

Shehdedi Lessin

Shahdadi Hossein

MScN in Nursing, Dept.of Medical and surgical Nursing, School of Nursing and Midwifery, Zabol university of Medical sciences, Zabol, Iran

Abstract:

Publishing Group

Background and aim: Currently, domestic violence is regarded as an important issue in public health. Addiction in men is one of the factors that intensify domestic violence. There is no detailed information concerning the prevalence of domestic violence among addicts. Thus, this study is conducted with the aim of evaluating the frequency of domestic violence among drug addicts who went to one of the Centers for Addiction of hospitals affiliated to Zabol University of Medical Sciences.

Methods: This research is conducted in the form of a descriptive and crosses-sectional study. The sample population of this study consists of 59 married females who went to one of the hospitals affiliated to Zabol University of Medical Sciences in 2011. Data were collected using a questionnaire and were analyzed using descriptive and inferential statistics.

Findings: The results show that 71.2 percent of the wives of addicts under study were housewives and 50.8 percent of them had experienced domestic violence. In terms of educational level, 59.3% of the participants had degrees below high school diploma, 5.1% were illiterate, and 5.1% had degrees above high school diploma. Other findings indicate that there is not a statistically significant relationship between demographic characteristics of the sample population and domestic violence against wives.

Conclusion: Awareness of the importance of violent behaviors and their complications are crucial for women since this phenomenon is a major problem in Iran. It is also necessary for public health officials to conduct screening programs and initiate support and counseling centers to tackle this issue.

Keywords: spousal abuse, addiction, wives, addicts

1. Introduction

Spousal abuse is considered as a prevalent form of social pathology in today's societies and is becoming a major concern among families, health officials and family planners. Drug abuse in men is one of the factors that exacerbate spousal abuse (Lych, 2000). This social phenomenon - of violence by men against their wives - is a serious and dangerous social pathology today that afflicts people from all walks of life although the frequency and intensity of violence is higher in some groups and cultures, such as addicts or traditional and rural groups and cultures (Esmaeeli et al., 2004, Poureslami et al., 2011). Violence against women in Europe has become a deteriorating reality and a source of huge concerns. Violence against women and the need to control it is addressed as a serious crisis in various societies of today's world (Kramek et al., 2001). There are various forms of violence. These include beatings and physical abuse of women and daughters by a spouse, partner (Sadler, et al. 2000, Swiss et al., 1998), brother or father, humiliation and insult, neglecting and ignoring, finding faults permanently and destroying self-esteem (D. Loxton et al,2006), limitation in leaving home (Mazza et al. ,1996), creating obstacles for training and education, harassment and rape even in marriage, forced pregnancy (Alsaker et al., 2006), threats of murder, torture, rejection from home and residence, and finally forced marriage (Briere & Jordan, 2004). Due to cultural differences and different social norms, there is no precise definition of violence against women; however, it can range from a slap in the face –as a minor physical abuse– to murder. Generally, according to theories and researches carried out in the field, violence against women can be classified into mental, physical, sexual, and financial (Jalali, & Rahbarian, 2008). Substance abuse and addiction contributes to violence against women (Stewart, 2003). In fact, since the personality of addicts changes during abuse, they lose confidence and commit acts of violence against family members, especially spouses (Bennett & Williams, 2003).

A number of other studies show that male addicts commit more violence than other people against family members (Aghabakhshi, 1997). Spousal abuse can occur in various forms - physical, verbal, emotional, mental, sexual and financial. Wife abuse not only endangers physical health, mental health and psycho-emotional balance of the couple, but also affects children adversely (Poureslami, Sarmast, & Moosavianpour, 2011, Shams Esfandabad & Emamipour, 2003). There is little research on spousal abuse among drug addicts and accurate information about the prevalence of spousal abuse among such individuals is lacking. Therefore, with regard to the importance of this issue and the fact that few studies have been conducted on this topic in the city of Zabol, the present study is conducted to investigate the prevalence of violence against women in this city. Furthermore, this study aims to exclusively determine the level of violence by addict husbands against wives in terms of age, level of education, duration of marriage, employment status, lifestyle and socioeconomic status.

