**RESEARCH ARTICLE** 

# A STUDY OF THE NATURE AND CAUSES OF DOMESTIC VIOLENCE AMONG THE ATTENDEES OF A DOMESTIC VIOLENCE COUNSELLING CENTER OF A TERTIARY LEVEL HOSPITAL OF A **CITY OF CENTRAL INDIA**

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#### **ABSTRACT**

Background: Domestic violence against women is widely recognized as important public health problem, owing to its substantial consequences for women's physical, mental and reproductive health. This study tried to assess the frequency and patterns of domestic violence against women experienced by attendees of Domestic Violence counselling centre Department of Psychiatry, MY Hospital, Indore.

**Aims & Objective:** To study the nature and causes of domestic violence.

Material and Methods: Cross sectional study using a pre designed pre tested semi structured questionnaire was carried out and the data were analyzed using MS excel.

Results: Most common type of domestic violence faced is physical (80%) followed by mental (8%), social (8%) and sexual (4%). Monetary issues (26%) and alcoholism (22%) are the two most important causes of domestic violence, other causes being extra marital affair (6%), Family conflicts (6%) and dowry (6%). 64% victims were either illiterate or primary pass; 34% were skilled workers; 56% victims had their per capita income between ₹ 980 and 2935; 76% had their modified Kuppuswami score between 5-10.56% victims face domestic violence daily.

Conclusion: Monetary problems, alcoholism, illiteracy, extramarital affairs and dowry are the major causes of domestic violence. The victims most commonly face physical violence by their partners daily. There is an urgent need of more and more domestic violence counselling centers throughout the country.

**KEY-WORDS:** Domestic Violence; Alcoholism; Illiteracy; Counselling

## Introduction

Domestic violence is common form of violence against women. Domestic violence against women is widely recognized as important public health problem, owing to its substantial consequences for women's physical, mental and reproductive health. The Protection of Women from Domestic Violence Act 2005 GoI[1] has defined Domestic Violence as-any act, omission or commission or conduct of the respondent shall constitute domestic violence in case it,

- (a) harms or injures or endangers the health, safety, life, limb or well being, whether mental or physical, of the aggrieved person or tends to do so and includes causing physical abuse, sexual abuse, verbal and emotional abuse and economic abuse; or
- (b) harasses, harms, injures or endangers the aggrieved person with a view to coerce her or

- any other person related to her to meet any unlawful demand for any dowry or other property or valuable security; or ...
- (c) has the effect of threatening the aggrieved person or any person related to her by any conduct mentioned in clause (a) or clause (b);
- (d) otherwise injures or causes harm, whether physical or mental, to the aggrieved person.

Physical health consequences directed linked to intimate partner violence include broken bones, facial trauma, tendon or ligament injuries, chronic headaches. undiagnosed hearing, vision. concentration problems and other stress related problems. Abuse during pregnancy can lead to low birth weight outcomes, infection as well as miscarriage. Primary mental health consequence of battering within an on-going intimate relationship is depression. High rates of post-

stress disorder are also well traumatic documented in battered women. Mental health consequences: of violence include feelings of anger and helplessness, self-blame, anxiety, phobias, panic disorders, memory loss and nervous breakdowns.[2-6] Violence can also give rise to unhealthy behaviour such as smoking, alcohol, and drug abuse, sexual risk taking and physical inactivity. A study by Bontha V Babu found that the overall prevalence of physical, psychological, sexual and any form of violence among women of Eastern India were 16%, 52%, 25% and 56% respectively. Husbands were mostly responsible for violence in majority of cases and some women reported the involvement of husbands' parents.[2,7] Domestic Violence Counselling centre for women is the first hospital based crisis centre in India designed to respond to the needs of women facing violence within their homes and families. This study tried to assess the frequency and patterns of domestic violence against women experienced by attendees of Domestic Violence counselling centre Department of Psychiatry, MY hospital Indore. The present study was carried out with the aim of assessing the nature of different kind of violence experienced by the attendees of Domestic Violence counselling centre and assessing the selfperceived reasons and severity of domestic violence experienced by them.

## **Materials and Methods**

This was Cross sectional study. Study area was Domestic Violence counseling centre at Psychiatry department of MYH OPD. Study population included Attendees of Domestic Violence counseling centre at Psychiatry department of MYH OPD. Sample size was 50 attendees of Domestic Violence counseling centre were interviewed for study. Study Duration was 3 months duration. A pre designed pre tested semi structured questionnaire was used for data collection. Written informed consent was obtained from study subjects. Inclusion Criteria included Attendees of Domestic Violence counseling centre who gave consent. Exclusion Criteria included Attendees of Domestic Violence counseling centre who not gave consent or not respond well. The study was conducted in 50 attendees of Domestic Violence counseling centre who were referred

from the Psychiatry department OPD of MYH. The Semi structured questionnaire, included the Biographical data of the clients that is age, address, religion, education, occupation, type of family, physical aspects, mental aspects, sexual aspects, financial aspects, and social aspects, was used for data collection. The data was analyzed using appropriate statistical software (MS excel).

