

INTIMATE-PARTNER VIOLENCE AGAINST WIVES IN MOSUL

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ABSTRACT

Background: Intimate-partner physical violence is the intentional use of physical force by husbands with potential to cause death, disability, injury or harm to their wives. It usually results in considerable health consequences for both abused women as well as children. **Aim:** The study's aim is to estimate the prevalence of intimate-partner physical violence against wives in Mosul and determine the associated factors. **Methods:** The current study adopted a health-institutional cross-sectional study design and a multi-stage cluster sampling technique. The study had interviewed 1302 wives in child-bearing age during their attendance to 20 primary health care centers distributed in Mosul District over approximately ten months duration. They were inquired about their current exposure to physical abuse by their husbands. Chi-square test was applied to test the significance of association between prevalence of intimate-partner physical violence and the studied socio-demographic variables. Estimation of such association was appraised by calculation of odds ratio. **Results:** The prevalence of physical intimate-partner violence in Mosul was 241 per 1000 wives. It was higher in peri-urban and rural localities (28.1%) than urban families ($P=0.001$). It was significantly affected with some socio-demographic characters of wives and husbands as well as their marriages' constituents. **Conclusions:** Almost one every four women in Mosul was a victim of abusive behavior of her husband. However, comparing the estimated prevalence among different countries was difficult because of varying definitions of the term, cultural taboos and the normalization of violence in many areas, all leading to lack of reliable data.

KEYWORDS: Violence, partner, mosul, health. Intimate-Partner Violence Against Wives in Mosul District.

INTRODUCTION

Intimate-partner violence (IPV) continues to be a global epidemic.^[1] It is now widely recognized as a serious human-rights' abuse as well as an important public health problem that concerns all sectors.^[2] It is present in every country, culture, class, education, income, ethnicity and age. No society can claim to be free of such violence, the only variation is in the patterns and trends that exist in countries and regions.^[3] It is usually carried out by males who have been in positions of trust and intimacy and powers, as spouse, ex-spouse, current or former boyfriend. However, in the minority, some men are abused by female partners.^[3]

It had been recognized by The United Nations Declaration on the Elimination of Violence against Women in 1993 that IPV against wives is one of the crucial social mechanisms by which women are forced

into a subordinate position compared with men.^[1,4] So, WHO has started to change the terminology into 'gender-based violence' which imply that there is a theory explaining violence rather than just using descriptive terms.^[5] The term expands to include all forms of abuse: physical, sexual, psychological/emotional and threat of physical or sexual violence.^[6] Physical violence is defined as the intentional use of physical force with the potential to cause death, disability, injury or harm such as slapping, beating, arm twisting, stabbing, strangling, burning, choking, kicking, threats with an object or weapon, and murder.^[6]

The physical IPV usually results in considerable health consequences for abused women; including: poorer general health, injuries, psychological disorders and behavior symptoms, gynecological problems as well as obstetric complications.^[7-9] Therefore, IPV is linked with maternal mortality. Though, unfortunately, neither the

definition of maternal death nor the formula of maternal mortality ratio's estimation includes deaths from IPV. This fact makes impossible to collect information and determine accurately the contribution of such issue to maternal mortality.^[10]

Along with being low birth weight (since abused women are four times more likely to give low birth weight infants), children of abused mothers can hurt themselves, either by trying to intervene to protect their mothers or being physically abused by the perpetrators. A summary of the effects on children charted sleep disturbances, temper tantrums, disruptive behavior and an inability to concentrate. Aggression, anxiety and feelings of powerlessness were also noted.^[7-10]

The aim of the present study is to estimate the prevalence of IPV against wives in Mosul District and determine the associated factors.

METHODS AND SUBJECTS

The current study was conducted in Mosul District after obtaining a formal administrative agreement from the Scientific and Ethical Committee at Nineveh Health Directorate as well as verbal consents of all the participants was attained.

By adopting a health-institutional cross-sectional study design, 1302 married ladies in child-bearing age were interviewed over approximately ten months (from first of February to the end of November 2011) during their attendance to the selected primary health care centers (PHCCs). They were inquired to tell if they were being battered by their intimate-partners (spouse) at the current time of interview.

Sampling Technique

A multi-stage sampling method was applied. The first stage was division of Mosul District by Tigris River into Right and Left Banks. Each Riverside is further divided transversely by Nineveh Street and its extension. Such, Mosul District can be drawn as four units: north east, south east, north west and south west. Then after, each unit was stratified into three clusters according to its location to downtown (urban, peri-urban and rural areas). Five PHCCs from each cluster were included on the base of its location and rank of population size of catchment area i.e. non-random selection. The studied participants were chosen consecutively.