2. Materials & Methods

This research has conducted in the form of a descriptive and crosses-sectional study. To achieve the desired objectives of this study, a questionnaire was developed containing demographic questions and violence-related items. The questionnaire was administered after validation. In order to collect data, the researchers first made contact with women who were married to addict husbands and made an appointment at the Centers for Addiction of a hospital affiliated to Zabol University of Medical Sciences. After going to the Centre for Addiction and being provided by necessary explanations, the participants were asked to answer the questionnaire orally and to provide required information about their husbands for recording with their own consent. At first, the researchers gave enough explanations to the husbands and asked them to bring their wives to Imam Khomeini Hospital's Center for Addiction at due time. Then, they were given the Abusive Behavior Inventory and were asked to complete it. Questionnaire data were collected through face to face interviews. In order to observe research ethics in this study, a written statement was taken from the Research Council of the University. The written statement was submitted to the officials of the research environment and ethical considerations of the Declaration of Helsinki were observed. Necessary coordination for attending the Center for Addiction was performed with hospital officials. The objectives

of the study and the voluntary participation in the study were explained to the participants and they were assured that responses would remain confidential and they would be notified of the results. The statistical population of the study consisted of the wives of individuals who visited one of the Centers for Addiction of hospitals affiliated to Zabol University of Medical Sciences in 2011. 136 people went to this center, 75 of which were married. Finally, 59 people from among them declared their readiness to participate in this study. Based on the Roscoe principle, a sample size of more than 30 and less than 500 is proper for every research. This study used the cluster sampling method and each cluster was screened using simple random sampling.

In this study, a two-part questionnaire was administered, including demographic characteristics and types of abuse). The main tool of measurement in this study was the researcher's questionnaire which was developed with regard to studies carried out in various researches in the field and based on theories and research literature related to violence against women. The reliability of the questionnaire was calculated, on the tentative sample, using the Cronbach's Alpha coefficient (= 73%). The content validity of the questionnaire was confirmed by three professors of psychology. The first part of the questionnaire contains 13 items on the demographic characteristics of the subjects under study and the second part consists of 25 items for measuring various aspects of abuse. In this section, ten items measured the level of physical abuse, 7 questions measured mental and verbal abuse, 6 questions tested social abuse, and 2 items tested financial abuse. Items were rated on a five-point Likert scale. After collecting all the information, the data were converted into digital codes and were fed into the SPSS software, version 16. Statistical analysis was performed using the T-Test, regression analysis and the Pearson correlation coefficient. The P value was set to less than 0.05 for all tests.

3. Results

The results of our study showed that 32.2% of the participants were more than 30 years old; 32.2% were between 26 and 30; 32.9% were between 20 and 25; and 1.7% less than 20 years old. Frequency distribution of the subjects based on age showed that 45.8% of the participants less than 20 and 44% between 20 and 25 were married. Only 10.2% of the participants over 25 years old were married. Frequency distribution of the subjects based on the duration of marriage showed that 27.1% of the participants were married for less than five years and 50.9 of them were married for five to ten years. Also, 22% of the participants were married for more than ten years. 71.2% of the participants were housewives; 15.3% were employed; and five percent of them were unemployed. Frequency distribution of the subjects based on pregnancy showed that 49.2% of these women had given birth two or three times; 27.1% had given birth once; and 22% had given birth more than three times. Only 1.7% of the participants had never given birth. Frequency distribution of the subjects by residence location showed that 55.9% of the participants were living in urban areas and 44.1% were living in rural residents. 83% were living independently; 8.5% were living with family members; and 8.5% were living with relatives. The economic situation of 47.4% of the participants was fair, 37.3% poor and 15.3% well-off. The evaluation of housing conditions suggests that 69.5% of the participants had personal housing and 30.5% had leased housing. In terms of educational level, 59.3 percent of the participants had degrees below high school diploma, 30.5% had high school diploma, 5.1% were illiterate, and 5.1% had degrees above high school diploma. Frequency distribution of the subjects based on the husband's criminal record showed that 94.4% of the husbands under study had no criminal record while 5.1% had such a record. Also 93.2% of the husbands in the sample had a previous marriage while 6.8% percent did not.

