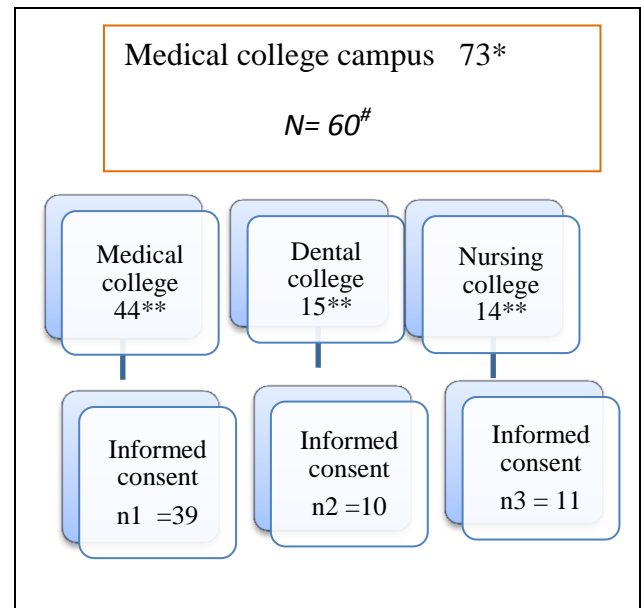
1. To measure the burden of intimate partner violence among Group -D female workers.
2. To determine their attitude towards intimate partner violence.
3. To assess their help seeking behaviour for intimate partner violence.

METHODS

The study was conducted among ever married Group-D female workers in medical, dental and nursing colleges of a medical campus in Karnataka. It was a cross-sectional study. The study was approved by the Institutional Review Board of Sri Siddhartha Academy of Higher Education, Tumkur, India. Written informed consent was obtained from study participants. Interview was done in local language using a semi-structured questionnaire. Study was conducted between May-September 2015 in Sri Siddhartha Medical college campus, Tumkur, Karnataka. Guidelines of World health organization, including the importance of ensuring confidentiality and privacy, both as means to protect safety of study participants and to improve quality of the data were followed. Attitude towards the intimate partner violence was measured using wife beating norms used in a study done by Sambasia et al.¹⁴

Statistical analysis

Data collected was entered in MS- excel spread sheet and data was analysed using SPSS version 16 software. The relationships among related independent variables were assessed using Chi-square test and Fischer exact test.



* Total number of Group -D female ever married workers in Medical College Campus; **Number of Group -D female married workers in respective colleges; # N= n1 + n2+ n3.

Figure 1: Flow chart showing the process of incorporation of study participants.

RESULTS

Of 60 Group -D workers 29 (48.3%) experienced life time IPV. Most of the women (45%) belonged to the age Group of 35-44 years, followed by age Group of >45 years (26.7 %). They belonged to socio economic status class 3(56.7%) and class 4 (43.3%) according to modified B.G. Prasad's classification. Most of them were Hindus (86.7%), rest were Muslim. 80% of them were from rural area. Nearly half of them had education up to high school. Majority (86.7%) had an arranged marriage. Majority were from nuclear family (73.3%) (Table 1).

Husband's socio demographic characteristics were also collected. Data regarding educational status, employment, alcohol intake and dowry during marriage was collected. Table 2 shows that the majority of them were employed for wages (68.7%). 46.7% were consuming alcohol and there was significant association between alcohol intake and IPV. Out of 29, 21 husbands (70%) of the victims were drinking alcohol on daily basis. Dowry was given in 50% of the marriages (Table 2).

Those who experienced violence gave multiple responses. The major type of violence was psychological, followed by physical and sexual violence. The commonest was humiliation (72.4%) followed by kicking which is 51.7% and 34.5% hair pulling (Table 3).

Only 12 of them (41.4%) sought any kind of help for IPV, 83.33% of those who sought help informed parents, no one complained to police and only 2 women sought

medical help and it was OPD care only. Attitude was measured using wife beating norm score adopted from a study conducted by Sambasia, scoring was done as 0 and 1. 93.1% of the study population said that wife beating was unacceptable (Table 4).¹⁴

Table 1: Socio- demographic characteristics of study participants.

Characteristic (Total n= 60)	Number	Percentage
Age Group (in years)		
18- 24	2	3.3%
25-34	15	25%
35-44	27	45%
>45	16	26.7%
Residence		
Rural	48	80%
Urban	12	20%
Educational status		
No formal education	29	43%
Elementary	6	10%
High school and above	25	47%
Religion		
Hindu	52	86.7%
Muslim	8	13.3%
Type of marriage		
Arranged marriage	52	86.7%
Love marriage	8	13.3%
Duration of marriage (in years)		
0-5	4	6.6%
6-14	4	6.6%
>15	52	86.8%
Socio-economic status		
Class 3	34	56.7%
Class 4	26	43.3%
Type of family		
Nuclear family	44	73.3%
Three generation	12	6.7%
Joint family	4	20%

In this study there was no significant relationship between IPV and factors such as religion, age Group of women, educational status, years of marriage and dowry. Joint family found to be protective against IPV. There is significant relationship between type of family and IPV. As the educational level of the husband increased the occurrence of IPV decreased. There is significant relationship between husband's educational status and IPV. There is significant relationship between type of marriage and IPV. Arranged marriage found to be having less IPV (42.3%) when compared to love marriage (52.9%). Alcohol intake by spouses was almost 50%. 78.6% women whose husband consumes alcohol

experienced IPV. There was significant association between the alcohol intake by husband and IPV (Table 5 and 6).

