



Original Research Article

## Utility of Psychosocial Physical Economical Sexual (PPES) Scales to Detect Severity of Various Types of Violence

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### ABSTRACT

Domestic violence is a pattern of abuse, the behaviour that restricts the activity and independence of women at home. It includes physical, sexual and psychological attacks, and economic control. According to 2002 study in India, 45% of Women are slapped, kicked or beaten by their husbands. About 74.8% of the women who have reported violence have attempted to commit suicide. Many studies have been undertaken, especially during 1980s-1990s. But most of the studies have suffered from underreporting of domestic violence. Thus this research was done to find out prevalence of domestic violence in western Maharashtra and to construct a sensitive scale to detect violence and its severity. Hence preventive and control measures can be taken at the earliest.

**Material and Methods:** This cross-sectional study was conducted in Rural and urban field practice areas of Krishna Institute of Medical Sciences, Karad. Western Maharashtra, India.

All married women (n=455) belonging to age group 15-49 years residing in the urban and rural field practice area were included in the study to find out the lifetime prevalence of domestic violence.

**Statistical analysis:** SPSS Version 16 was used to calculate proportion, p value, Odds Ratio, and multivariate logistic regression.

**Result:** Total 455 respondents (68.7% urban & 59.3% rural area) were interviewed, among them 64.4% had experience of one or the other form of violence which was apparently more in urban (68.7%) than rural area (59.3%). Out of all four types of violence, psychosocial, economical & physical violence are highly prevalent in both the areas but higher in urban area. Sexual violence is relatively less in both urban and rural areas. The PPES (T) scale & its component scales proved highly sensitive method to detect various types of violence against women at home with its severity.

**Key word:** Violence against women, domestic violence, abuse scale.

### INTRODUCTION

Domestic violence is a pattern of abuse, the behaviour that restricts the

activity and independence of another individual. It includes physical, sexual and psychological attacks, and economic control.

It is evident that the relationship between the couples, among parents and other family members is often strained. Women are unequivocally the primary victims of family violence. The tradition of household and maintenance of privacy has kept this violence against women hidden from scrutiny. [1] The World Health Organization has defined domestic violence as, "The range of sexually, psychologically and physically coercive acts used against women". [2] Such acts result in unnecessary injuries, deaths, economic hardship and emotional suffering for victims, their families, friends, associates and the community. [3]

According to the experts, the domestic violence problem in India stems from a cultural bias against women who challenge their husband's right to control their behaviour. This process leads men to believe their notion of masculinity. According to 2002 study in India, 45% of Women are slapped, kicked or beaten by their husbands. About 74.8% of the women who have reported violence have attempted to commit suicide. [4]

Violence against women is increasingly being recognized as a crucial public health and human rights concern. The emergence of domestic violence as a research issue is a fairly new phenomenon in India. There have been attempts from the late 1980s mainly through the work of the women's organizations to find out the nature of the problem as well as the factors leading to its occurrence. Many studies have been undertaken, especially during 1980s-1990s. But most of the studies have suffered from underreporting of domestic violence. This under reporting may occur purposively or in an unintended manner as women themselves are unable to perceive several acts of their own husbands and the marital family members as a form of violence and also due to fear of reprisal from husband. [5]

The Conflict Tactics Scale, the Index of Spouse Abuse, the Severity of Violence against Women Scale, Hurts, Insults, Threatens and Screams Scale (HITS Scale) and the Woman Abuse Screening Tool are several scales used to identify women in abusive relationships. A new abuse scale was constructed by using these various scales which are used widely to make it more comprehensive. Thus while modifying the existing scales following two major changes were made which were observed in Indian situation by overcoming the lacunae in the existing scales. [6-8]

Thus the purpose of undertaking this research was to find out prevalence of domestic violence in western Maharashtra and to construct a sensitive tool to detect violence at grass root level. Hence preventive and control measures can be taken at the earliest.

## **MATERIALS AND METHODS**

**Study area:** Rural and Urban field practice areas of Krishna Institute of Medical Sciences, Karad, Western Maharashtra, India.