40.7% of the sample population had experienced mild spousal abuse and 50.8 of them had suffered average abuse. Also, 8.5% had undergone severe domestic violence. Frequency distribution of the subjects based on the duration of marriage suggested that 16.7% of those who had a mild case of spousal abuse were married for less than five years; 54.2% were married for five to ten years and 29.2% were married for more than ten years. 40% of those who had an average case of spousal abuse were married for less than five years; 43.3% were married for five to ten years and 16.7% were married for more than ten years. Also, 80% of those who had a severe case of spousal abuse were

married for five to ten years and 20% were married for more than ten years. Fisher's exact test on the subjects showed that there is no significant relationship between spousal abuse and the duration of marriage (p=0.183).

Frequency distribution of the victims of spousal abuse in terms of employment status showed that the majority of abused women were housewives. Detailed results are shown in Table (1). According to Fisher's exact test (p=0.557), there is no significant relationship between domestic violence and employment status.

Employment/	Employed	Unemployed	Retired	Housewife	
Spousal Abuse					
Mild	Mild 5		1	17	
Average	4	1	4	21	
Severe	0	1	00	4	

Table 1 - Frequency distribution of the victims of spousal abuse by employment status

Frequency distribution of the subjects by residence location showed that equally 50 percent of the victims of mild domestic violence lived in urban areas and 50% in rural residents. 66.7% of the victims of average domestic violence lived in urban areas and 33.3% in rural residents. Also, 20% of the victims of severe domestic violence lived in urban areas and 80% in rural residents. According to Fisher's exact test (p=0.123), there is not a statistically significant relationship between domestic violence and residence location. Frequency distribution of the subjects in terms of lifestyle showed that 91.7% of those who had a mild case of spousal abuse were living independently; and equally 4.2% of individuals with average and severe cases of domestic violence were living with parents or relatives. According to Fisher's exact test (p=0. 441), there is not a statistically significant relationship between domestic violence and residence and lifestyle.

Frequency distribution of the subjects in terms of economic situation showed that most of these women had poor or fair economic conditions as shown in Table 2. According to Fisher's exact test (p=0. 052), there is not a statistically significant relationship between domestic violence and economic situation. Frequency distribution of the subjects by criminal record showed that 4.2% of those who had committed mild cases of spousal abuse had - and 95.8% did not have - a criminal record. Also, 6.7% of those who had committed average cases of spousal abuse - and 93.3% did not have - a criminal record. In addition, none of those who had committed severe cases of spousal abuse had any criminal record. According to Fisher's exact test (p=1), there is not a statistically significant relationship between domestic violence and having a criminal record.

Economic Situation/ Spousal Abuse	Well-off	Fair	Poor
Mild	4	15	5
Average	4	13	13
Severe	1	0	4

Frequency distribution of the victims of spousal abuse by previous marriage showed that 16.7% of abusive husbands who had committed mild cases of spousal abuse had a previous marriage while 83.3% did not. None of those who had committed average or severe cases of spousal abuse had a previous marriage. According to these data, Fisher's exact test (p=0.078) showed that there is not a statistically significant relationship between domestic violence and the previous marriage of the husband. Also, data on the types and severity of male violence against wives showed

that mental and verbal violence were more severe than financial abuse. Table 3 shows the relationship between the intensity and types of male violence against women in details.

Severity/ Types of Violence	Mild		Average		Severe	
Violence	Ν	%	N	%	Ν	%
Mental and verbal violence	22	37.3	12	20.3	25	42.4
Physical violence	32	54.2	16	27.1	11	18.6
Social violence	38	64.4	17	28.8	4	6.8
Financial Violence	44	74.6	12	20.3	3	5.1

Table 3 - Severity of different types of violence by men against women

Comparison of male violence against women with regard to the educational level of women showed that there are significant differences in the average male violence against wives between various levels of education in women. The LSD post hoc test showed that the average male violence against women is significantly lower in families where women had primary education than in other families. The highest rate of abuse belonged to families where women were illiterate (p=0.008). Comparison of male violence against women with regard to the educational level of the wives is demonstrated in Table 4.