#### Results

46% victims had marriage of ≤ 10 years of duration. Most common age-group of victims is between 26-35 years. The type of family of victims of domestic violence is in the ratio 60% Joint family: 40% nuclear. 64% victims had urban residence; 64% were either illiterate or primary pass; 34% were skilled workers; 56% victims had their per capita income between ₹ 980 and 2935; 76% had their modified Kuppuswami score from 5 to 10. 56% victims face domestic violence daily. Most common type of domestic violence faced is physical (80%) followed by mental (8%), social (8%) and sexual (4%). 52% victims have regarded the domestic violence as severe. Monetary issues (26%) and alcohol (22%) are the two most important causes of domestic violence, other causes being extra marital affair (6%), Family conflicts (6%) and dowry (6%). In present study 38% cases belong to illiterate and 26%, 22%, 6%, 6% and 2% cases experienced domestic violence belong to primary, middle, high intermediate. graduate or above group respectively. About 34% cases experienced domestic violence belong to skilled worker group and 24%, 22%, 12%, 6% and 2% cases experienced domestic violence belong to semiprofessional, unskilled worker, semi-skilled worker, professional and unemployed group respectively. The Frequency of domestic violence in about 56% cases daily and in 20%, 10% and 14% cases, Frequency of domestic violence was weekly, monthly and occasionally respectively.

Table-1: Demographic Characteristics of Victims of Domestic Violence [Duration of Marriage (in years)]

<b>Duration of Marriage (Years)</b>	N (%)
0-10	23 (46)
11-20	13 (26)
21-30	4 (8)
31-40	2 (4)

Table-2: Demographic Characteristics of Victims of Domestic Violence [Age Group]

Age Group (Years)	N (%)	
5-15	2 (4)	
16-25	11 (22)	
26-35	28 (56)	
≥36	9 (18)	

Table-3: Demographic Characteristics of Victims of Domestic Violence [Type of Family]

Type of Family	N (%)
Joint	30 (60)
Nuclear	20 (40)

Table-4: Demographic Characteristics of Victims of Domestic Violence [Educational Status]

Educational Status	N (%)
Illiterate	19 (38)
Primary	13 (26)
Middle school	11 (22)
High school	3 (6)
Intermediate	3 (6)
Graduate or above	1 (2)

Table-5: Demographic Characteristics of Victims of

**Domestic Violence [Occupation]** 

Occupation N (%)		
Unemployed	1 (2)	
Unskilled worker	11 (22)	
Semi-skilled worker	06 (12)	
Skilled worker	17 (34)	
Clerical, Shop Owners	07 (14)	
Semi professional	05 (10)	
Professional	3 (6)	

Table-6: Demographic Characteristics of Victims of Domestic Violence [Income (Per Capita)]

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Income (Per Capita)	N (%)	
Below₹979	6 (12)	
Between ₹ 2935 and 980	28 (56)	
Between ₹ 4693 and 2936	12 (24)	
Between ₹ 7322 and 4694	4 (8)	
Between ₹ 9787 and 7323	0 (0)	
Between ₹ 19574 and 9788	0 (0)	
Above ₹ 19575	0 (0)	

Table-7: Demographic Characteristics of Victims of Domestic Violence [Educational Status]

bomestic violence [Educational Status]	
Educational Status	N (%)
26-29	0 (0)
16-25	13 (6)
11-15	5 (10)
5-10	38 (76)
Below 5	4 (8)

Table-8: Attributes Related to Domestic Violence [Frequency of Violence]

requestey of violence		
Frequency of Violence	N (%)	
Daily	28 (56)	
Weekly	10 (20)	
Monthly	5 (10)	
Occasionally	7 (14)	

Table-9: Attributes Related to Domestic Violence [Type of Violence]

Type of Violence	N (%)	
Physical	40 (80)	
Mental	4 (8)	
Social	4 (8)	
Sexual	2 (4)	

Table-10: Attributes Related to Domestic Violence

[Grading of Violence]

Grading of Violence	N (%)
Mild	9 (18)
Moderate	15 (30)
Severe	26 (52)

Table-11: Attributes Related to Domestic Violence [Reason of Violence]

Reason of Violence	N (%)
Monetary issues	13 (26)
Alcohol	11 (22)
Extra marital affair	8 (6)
Dowry	3 (6)
Women occupation (going outside home)	3 (6)
Care of children	3 (6)
Family conflicts	8 (16)
No reason specified	1 (2)