The required sample size was estimated according to the equation settled by Denial,^[11] with 95% confidence interval and 0.03 desired level of precision. Distribution of sample was weighted taking in consideration the population size and the proportion of married women in child-bearing age in each catchment area.^[12]

Validity of the adopted questionnaire was assessed by Angoff approach,^[13] which judged its coverage, clarity

and reality as 83.8%. While its reliability was estimated by a pilot study as 87.2%.

Statistical Analysis and Outcome Measures

The basis of the present study was estimation of IPV prevalence i.e. occurrence of the intentional event within the studied sample. The significance of association of some socio-demographic variables with the IPV prevalence was examined by χ^2 test through judgment on the calculated p-value (it was considered as significant when $p \leq 0.05$ throughout the analysis). While estimation of such association was appraised by odds ratio assessment. In both test, referral group (non-exposed group) in the equation was chosen following a reasonable ideal hypothesis.

RESULTS

The current study interviewed 1302 wives in child bearing age. Their mean age was 30.1 years. It found that 314 wives were exposing to physical violence by their intimate-partners (husband) at time of data collection. Hence, the prevalence of physical IPV in Mosul was 241 per 1000 wives. It was significantly higher in peri-urban and rural localities than in urban families ($p=0.001$).

This event was recorded by all age groups with no significant variation. However, maternal illiteracy had a just significant role in augmenting IPV occurrence (29.6%) when compared to education beyond elementary ($p=0.05$). Working wives experienced IPV less frequently (15.3%) than did housewives (24.8%) ($p=0.034$).

The highest prevalence of IPV (34.5%) was recorded by wives of unemployed spouses ($p=0.04$). Husbands' employment, even it is simple, seemed to lighten the their abusive behaviors ($p=0.02$). (Table 1).

Table 1: Association of socio-demographic data of studied wives with prevalence of IPV.

Socio-Demographic Data		Battered wives (n= 314)	Not Battered wives (n= 988)	Total	P* value	OR	C.I
		No. (%)	No. (%)				
Maternal Age	< 20 Years	16 (19.5)	66 (80.5)	82	0.16	0.7	0.4-1.2
	20-35 Years	191 (23.2)	632 (76.8)	823	0.15	0.8	0.6-1.1
	> 35 Years	107 (25.2)	290 (74.8)	425	Ref.		
Maternal Education	Illiterate	188 (29.6)	447 (70.4)	635	0.05	1.4	1.0-2.0
	Elementary	76 (17.0)	371 (83.0)	447	0.08	0.7	0.5-1.1
	Higher	50 (22.7)	170 (77.3)	220	Ref.		
Maternal Occupation	Housewives	299 (24.8)	905 (75.2)	1204	0.034	1.8	1.0-3.2
	Working	15 (15.3)	83 (84.7)	98			
Social class	Unemployed	41 (34.5)	78 (65.5)	119	0.04	1.6	1. -2.4
	4 th & 5 th class	113 (22.2)	396 (77.8)	509	0.02	0.8	0.6-1.0
	3 rd class	160 (25.2)	5 (74.8)		Ref.		
Residence	Urban	140 (20.5)	542 (79.5)	682	0.001	0.7	0.5-0.9
	Peri-urban and rural	174 (28.1)	446 (71.9)	620			

*chi square was used

** Wives belonged to 1st or 2nd class were excluded from statistical analysis since none of them (n=39) experienced physical IPV.

The main socio-demographic characters of husbands are displayed in Table 2. Their mean age was 36 years old. Physical IPV was most frequently perpetrated by husbands between 26-40 years old (p=0.04) since 26.7% of them practiced violent acts with their wives opposed

to 21.4% of older group. Furthermore, husbands' illiteracy significantly elevated prevalence of IPV to 31.2% when compared to education beyond elementary level (p=0.008).

Table 2: Association of socio-demographic data of husbands with prevalence of IPV.

Husbands' Characteristics		Battered wives (n= 314)	Not Battered wives (n= 988)	Total	P* value	OR	C.I
		No. (%)	No. (%)				
Paternal Age	≤ 25	24 (17.8)	111(82.2)	135	0.4	0.8	0.5-1.3
	26-40	203 (26.7)	557 (73.3)	760	0.04	1.3	1.0-1.8
	> 40	87 (21.4)	320 (78.6)	407	Ref.		
Paternal Education	Illiterate	102 (31.2)	270 (72.6)	372	0.008	1.6	1.1-2.2
	Elementary	110 (23.6)	356 (76.4)	466	0.1	1.3	0.9-1.7
	Higher	88 (19.0)	362 (81.0)	464	Ref.		