Table 4 - Comparison of male violence against women with regard to the educational level of the wives

Severity of Violence/ Level of Education	Mean \pm SD	Test Results		
Education		Р	F	
Illiterate	62.46±15	0.008	3.849	
Primary	35.14±14			
Below high school diploma	47.86±17			
High school diploma	51.35±15			
Above high school diploma	42.33±15			

Comparison of male violence against women according to social status showed that there are significant differences in the average male violence against wives between different social classes. The LSD post hoc test showed that the average male violence against women is significantly higher in families of lower social class than in other families. However, there was no significant difference in the levels of domestic violence in families of middle and upper

classes (p=0.011). The results of the comparison of male violence against women according to social class have shown in Table 5.

Severity of Violence/ Social Status	Mean \pm SD	Test F	Test Results		
		Р	F		
Lower	58.27±17	0.011	4.877		
Middle	43.79±14				
Higher	50.67±19				

Table 5 -	Com	parison	of male	violence	against	women	based	on social	class
ruore 5	Com	Juiibon	or maie	violence	ugumbt	women	ouseu	on social	ciubb

4. Discussion

Spousal abuse is considered as a major social problem today as women are abused by their husbands in different ways. This study showed that levels of spousal abuse by husbands were average in most cases. There was no statistically significant relationship between any of the demographic variables and the spousal abuse variable. This makes it necessary for further investigation in this field.

Narimani &Mohammadian2005) reported a 55.5% mental domestic violence and a 28.5% physical violence in a research. Vizcarra (2001) reported a 13% prevalence of physical violence against women. Another study by Pourreza (2005) in southern Tehran, Iran, also showed that there is an average level of domestic violence against women in the form of spousal and child abuse, that is, women and girls are the main victims of domestic violence The our study showed that the severity of violence against women by male subjects under study occurred in the form of intense mental and verbal violence, mild physical and social violence and financial abuse.

A study by Javadian (2003) showed that the frequency of domestic violence is correlated with the educational level of men, that is, the higher the educational level, the lower the violence The results of a study also explored that there is a significant relationship between perceived violence by women and the educational level of the wives in two groups of husbands - addicts and non-addicts. Husbands with academic degrees used to commit milder cases of domestic violence than those illiterate or with primary/ secondary education (Jalali, & Rahbarian,2008). The results indicated significant differences between the average male violence against women and women's educational level.

The LSD post hoc test results showed that the average male violence against women is significantly less among families with women had primary education than in other families and that the highest rate of abuse belonged in families with illiterate women.

A study by Navabakhsh et al. showed that there is a significant relationship between the duration of marriage and the level of violence against women during pregnancy, which is inconsistent with the results of this study. Another

study also showed that there is no significant relationship between the residence location and the severity of violence against women, which is consistent with our findings (Navabakhsh & Ghajavand,2006).

A study conducted by Leung et al., evaluating the prevalence of domestic violence against pregnant women in China, showed that 17.59% of pregnant women who were referred to the hospital had a history of abuse by their husbands: 9.4% had been sexually abused in the last year and 15.7% in a year before (Leung et al., 1999). Another study compared the prevalence of domestic violence in the two groups: those who had attempted to terminate a pregnancy and women who were referred to the hospital for general disorders. The results showed that the prevalence of domestic violence was 27.2% in the group who had attempted abortion, with a significant difference compared with the other group (=8.2%) (Leung T et al , 2002). A similar study, about the same topic, showed that the prevalence of sexually, physically and mentally abusive behavior was 32.4% during pregnancy while 17% of these patients had experienced all three types of domestic violence - sexual physical and mental (Valladares et al. 2005). In a study carried out by A'zamzadeh about domestic violence against women in Tehran showed that the type of family relationship has a fundamental role in determining the extent of violence against women. The results also showed that there is a significant relationship between violence against women on the one hand and the role of gender socialization practices, assets and resources available to women and the types of family relationship on the other (A'zamzadeh & Dehghanfard, 2006).