**Study population:** All married women belonging to age group 15-49 years residing in the Urban and Rural field practice area, irrespective of having children or not, who were the permanent residents of the field practice area, agreeing voluntarily to participate in this study.

**Study sample:** Out of total 463 women 455 women could be interviewed, 246 women from urban health training centre (UHTC) and 209 from rural health training centre (RHTC). The mean age of all respondents was 30.13 years with standard deviation of 7.99 years. Eight women could not be included in the study either due to refusal to give consent before commencement of the study or withdrawal of their consent during interview. All remaining 455 women were

interviewed to find out the lifetime prevalence of domestic violence.

**Ethical issues:** Individual informed consent was obtained from all participants by explaining the purpose of the study before the interview started. All eligible women were informed that, they did not have to answer any question if they did not want to, and they could withdraw from the participation at any point in the study. Privacy was maintained during the interviews. Interviews took place in a private place in or outside the respondents' home, and care was taken to avoid presence of any other family/community members during these interviews. If someone interrupted privacy during the interview, the discussion on general health was made and the interview was restarted after the third person had left. Participants were assured of the confidentiality of their participation as well as their responses.

The participants were assured that, the information will not be divulged to any individual under any circumstance & will be treated as strictly confidential. A rapport was developed with every participant prior to the interviews.

**Data Collection:** The study involved collecting qualitative data through Semi-structured questionnaires. To assess domestic violence exposure, women were asked several questions on various behaviours of violence. Questions were posed to get their experience to a specific act of violence during their life time. A multiphase process was used to develop these questionnaires to ensure that it was culturally and linguistically appropriate. The questionnaire was prepared initially in English and translated into the vernacular language, and back translated in to English to ensure correctness of meaning. All the eligible women from the study area were contacted by house-to-house visit.

**Operational Definitions:** The following operational definitions were used. <sup>[9-15]</sup>

**Domestic violence:** It is any violence perpetrated by husband & or his relatives.

**Physical violence:** It is any act intended to harm a women by her husband & his relatives like beating, punching, kicking, dragging, or slapping, twisting of arm, pulling of hair, hitting with an object, choking, burning, or physically restraining the woman.

**Psychosocial/Verbal violence:** It is any behaviour or lack of it by the husband intended to undermine the woman's self confidence or to lead to a lowered or negative self-esteem by showing jealousy, humiliation in front of others, accusing her of infidelity, threatening to evict her, threatening her or her children with violence, or forcibly taking something from her.

**Sexual violence:** It consists of violent sexual acts like non-consensual sex, physically forced sex and any degrading or humiliating sexual act by husband and or his relatives.

**Economical violence:** It consists of withholding money and other resources or taking away forcefully money, ornaments, or other belongings of the woman, withholding basic necessities, snatching resources, giving less money to run home, repeated demands of money or resources from her parents, pressurizing to bring unfulfilled amount of dowry from the woman's parents.

Newly constructed Psychosocial, Physical, Economical, Sexual and Total (PPES(T)) abuse scale was made suitable for Indian situations. In the current abuse scale, various types of violence like psychosocial, economical, physical & sexual violence perpetrated by the husband & other family members either singly or jointly with other abusers were scored. This scale was applied to the victims exposed to one or

more types of violence in previous 12 months.

The newly constructed PPES abuse scale for Total abuse or its component's type specific were compared with two other screening tools used to identify intimate partner violence: the revised version of the Index of Spouse Abuse-Physical (ISA-P), which ensures physical abuse, and the Women's Experience with Battering Scale (WEB).

Institutional Ethics Committee clearance was taken before the study was started.

**Statistical Analysis:** The data analysis was done using SPSS Version 16 to calculate proportion, Odds Ratio, and multivariate logistic regression. 95 per cent confidence intervals (CI) and a P value of less than 0.05 were considered as the minimum level of significance.

## RESULTS

It was observed that the lifetime prevalence of overall violence was significantly higher in respondents from

urban area (68.7%) than the respondents from rural area (59.3%) with OR= 1.5 with a Confidence Interval of 1.023 to 2.213 (p= 0.0375). There were 77(31.3%) women from urban area & 85(40.7%) women from rural area who never had experience of any type of violence.