## **Discussion**

Domestic Violence being a sensitive issue, the present study tried to find the nature and causes of domestic violence making it sure not to disclose the identities of the victims and their families. In our study as well, victims with marriage of ≤ 10 years of duration and those belonging to joint family have more cases of domestic violence. Murthy et al. (2004) is of the view that numbers of family members, type of marriage and husband's education have significant influence on domestic violence.[8] Studies have also revealed that men raised in patriarchal family structure that encourages traditional gender role (Fagot et al., 1998 and Malamuth et al., 1995) are more likely to abuse their intimate partners.[9,10] While many researchers come out with findings that alcoholism promotes men to commit domestic violence (Leonard, 1992; McKenry et al., 1995; Rao, 1997 and Bhatt, 1998), in the present study Alcoholism has come out as the second most important cause of domestic violence after Monetary problems.[11-14] Another study among Uttar Pradesh men by Gerstein (2000) is of the view that low educational level and poverty are important reasons for domestic violence.[15] In the present study % victims were illiterate and % victims were primary pass. Only 2% were graduates and above. The role of dowry and

working status of female is also considered in the causation of domestic violence (Sahu, 2003; Swain, 2002 and Jejeebhoy, 1998). [16-18] In the present study 6% victims suffered due to dowry and 6% suffered due to being working women. Joint family and less duration of marriage are important parameters of domestic violence. [19-22] A large number of cases were illiterate and illiteracy seems to be one of the most prominent causes of Domestic violence. [23,24]

Domestic violence were more common in lower socio economic group and about 84% cases experienced domestic violence belong to income group less than ₹ 2935 monthly.<sup>[25,26]</sup> Most common type of violence was physical (80%) and other violence were mental (8%), social (8%), sexual (4%). About in 50% cases violence were severe grade and mostly physical in nature. The three most common reasons of domestic violence include: monetary reasons (26%), alcohol (11%), and Extra marital affair (16%).<sup>[27-30]</sup>

Besides this, the role of inter spousal relationship, sex of the children, ownership of property, dowry, working status, autonomy, religion and caste of the person can't be ignored (Sahu, 2003; Swain, 2002 and Jejeebhoy, 1998).[16-18,31-33]

The study was carried out with sample size of 50 which was not sufficient to corroborate the findings on a larger picture, needs more sample size to be incorporated which unfortunately was not contemplated owing to time constraint. Following recommendations are put forwarded based on the present study:

- 1. Anganwadis can be engaged in Domestic Violence Counseling Center or similar services so that the most affected class are benefitted.
- 2. There should be an easy reporting system so that illiterate women from remote areas can easily inform and get proper support and counseling.
- 3. A toll free number should be made available 24×7 for quick reporting especially in case of grievous injuries.

### Conclusion

Monetary problems, alcoholism, illiteracy, extramarital affairs and dowry are the major

causes of domestic violence. The victims most commonly face physical violence by their partners daily. There is an urgent need of more and more domestic violence counselling centers throughout the country.

#### References

- Ministry of Law and Justice. The Protection of Women from Domestic Violence Act, 2005. No. 43 of 2005. The Gazett of India, New Delhi. 2005. Available from: URL: http://wcd.nic.in/wdvact.pdf [accessed on 29th march 2013]
- 2. Babu BV, Kar SK. Domestic violence against women in eastern India: a population-based study on prevalence and related issues. BMC Public Health 2009;9:129.
- 3. Deosthali P, Maghnani P, Malik S. Establishing Dilaasa:
  Documenting the Challenges. Centre for Enquiry into
  Health and Allied Themes (CEHAT). Mumbai. 2005.
  Available from: URL:
  http://www.cehat.org/go/uploads/Dilaasa/estabdila
  asa.pdf.
- 4. International Clinical Epidemiologists Network (INCLEN). Domestic Violence in India 3: A Summary Report of a Multi-Site Household Survey. International Center for Research on Women. Washington, DC. 2000.
- 5. Daga AS, Jejeebhoy S, Rajgopal S. Domestic Violence against Women: An Investigation of Hospital Causality Records, Mumbai. Journal of Family Welfare 1999;45(1):1-11.
- 6. Dave A, Slinky G. Special Cell for Women and Children: A Research Study on Domestic Violence', in Domestic Violence in India 2: A Summary Report of Four Record Studies. Washington DC: International Centre for Research on Women and the Centre for Development and Population Activities. 2000.
- 7. Duvvury N, Nayak MB. The Role of Men in Addressing Domestic Violence: Insights from India'. Development 2003;46(2):45-50. Available from: URL: http://econpapers.repec.org/article/paldevelp/v\_3a46\_3ay\_3a2003\_3ai\_3a2\_3ap\_3a45-50.htm
- 8. Murthy MSR, Ganesh P, Srivirajarani J, Madhusudan R. Proximate Determinants of Domestic Violence: An Exploratory Study on Role of Menstrual Problems and Life Style of Men. Demography India 2004;33(1):85-105.
- 9. Fagot BI, Loeber R, Reid JB. Developmental Determinants of Male to Female Aggression. In. Russell GW (edi). Violence in Intimate Relationships. PMA Publishing Corp. 1988. p. 91-105.
- Malamuth NM, Linz D, Heavey CL, Barnes G, Acker M. Using the Confluence Model of Sexual Aggression to Predict Men's Conflict with Women: A Ten year Follow up Study. J Pers Soc Psychol 1995;69(2):353-69
- 11. Leonard KE, Blane HT. Alcohol and Marital Aggression in a National Sample of Young men. Journal of Interpersonal Violence1992;7(1):19-30.
- 12. McKenry PC, Julian TW, Gavazzi SM. Toward a Biopsychosocial Model of Domestic Violence. Journal of Marriage and the Family 1995;57:307-20.
- 13. Rao V.Wife- beating in Rural South India: A Qualitative and Econometric Analysis. Soc Sci Med.

