



# Intimate Partner Violence and Risk Factors Associated with it amongst Married Women in Belagavi: A Cross-sectional Study

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## ABSTRACT

**Background:** Intimate partner violence (IPV) has been emerged as an important social problem in India. Considerable number of women experience violence in their lifetime resulting in long and short-term physical and psychological trauma for many. Screening at early stages of violence can prevent many mortality and morbidity among IPV sufferers.

**Objective:** To study the prevalence and potential risk factors of Intimate partner violence among married women in an urban area.

**Methods:** A cross sectional study was conducted from November 2015 to June 2016 amongst 214 married women attending the outpatient department of three urban health centres by interviewing them using WHO multi-country study questionnaire.

**Results:** The Overall prevalence of Intimate partner violence was 39.25% of which 39.2% of women experienced physical violence, 14% of women had experienced Sexual violence and 19.1% of the women had experienced controlling behaviour by their partners.

**Key words:** Intimate partner violence, urban area, married women, sexual violence, physical violence

## INTRODUCTION

Violence against women has been recognized globally as a public health problem which violates human rights and incurs substantial social, economic and health costs. In recent years violence against women has emerged as an important social problem in India. Exposure to intimate partner violence (IPV) among women has been associated with increased morbidity and is documented as the third leading cause of mortality among women of reproductive age.<sup>1,2</sup> Intimate partner violence (IPV) refers to acts of physical, sexual or emotional abuse by a current or former intimate partner, whether cohabiting or not.<sup>3</sup> Domestic violence is accepted across many layers of society and occurs among all socio-economic groups in all countries.<sup>4</sup> In India, the problem has been highlighted after legislation against domestic violence in 2005, popularly known as the Protection of Women from Domestic violence Act.<sup>5</sup> But still the prevalence rate is quite high because attitudes are deeply entrenched.

According to a World Health Organization (WHO) survey of ten countries, the lifetime prevalence of physical IPV varies from 15% to 71%.<sup>6-11</sup> Even though the prevalence of IPV is high the sufferers' women do not always seek health care immediately following an IPV incident. IPV often has serious long-term consequences not only for the individuals involved, but also for their families, communities and society. However limited studies have been done in India regarding IPV even though the prevalence rate is high.

Thus the present study was conducted to study the prevalence and potential risk factors of Intimate partner violence among married women in urban areas of Belagavi (Ashoknagar, Ramnanar and Rukmininagar).

## MATERIALS AND METHODS

A cross-sectional study was carried out from Nov 2015 to June 2016 amongst 214 married women at-

tending the outpatient department of three urban health centres i.e. Ashoknagar, Ramnagar and Rukmininagar which comes under the field practice area of Department of Community Medicine, KLE University's Jawaharlal Nehru Medical College, Belagavi, Karnataka. Sample size was calculated using the prevalence rate (56%) from the previous study done in India.<sup>5</sup> Taking absolute error as 7%, sample was calculated using formula:  $4pq/d^2$  where  $d=7\%$ ,  $p=56\%$  and  $q=100-56=44\%$ . Thus the sample size calculated was 201.

Proportionate sampling is done so that equal number of study participants was included in the study from three different urban areas. During data collection we got extra 13 subjects which are added to the sample and final analysis was done for 214 subjects. Data was collected using pre-tested and pre-designed questionnaire after taking informed consent from the study participants. The questionnaire includes socio demographic data and WHO multi-country study questionnaire<sup>11-13</sup> to assess the prevalence of different types of IPV. All married women who were in reproductive age groups, permanent residents of study area and who consented to participate were included in the study. The participants were interviewed in a separate room to make them comfortable to answer the questions. Assurance about the anonymity and not disclosing the details of interview to husband or any family member was ensured. Ethical clearance was obtained from institutional ethical committee.

**RESULTS**

In the present study, out of 214 study participants, the age group of the married women ranged between 20-39 years. Among the total, (42.0%) of them belonged to 25 -29 years, around 44.4% of the women studied up to primary school, 25.3% high school ,10.7% studied up-to college and 19.6% were illiterates. Almost 39.3% of the married women belonged to Class II socio economic status according to modified B.G. Prasad classification.<sup>12</sup> Among the study participants 64% of them had arranged marriage, 23.4% had love marriage and 12.6% of them married because of pressure by parents /relatives. The overall prevalence of Intimate partner violence (IPV) was 39.25% (As shown in Table 1).