Table 2: Socio demographic characteristics of study participants.

Characteristics	Number	Percentage
Husband's education		
High school and above	33	55%
No formal education	22	36.7%
Elementary	5	8.3%
Husbands occupation		
Employed for wages	41	68.3%
Self – employed	14	23.4%
Not employed	5	8.3%
Alcohol intake by husband		
No	32	53.3%
Yes	28	46.7%
Dowry given at marriage		
Yes	30	50%
No	30	50%

Table 3: Prevalence of different forms of domestic violence as reported by women workers (n= 29).

Type of violence	Number	Percentage
Physical violence		
Kicking	15	51.7%
Hair pulling	10	34.5%
Slapping	2	6.9%
Pushing	2	6.9%
Psychological		
Humiliation	21	72.4%
Threatening	4	13.8%
Verbal abuse	4	13.8%
Sexual		
Denial of sex	9	31.03%
Co-arc'd sex	1	3.4%

*Multiple responses.

Table 4: Help seeking behaviour and attitude towards wife beating.

Sought help for IPV	(n = 29)	Percentage
Yes	12	41.4%
No	17	58.6%
Form of help sought		
Informed parents	10	83.3%
Medical help (OPD)	2	46.7%
Wife beating norms		
(n = 60)		
No wife beating norms (score 0)	56	93%
Some wife beating (score 1)	4	7%

Table 5: Association of different socio-demographic character's with IPV.

Socio demographic characters	IPV		Total	‘P ’ value
	Yes	No		
Age Group (in years)				
18- 24	0 (0%)	2 (100%)	2 (100%)	0.242
25-35	5 (33.3%)	10 (66.7%)	15 (100%)	
36-44	15 (55.6%)	12(44.7%)	27 (100%)	
>45	9 (56.2%)	7 (43.8%)	16 (100%)	
Residency				
Urban	24 (50%)	24 (50%)	48 (100%)	0.424
Rural	5 (41.7%)	7 (58.3%)	12 (100%)	
Education				
No formal education	14 (48.3%)	15 (51.7%)	29 (100%)	0.563
Elementary	4 (66.7%)	2 (33.3%)	6 (100%)	
High school	7 (53.8%)	6 (16.7%)	13 (100%)	
Above high school	4 (33.3%)	8 (66.7%)	12 (100%)	
Religion				
Hindu	25 (48.1%)	27 (51.9%)	52 (100%)	0.608
Muslim	4 (50%)	4 (50%)	8 (100%)	
Type of marriage				
Love marriage	10 (52.9%)	6 (47.1%)	16 (100%)	0.006*
Arranged marriage	19 (42.3%)	25 (57.7%)	44 (100%)	
Duration of marriage (in years)				
0-5	0 (0%)	4 (100%)	4 (100%)	0.134
6-15	2 (50%)	2 (50%)	4 (100%)	
>15	27 (52%)	25 (48%)	52 (100%)	
Socio-economic status				
Class 3	18 (52.9%)	16 (47.1%)	34 (100%)	0.289
Class 4	11 (42.3%)	15 (57.7%)	26 (100%)	
Type of family				
Nuclear family	19 (42.3%)	25 (57.7%)	44 (100%)	0.006*
Three generation	10 (83.3%)	2 (16.7%)	12 (100%)	
Joint family	0 (0%)	4 (100%)	4 (100%)	

Table 6: Association of different socio-demographic character's with IPV.

Characters	IPV		Total	‘P’ value
	Yes	No		
Husband’s education				
No formal education	15 (68.2%)	7 (31.8%)	22 (100%)	0.035*
Elementary	3 (60%)	2 (40%)	5 (100%)	
High school and above	11 (33.3%)	22 (66.7%)	33 (100%)	
Husband’s Occupation				
Employed for wages	21 (51.2%)	20 (48.8%)	41 (100%)	0.132
Self -employed	5 (35.7%)	9 (64.3%)	14 (100%)	
Unemployed	3 (60%)	2 (40%)	5 (100%)	
Alcohol intake by husband				
				0.001 *
Yes	22 (78.6%)	6 (21.4%)	28 (100%)	
No	7 (21.9%)	25 (78.1%)	32 (100%)	
Dowry				
Yes	16 (53.3%)	14 (46.7%)	30 (100%)	0.303
No	13 (43.3%)	17 (56.7%)	30 (100%)	