- 1997;44(8):1169-80.
- 14. Bhatt RV. Domestic Violence and Substance Abuse. International Journal of Gynecology and Obstetrics. 1998;63(Suppl.1):S25-31.
- 15. Gerstein L. In India, Poverty and Lack of Education are Associated with Men's Physical and Sexual abuse of their Wives. International Family Planning Perspectives 2000;26(1):44-5.
- 16. Sahu B. Contextualizing Domestic Violence from Women's Perspective: A Study in a Slum Community in Orissa. IIPS, M.Phil dissertation (Unpublished). 2003.
- 17. Swain S. Understanding The linkage of Employment, Autonomy and Domestic Violence among Married Women: A comparative study of Uttar Pradesh and TamilNadu. IIPS, Seminar Paper (Unpublished). 2002.
- 18. Jejeebhoy S. Wife beating in Rural India: A Husband's Right? Evidence from Survey Data. Economic and Political Weekly 1998;33(15):855-62.
- 19. Golding JM, Taylor DL. Sexual Assault History and Premenstrual Distress in two General Population Samples. Journal of Women's Health 1996;5(2):143-
- 20. Hamberger LK, Lore JM, Bonge D, Tolin DF. An Empirical Classification for Motivations for Domestic Violence. Violence Against Women 1997;3(4):401-23.
- 21. Heise L, Ellsberg M, Gottemoeller M. Ending Violence Against Women. Population Reports, Series L, No. 11. Baltimore, John Hopkins University School of Public Health, Population Information Program, December. 1999.
- 22. Hindin JM. . Who is at risk? Factors Associated with Intimate Partner Violence in the Philippines. Social Science and Medicine. 2002;55:1385-99.
- 23. International Institute for Population Sciences. 1998-99. National Family Health Survey (NFHS-2) India. Mumbai. 2000.
- 24. Jaswal S. Health Records and Domestic Violence in Thane District, Maharashtra', in Domestic Violence in India 2: A Summary Report of Four Record Studies. Washington DC: International Centre for Research on Women and The Centre for Development and Population Activities. 2000.
- 25. Khan ME, Townsend JW, Sinha R, Lakhanpal S. Sexual

- Violence within Marriage. In: Seminar. New Delhi, Population Council. 1996. p. 32-35.
- 26. Martin LS, Moracco KE, Garro J, Tsui AO, Kupper LL, International Journal of Epidemlogy Chase JL. 2002;31:560-72.
- 27. Mishra J. Women and Human Rights. New Delhi: Kalpaz Publications, New Delhi. 2000.
- 28. Mitra N. Best Practices Among Responses to Domestic Violence in Maharashtra and Madhya Pradesh', in Domestic Violence in India 1: A Summary Report of Three Studies. Washington International Centre for Research on Women and The Centre for Development and Population Activities.
- 29. Stark E, Flintcraft A, Frazier W. Medicine and Patriarchal Violence: The Social Construction of Private Event. International Journal of Health Services 1979;9:461-93.
- 30. Straus MA, Gelles RJ, Steinmetz S. Behind Close Doors: Violence in the American Family. Garden City, New York: Anchor Press. 1980.
- 31. Travers J. Domestic Violence in Cultural Context: A Response to Frederick Schiavone. Department of History. Stony Brook University. 1997.
- 32. United Nations Children's Fund (Unicef). Domestic Violence against Women and Girls. Innocenti Digest Number 6. Innocenti Research Centre, Florence, Italy.
- 33. Visaria L. Violence against Women in India: Evidence from Rural Gujarat', in Domestic Violence in India 1: A Summary Report of Three Studies. Washington DC: International Centre for Research on Women and The Centre for Development and Population Activities.

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