It was seen from Table 2 and 3, that among the socio demographic variables examined, religion, husbands' occupation, type of family, socioeconomic status, duration of married life, number of children and type of marriage were found to be significantly associated with the prevalence of intimate partner violence. IPV was more prevalent among the participants who belonged to Muslim religion, whose husbands' were labourer, who be-

longed to nuclear family, women who belonged to Class VI and in women with duration of married life <5years which was statistically significant. In this study, the prevalence of IPV was more in case of love marriages and less in women with more children. As the number of children increased the prevalence of intimate partner violence was decreased.

**Table 1: Prevalence of different types of violence (n=84)**

| Category & Components   | No. (%)   |
|---|-----------|
| <b>Physical violence:</b>                                     | 46 (21.5) |
| Moderate physical -Was slapped or had something thrown on her | 27 (12.6) |
| violence: -Was pushed or shoved                               | 19 (8.9)  |
| <b>Severe physical Violence:</b>                              | 38 (18.2) |
| was hit with fist or something else that could hurt           | 30 (14.5) |
| was kicked, dragged or beaten up                              | 08 (3.7)  |
| <b>Sexual violence</b>  | 30 (14.0) |
| Was physically forced to have sexual intercourse              | 18 (8.4)  |
| had sexual intercourse when she did not want it               | 12 (5.6)  |
| <b>Controlling behaviour</b>                                  | 54 (19.1) |
| Tried to restrict contact with family of her birth            | 20 (9.3)  |
| Ignored her and treated indifferently                         | 04 (1.9)  |
| got angry if she spoke to another man                         | 12 (5.6)  |
| was often suspicious that she was unfaithful                  | 05 (2.3)  |
| Multiple answers  | 13 (6.1)  |

**Table 2: Distribution of Social demographic factors associated with intimate partner violence:**

| Socio-demo-graphic factors   | Intimate partner violence |           | P value |
|------------------------------|---------------------------|-----------|---------|
|                              | Yes (%)                   | No (%)    |         |
| <b>Religion</b>              |                           |           |         |
| Hindu                        | 25 (29.4)                 | 66 (51.4) | 0.001   |
| Muslim                       | 51 (60.0)                 | 44 (34.1) |         |
| Christian                    | 0 (0)                     | 4 (3.1)   |         |
| Sikh                         | 9 (10.6)                  | 15 (11.4) |         |
| <b>Husbands' Occupation</b>  |                           |           |         |
| Business                     | 35 (41.2)                 | 63 (48.9) | 0.002   |
| Government official          | 10 (11.7)                 | 25 (19.4) |         |
| Private Job                  | 13 (15.4)                 | 27 (20.9) |         |
| Labourer                     | 27 (31.7)                 | 14 (10.8) |         |
| <b>Type of family</b>        |                           |           |         |
| Nuclear                      | 58 (68.2)                 | 65 (50.3) | <0.001  |
| Joint                        | 27 (31.8)                 | 64 (49.7) |         |
| <b>Socio Economic Status</b> |                           |           |         |
| Class I                      | 12 (14.2)                 | 5 (3.8)   | <0.001  |
| Class II                     | 16 (18.8)                 | 68 (52.8) |         |
| Class III                    | 28 (32.9)                 | 41 (31.8) |         |
| Class IV                     | 29 (34.1)                 | 15 (11.6) |         |