DISCUSSION

In the present study 48% of the respondents experienced intimate partner violence, this is consistent with other studies done in India.^{8,16} According to NFHS3 survey 35% of women aged 15-49 in India have experienced physical or sexual violence.³ According to study done by Ali lifetime prevalence of physical violence was 57.6% in Pakistan.¹⁵ According to another study done in Bangladesh by Sambisa et al the prevalence of reported past-year physical spousal violence was 31%.¹⁴ The overall prevalence of physical, psychological, sexual and any form of violence among women of Eastern India were 16%, 52%, 25% and 56% respectively.¹⁶ The lifetime prevalence of physical assault and sexual coercion was found to be 34% and 4%, respectively, in a rural country of western China.¹⁷

In India women's experience of physical or sexual violence ranges from a low of 6% in Himachal Pradesh to 40% or more in Rajasthan, Madhya Pradesh and Tripura, and to a high of 56% in Bihar.³ A Study done in Bengaluru slums by Rocca CH et al over half (56%) of the study participants reported having ever experienced physical domestic violence.⁸ Many women experienced multiple types of IPV, physical and verbal violence.

In this study there was no significant association between the age Group and IPV. In a study conducted in urban slums of Mumbai by Prateek et al prevalence was higher among 25- to 34-year-old women and in the early years of marriage.⁷ In a study done in eastern India Prevalence of all forms of violence were increased along with the age of the women. Women aged 20–29 years and aged above 29 years have reported higher prevalence of violence than women aged less than 20.¹⁶ But in this study There was no increased incidence of IPV during early years of marriage. There was no association between IPV and duration of marriage.

Incidence of IPV was less in joint family. The association of IPV with type of family was found significant statistically.

In this study there was no significant relationship between religion and IPV. Similar finding was seen in Study by Prateek et al.⁷ But from other studies, data reveal that women belonging to Muslim religion were at more risk of facing any form of IPV compared to women belonging to Hindu religion.¹⁴

In this study all of the women belonged to socio economic status class 3 and class 4 and it is not significantly associated with occurrence of IPV among them. The association of family income and IPV was found to be highly significant in other studies conducted in India.^{9,13}

There was significant association between the type of marriage and IPV. In this study the arranged marriage

was found to be protective when compared with IPV in love marriage. The finding that women in 'love' marriages were more likely to report intimate partner violence than women whose marriages were arranged is intriguing. Similar finding was found in a study conducted by Rocca et al in urban Bangalore.⁸

Dowry problem is still prevalent, which was confirmed through this study where 50% of the participants gave dowry during the marriage. But in this study there was no significant association between dowry and IPV. In a study conducted by Rocca CH et al in urban south India, a slightly reduced odds of reported violence was found among women who were given some form of dowry at the time of marriage, and post-marriage requests for dowry by the husband or his family were associated with increased violence.⁸

In this study as the educational level of the husband increased the occurrence of IPV decreased. There was significant relationship between husband's educational status and IPV. Similar was the finding in a study by Ackerson et al.¹⁷

Alcohol intake by spouses was almost 50% in this study. There was significant association between the alcohol intake by husband and IPV. 78.6% women whose husband consumed alcohol experienced IPV. Significant association was found between experience of domestic violence and alcoholism in husband similar to that found in studies done by Prateek et al and Jejeebhoy.^{7,12}

Majority of the study participants (91.7%) felt that wife beating was unacceptable in this study. In a study done by Rani M and Bonu S it was found that acceptance of wife beating ranged from 29% in Nepal, to 57% in India (women only).¹⁸

Only 41% of the study participants sought some help for IPV according to this study. In a study in urban slums of Mumbai no kind of help was sought by (62.4%) women in response to IPV while only 2 (2%) women had complained to police, 14 (13.9%) women complained to their in laws or neighbors.⁷

The topic of interview is very sensitive and participants may not express their views openly, as they think that their responses may damage the reputation of themselves and their families. Sometimes in this type of research, participants may also report the behaviour that is believed to be consistent with their culture, rather than the actual study included only violence by their husbands. Women in live- in relationships were not considered. Small sample size, recall bias and social desirability biases were other limitations in the study.

CONCLUSION

48% of married Group-D women in the study experienced intimate partner violence. The study

confirms high prevalence of all forms of violence against women. Most of the women were reluctant to share their state on intimate partner violence. Type of family, type of marriage, alcohol intake by spouse, education of the husband was the factors associated with violence. 59% women experiencing violence did not seek any help. 93% of the participants did not accept wife beating. Still a huge amount of violence is being experienced by women. More efforts to increase the awareness and empowerment of women in India are the need of the hour.

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