*chi square was used

Table 3 shows general constitutions of the studied wives' marriage. Their mean age at marriage was 18.5 years old (the median was 18years). While, the mean age of their husbands at marriage was 24.7 years (the median was 24 years).

The same table showed that IPV occurred more frequently (26.5%) to wives who had get married during their teenage (p=0.009) and to wives whose husbands were younger than thirty years old (25.6%) (p=0.003). The least prevalence of IPV was recorded by wives who were 1-10 years younger than their spouses (21.9%) in contrast to 30.6% of families where both partners were of same age (p=0.033).

Low parity seemed to act against physical violence (p<0.001) as one third (32.2%) of grandmltiparus wives were victims to IPV compared to 20.9% of wives of

lower parity. Neither consanguinity of partners nor family structure had a role in averting violence.

Table 3: Association of Marriage's constituents of studied wives with prevalence of IPV.

Marriage's Constituents		Battered wives (n= 314)	Not Battered wives (n= 988)	Total	P* value	OR	C.I
		No. (%)	No. (%)				
Maternal Age at Marriage	< 20	215 (26.5)	596 (73.5)	811	0.009	1.4	1.1-1.9
	≥ 20	99 (20.2)	392 (79.8)	491			
Paternal Age at Marriage	< 30	281 (25.6)	815 (74.4)	1096	0.003	1.8	1.2-2.2
	≥ 30	33 (16.0)	173 (84.0)	206			
Age Gap	≤ 0	37 (30.6)	84 (69.4)	121	Ref.		
	1-10	216 (21.9)	769 (78.1)	985	0.033	0.6	0.4-0.9
	> 10	61 (31.1)	135 (68.9)	196	0.9	1.0	0.6-1.7
Family Structure	Nuclear	140 (25.6)	401 (74.4)	545	0.2	1.2	1.9-1.5
	Extended	174 (23.0)	587 (77.0)	757			
Consanguineous Marriage	Absent	109 (24.2)	341 (75.8)	450	0.9	1.0	0.8-1.3
	Present	205 (24.1)	647 (75.9)	852			
Parity	< 5	195 (20.9)	738 (79.1)	933	<0.001	0.5	0.4-0.7
	≥ 5	119 (32.2)	250 (67.8)	369			

*chi square was used

DISCUSSION

Since the World Conference on Human Rights, held in Vienna in 1993, and the Declaration on the Elimination of Violence against Women in the same year, civil society and governments have approved that violence against women is a public policy and human rights concern.^[14] In that view, the Government of Iraq has committed to achieve third Millennium Development Goal (MDG 3: Promote Gender Equality and Empower Women) and it is taking steps to address violence against women including drafting a Domestic Violence Bill as well as establishing an inter-ministerial to address issues of violence against women. Despite that, domestic violence continues to be frighteningly common and accepted as "normal" within too many Iraqi cultures.^[15]

The present study found that almost one out of four wives in Mosul District (24.1%) was currently being beaten by her husband. It was about eight points higher in peri-urban and rural settings than in urban areas ($p=0.001$). Such, the prevalence of wives' abuse has elevated since 2006 when the Iraq Family Health Survey (IFHS) which was a nationally representative survey of 9,345 households and 14,675 women of reproductive age and covered all Iraqi governorates, reported that one in five women in Iraq (21.2%) aged 15-49 had suffered physical violence at hands of the husband (22.7% in south and central regions and 10.9% in Kurdistan). Fourteen percent were pregnant at time of exposure to violence. Moreover, 59% of women aged 15-49 believed that it is acceptable for a man to beat his wife under certain circumstances.^[16]

The result of 2006 survey was renowned by the Inter-Agency Information and Analysis Unit (IAU) in the United Nations Country Team-Iraq in November 2010. It stated that 21% of Iraqi wives were battered by their husbands. This figure was higher in rural areas (70%) and among women with no formal education (71%).^[15]

Although this finding may point that the prevalence of physical IPV is upsettingly moving up, the raise may be attributed to the difficulty in tackling the studied issue in our culture. Collection of alike data is challenging due to a culture of silence that surrounds the topic.^[17] Households' survey which is known to be superior to health institutional based study may carry risk of further violence by asking about abuse, especially when the perpetrator or his parents are present at the time of interview.^[18] The study under hand preferred to interview PHCCs' attendants to inquire about IPV in order to sidestep such conflicts. In addition, efforts were made to ascertain rigorous ethical and safety standards related to the investigation of such violence.^[19]

There was no age empowered wives, as indicated by the current study, against IPV. However, probability of wives' battering decreased when women pushed back their marriage beyond 20 years of age ($p=0.009$). As well, it can be supplementary lowered if men delayed their nuptials till completing 30 years old ($p=0.003$). Furthermore, violent deeds of husbands were less frequently perpetrated to wives less than ten years younger ($p=0.033$).