**Table 3: Distribution of study participants based on other potential risk factors**

| Potential factors               | Intimate partner violence |            | Total (%) | P-value |
|---------------------------------|---------------------------|------------|-----------|---------|
|                                 | Yes (%)                   | No (%)     |           |         |
| <b>Duration of married life</b> |                           |            |           |         |
| < 5 years                       | 64 (70.3)                 | 27 (29.7)  | 91 (100)  | 0.001   |
| ≥ 5 years                       | 21 (17.1)                 | 102 (82.9) | 123 (100) |         |
| <b>Number of children</b>       |                           |            |           |         |
| Nil                             | 14 (63.6)                 | 8 (36.4)   | 22 (100)  | 0.001   |
| One                             | 27 (58.6)                 | 19 (41.4)  | 46 (100)  |         |
| Two                             | 35 (49.2)                 | 36 (50.8)  | 71 (100)  |         |
| Three                           | 9 (16.4)                  | 46 (83.6)  | 55 (100)  |         |
| Four and above                  | 0 (0)                     | 20 (100)   | 20 (100)  |         |
| <b>Type of marriage</b>         |                           |            |           |         |
| Love marriage                   | 36 (72.0)                 | 14 (28.0)  | 50 (100)  | 0.001   |
| Arranged marriage               | 25 (18.2)                 | 112 (81.8) | 137 (100) |         |
| Forced by parents/relatives     | 24 (88.8)                 | 3 (11.2)   | 27 (100)  |         |

## DISCUSSION

Intimate partner violence, a problem that affects the lives of women has been found to recur throughout the lifecycle of women and has intensive repercussions. In our study, the age group of the married women ranged between 20-39 years and most (42.0%) of them belonged to 25 -29 years and around 44.4% of the women had studied up-to primary school. In a study done in Gujarat<sup>6</sup> the average age of the participants was 35.2 years. More than one third of the participants had secondary education. Whereas another study done in rural Maharashtra<sup>1</sup> showed that the women age ranged between 18-60 years with mean age was 30 years and 30.4% of the women had no formal education. Among the study participants 64% of them had arranged marriage, 23.4% had love marriage and 12.6% of them married because of pressure by parents /relatives. In study done in Gujarat<sup>6</sup> arranged marriage was common among the participants (85%). The average number of children was 1.9 (SD = 1.1).

The overall prevalence of Intimate partner violence was 39.25% of which 39.2% of women experienced physical violence, 14% of women had experienced sexual violence. Whereas, in a study done in rural Nepal<sup>7</sup> showed that more than half the women (51.9%) reported having experienced some form of violence in their lifetime. One-fourth reported physical violence, nearly half reported sexual violence. Study done in East India<sup>5</sup> showed that 56% of the women reported some form of violence against them which was almost similar to our study. Another study done in Rwanda<sup>8</sup> showed that 18.8% of the women reported physical abuse, 17.4% women reported sexual abuse and 1.5% women reported psychological abuse. The prevalence was quite lower in the present study compared to other studies cited above this may be because our study is done in urban areas and as the study areas comes under the urban health training

centres, most of our postgraduates frequently visited these areas and the health education given might have affected the outcome. Sexual violence is not only a violation of human rights, but also a public health problem, with intimate partner violence and sexual violence among the most pervasive forms of violence against women. Worldwide, one in three women experience either physical or sexual partner violence or non-partner sexual violence.<sup>9</sup>

In the present study, there was significant association between religion, Husbands' occupation, type of family, socioeconomic status, duration of married life, number of children and type of marriage which shows that in early years of married life the prevalence is more and in case of nuclear family's the prevalence is more this may be because that in nuclear family has no any elderly person in the family to guide the couples. Furthermore, women are expected to play a subordinate, submissive and more conservative gender role in marital relationships especially in developing countries like India. Moreover, low status and low decision-making power of women, lack of access to resources, and information and shame in exposing certain abuses can put women at further risk of experiencing violence.<sup>10</sup>

## CONCLUSION

The overall prevalence of intimate partner violence was 39.25% of which 39.2% of women experienced Physical Violence and 14% of women had experienced Sexual violence. The magnitude of Intimate partner violence was quite high among Indian women and suggests that primary and secondary prevention of IPV is urgently required. Multi-pronged strategy should be implemented that focus on changing IPV norms, conflict-management skills, and enhance the help-seeking behaviour of victims. Empowerment of women through educa-

tional and employment opportunities can help to break free from abusive relationship. More elaborate study with larger sample size depicting the differences both in rural and urban areas can be done.

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