Bakhtiari and Omidbakhsh, in a comparative assessment of the effects of violence against women among patients who were referred to Babol Forensic Medical Center, suggested that the prevalence of violence against women is relatively high compared with other statistics and has severe mental and physical manifestations. The study revealed that violence mostly occurred in the age group between 20 and 40, in couples married for less than 10 years and with fewer children (Bakhtiari& Omidbakhsh, 2011).

Also, Najafidolatabad et al. carried out a similar study titled "the physical manifestations and intensity of domestic violence in women who were referred to Tehran Forensic Medical Center in 2003". The results showed that 40.4% of the subjects were between 26 and 35, with an average age of 29.58. About 68.4% of the participants were housewives and 1.2% of them were workers. The intensity of physical injuries was estimated as moderate for 66.8% of the population, mild for 23.4% and relatively intense for 9.9%. This study showed that battering women can cause serious problems such as physical injuries, the impairment of the role of women as mothers or wives, mental and psychological consequences, including depression, boredom and child neglect. Therefore, with regard to the complications, it is necessary to prevent this social problem by implementing programs for educating couples to establish healthy relationships with each other and with their family members (Najafidolatabad et al, 2003).

In another study, the main factors underlying family violence were investigated from five different aspects: moral and educational problems (individual parenting characteristics), economic problems (79.2%), the husband's family interference (54.2%), sexual problems (13.3%), and cultural and class differences (0.10%). Some women considered more than one factor as underlying family violence. Individual and family factors that were considered as predisposing or intervening factors in this study included the wife's age, the wife's education, and the husband's

education (Azizian et al.,2003). According to the present research, awareness of the importance of violent behaviors and their complications are crucial for women since this phenomenon is a major problem in Iran. It is also necessary for public health officials to conduct screening programs and initiate support and counseling centers to tackle this issue.

5. Research limitations

This study featured a small sample size and was carried out only in one center for addiction. There is also the possibility that the respondents did not answer the questionnaire in all honesty. In addition, individual differences and perceptions of participants under study might have caused disturbances in the results.

6. Acknowledgment

Here, we appreciate and thankful of all the participants of this research whose participation made this study possible to be conducted.

7. References

- [1] Azizian, Roya; Sarukhani, Bagher & Mahmoodi, Mahmood,(2003). ""Investigating the causes of violence against women who were referred to Tehran Forensic Medical Center in 2003." Journal of the School of Public Health and Institute of Health Research, 2 (3 (Consecutive 7): pp.37-4.
- [2] A'zamzadeh, Mansooreh & Dehghanfard, Razieh, (2006) "Violence against women in Tehran: the role of gender socialization, resources available to women and family relationship." Alzahra University. Journal of Women's Research, Spring-Summer 2006 (1-2) 4; (Consecutive 14): 159-179.
- [3] Alsaker K, Moen BE, Nortvedt MW, Baste V. (2006). "Low health-related quality of life among abused women " Qual Life Res. 15(6):959-65
- [4] Aghabakhshi, Habib (1997) A social work approach to drug effects on the family system. Tehran: General Departmen Alsaker K, Moen BE, Nortvedt MW, Baste V. (2006). "Low health-related quality of life among abused women" Qual Life Res. 15(6):959.
- [5] Bakhtiari, Afsaneh & Omidbakhsh, Nadia (2011) "a comparative assessment of the grounds and effects of violence against women among patients who were referred to Babol Forensic Medical Center" Behbood Journal, 7, No. 4 (Consecutive 19), P: 28-36.
- [6] Bennett A. & Williams, O.J. (2003), Substance Abuse and Men who batter, Issues in Theory and Practice. Journal of Violence against Women, 9(5).
- [7] Briere, J. and Jordan, C.E. (2004)."Violence Against Women: Outcome Complexity and Implications for Assessment and Treatment" J Interpers Violence, 19(11): 1252-1276.