Actually, age at marriage might act as a confounding factor that faded away the authentic scenario. Advanced schooling which is the most frequent motive for fairly delayed marriage probably intermediated the association of physical IPV with age at marriage. Partners' illiteracy, especially of husband, participated such deeply-rooted aggressive behaviors ($p=0.05$ and $p=0.008$ for wives' and husbands' illiteracy respectively).

However, the precise nature of the interaction between education and marriage is not always evident; are girls withdrawn from school to marry? or is lack of schooling for girls part of the pattern of traditional expectations and roles? Anyhow, early marriage is recognized as one of

the reasons for girls' exclusion from school, especially in cultural settings where girls are raised for a lifetime confined to household occupations. Many parents still believe that investment in a girl's education is wasted when she is simply going to be married and work in another household. The costs of the investment in education reinforce the impetus towards the girl's withdrawal from school.^[1]

Along with moving up couples' age at marriage, reasonably education initiated opportunities for both partners to catch high-income job and so step up on the social hierarchy and consequently lessen the abusive activities of married men. The study on hand indicated that no physical violence was recorded by wives of high social classes (1st and 2nd) while unemployed husbands were more violent ($p=0.04$). Beside, working wives were more resistant to abuse ($p=0.034$). Economic independence with lack of monetary resources fortify women's vulnerability for battering and their difficulty in extricating themselves from a violent relationship.⁽¹⁾ Moreover, such feeble status of abused wives disabled them from controlling their reproduction and lessening their family size ($p<0.001$).

In Arab region, there is a lack of official data on the prevalence of IPV mainly due to the sensitive nature of the subject. The only available source of statistics are the existing Demographic and Health Survey (DHS) in 2005.^[20]

In the West Bank and Gaza strip of Palestine, the survey used systematic random samples of 2410 and showed that about 52% of participating women experienced one or more acts of physical violence by their husbands at least once during the 12 months prior to the study. While in Syria, DHS studied 411 married women who were selected randomly from primary care centers and found that 23% were currently physically abused. In Jeddah, Saudi Arabia, the survey indicated that 30% of 230 interviewed men were abusive with their wives. The 2005 DHS in Egypt was conducted among a national random sample of 14779 women and found that one out of three (36%) women had been beaten at least once since marriage. Of this group about 45% had been beaten at least once over the previous year and one-third of those were abused during pregnancy. In Sudan, there were 20% of women reported as victims of physical violence.^[3,20-21]

Obviously, there is a considerable variation in the prevalence of IPV from country to country. Lack of consistency in study methods, study design, and presentation of results makes it difficult to compare results even between studies performed in the same country.

Since the end of the twentieth century, the WHO Multi-Country in-depth Study on Domestic Violence Against Women and Women's Health.^[22] provided a

comprehensive picture of the patterns of IPV. Over 24 000 women between the ages of 15 and 49 were interviewed in rural and urban areas in low- and middle-income settings in 10 countries (Bangladesh, Brazil, Ethiopia, Serbia and Montenegro, Thailand, United Republic of Tanzania, Japan, Namibia and Peru). It indicated that physical violence differ in prevalence both between and within different countries. The rates of ever experience of physical violence at some point in life by an intimate partner ranged from 12.9% in Japan to 61% in Peru Province and there was 3.2% of Japanese wives and 29.0% of wives living in Ethiopia Province were currently abused. Japan and Samoa were the only countries from the Western Pacific region included in the ten-country WHO study. The former (Japan) was chosen for its position on the low end of the violence prevalence scale and the later (Samoa) for its position toward the top of the scale, so neither country was representative for the region as a whole. However in Samoa the whole country was surveyed, so a comprehensive picture of various form of violence against women can be constructed.

CONCLUSION

Almost one every four women in Mosul was victim of abusive behavior of her husband. However, comparing prevalence rates of different countries was difficult because of varying definitions of the term "IPV", cultural taboos and the normalization of violence in many areas, all leading to lack of reliable data.

RECOMMENDATION

Since IPV is a complex problem, it requires multi-layered strategy (at the level of the family, local community and civil society, media, academia and the Nation) in order to address the structural causes of violence against women while providing immediate services to ensures sustainability of victim-survivors.

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