- [8] D. Loxton, M. Schofield, R. Hussain, and G. Mishra (2006)."History of Domestic Violence and Physical Health in Midlife" Violence Against Women, 12(8): 715 – 731.
- [9] Esmaeeli, Iraj; Sefatian, Saeed; Motevalli Khameneh, Morteza & Mohseni, Lotfollah (2004) A study of drug abuse among prison inmates with academic education in Tehran prisons. Cultural, Social, and Educational Journal of Correction and Rehabilitation. 3rd year, No. 29 (Consecutive. 114). P. 52.
- [10] Jalali, Dariush & Rahbarian, Jahanbaksh; (2008). Domestic Violence against the Wives of Addicts. Quarterly Journal of Social Welfare, 6th Year, No. 22, pp. 149-171.
- [11] Javadian, Reza (2003). Investigating the phenomenon of violence in families with addicted fathers, Proceedings of the First International Conference on Scientific Explanation of the Victims of Violence, Islamic Azad University of Khurasgan.
- [12] Kramek J, Grzymala-Krzyzostaniak A, Celewicz Z, Ronin-Walknowska E. (2001). "Violence towards pregnant women" Ginekol Pol. 20: 72(12):1042-8.
- [13] Leung TW, Leung WC, Chan PL, Ho PC (2002) "A comparison of the prevalence of domestic violence between patients seeking termination of pregnancy and other general gynecology patients." Int J Gynaecol Obstet. 2002 Apr; 77(1):47-54.
- [14] Leung WC, Leung TW, Lam YY, Ho PC. (1999) "The prevalence of domestic violence against pregnant women in a Chinese community" Int J Gynaecol Obstet.; 66 (1): 23-30.
- [15] Lych, Tara (2000) "Men and Women Together but equal?" UNFPA Magazine. Vol. 27, No. 2, p 20.
- [16] Mazza D, Dennerstein L, Ryan V. (1996)" Physical, sexual and emotional violence against women: a general practice-based prevalence study "Med J Aust. 1; 164(1):14-7.
- [17] Najafidolatabad, Shahla; Hosseinzadeh, Maryam; Khatami Zanoozian, Azita; Fathi, Sohrab; Khatami Zanoozian, Arezoo, Alavimajd, Hamid.(2007). "The physical manifestations and intensity of domestic violence in women who were referred to Tehran Forensic Medical Center in 2003". Bahar Journal of Legal Medicine, No. 13 (1 (Consecutive 45): pp. 30-32.
- [18] Narimani, Mohammad; Mohammadian, Hamidreza. (2005). Evaluating male violence against women, Journal of Mental Health. Mashhad University of Medical Sciences. 7(285), pp: 107-113.
- [19] Navabakhsh, Mehrdad; Ghajavand, Kazem (2006) Investigating the factors affecting domestic violence by addict husbands. Journal of Substance Abuse. 2nd year. No. 8, pp. 5-31.
- [20] Poureslami, Mohammad; Sarmast, Hamideh & Moosavianpour (2011). Addiction and Its Questions, Behvarz Journal, 12th year, 1st issue, pp. 22-25.
- [21] Pourreza, Ahmad. (2005). Violence against women and related factors, Journal of Mental Health, Mashhad University of Medical Sciences, 7(27), P: 66-67.
- [22] Sadler, AG, Booth BM, Nielson D, Doebbeling BN. (2000)."Health-related consequences of physical and sexual violence: women in the military" Obstet Gynecol.; 96(3):473-80.
- [23] Shams Esfandabad, Hassan & Emamipour, Suzan. (2003) Assessing the prevalence of spousal abuse and its influencing factors. Journal of Women's Research, Volume 1, No. 5, pp. 59-82.
- [24] Stewart, F. W. (2003), The Occurrence of Partner Physical Aggression on Days of Alcohol Consumption: A Longitudinal Diary Study, Journal of Consulting and Clinical Psychology, 71(1).

- [25] Swiss S, Jennings PJ, Aryee GV, Brown GH, Jappah-Samukai RM, Kamara MS, Schaack RD, Turay-Kanneh RS. (1998)."Violence against women during the Liberian civil conflict" JAMA. 25; 279 (8):625-9.
- [26] Valladares E, Pena R, Persson LA, Hogberg U. (2005) "Violence against pregnant women: prevalence and characteristics. A population-based study in Nicaragua" BJOG; 112(9):1243-8.
- [27] Vizcarra, M, Cortes J. (2001). Violence and associated factors. Rev Med chil. 129(12), 1405-1412.

ew Century Publishing Group