Most common lifetime violence in urban as well as rural women experienced was psychosocial, economical followed by physical violence & least common was sexual violence alone or in combination with other types of violence. Significantly higher lifetime prevalence of psychosocial violence (68.3%), economical violence (47.6%) & physical (47.2%) violence was reported by the respondents of urban area than the rural area (p=0.0375, p=0.0084 & p=0.0469 respectively). The risk of getting economical violence was 2.229 times more in urban area as compared to the rural area with Confidence Interval of 1.495 to 3.691. The sexual violence was reported least by the respondents of both the areas & difference was not statistically significant (Table I).

**Table I: Distribution of respondents according to magnitude of various types of violence.**

Types of violence	Urban area (n=246) No (%)	Rural area (n=209) No (%)	$\chi^2$ value	p value	OR	95% CI
Life time:						
Over all	169(68.7)	124(59.3)	4.326	0.0375	1.505	1.023-2.213
Psychosocial	168(68.3)	124(59.3)	3.948	0.0469	1.476	1.004-2.170
Physical	116(47.2)	73(34.9)	6.956	0.0084	1.662	1.138-2.428
Economical	122(47.6)	64(30.6)	16.828	0.0001	2.229	1.515-3.279
Sexual	23(9.3)	14(6.7)	1.090	0.2900	1.443	0.7225-2.882

When the different types of abuse was compared in the new scale PPES (PSA Scale), out of 137 urban victims only 3(2.2%) were found not suffering by psychosocial abuse. Most of the abused were from both areas & were suffering by moderate (urban 35.8% & rural 44.9%) & mild (urban 32.1% & rural 36.6%) type of abuse. Sever type of abuse was seen in almost 1/4<sup>th</sup> of the victims from both the areas (29.9% urban & 24.5% rural). No

significant difference was seen in both the areas (Table IIA).

PPES (PA) scale of present study detected 52/137 (38%) victims from urban & 47/98 (48%) victims from rural area as not suffering by the physical violence (Table IIB). Majority of victims in both areas were suffering from mild physical abuse (urban 33.6% & rural 40.8%). However significantly high rate of severe physical violence (p= 0.014) was detected in urban

victims (27%) than the rural victims (11.2%).

It was seen that 1/4<sup>th</sup> of victims from urban (24.8%) & half of rural victims (44.9%) did not suffer by economical violence (Table II C) according to PPES(EA). Majority of abused were getting harassed from severe (urban 47.7% & rural 31.6%) followed by moderate (urban 26.6% & rural 20.4%) economical abuse in both areas. In urban area, significantly higher rate

of severe economical abuse was seen among urban victims than in rural areas (p=0.011).

Similarly more than 3/4<sup>th</sup> victims were detected for not having sexual violence in victims of both areas (Table II D) according to PPES (SA). Majority of sexually abused were getting harassed with moderate type of sexual abuse (urban 11.7% & rural 12.2%). No significant difference was seen in both the areas.

**Table II: Distribution of Victims with Various Types of Abuse on New Type Specific (PPES) Abuse scale:**

PPES Abuse scale	Urban Victims n=137	Rural Victims n=98	$\chi^2$	p value
A).PPES(PSA) scale				
No abuse	3(2.2)	0(0)	4.001	0.261
Mild (2%- 13%)	44(32.1)	3(36.6)		
Moderate (14%- 33%)	49(35.8)	44(44.9)		
Severe (34%- 100%)	41(29.9)	24(24.5)		
B).PPES (PA) scale			10.573	0.014
No violence	52(38)	47(48)		
Mild (3%-17%)	46(33.6)	40(40.8)		
Moderate (18%-25%)	2(1.5)	0(0)		
Severe (26%- 10)	37(27)	11(11.2)		
C).PPES (EA) scale			11.227	0.011
No violence	34(24.8)	44(44.9)		
Mild (5%- 14%)	8(5.8)	3(3.1)		
Moderate (15%- 33%)	31(26.6)	20(20.4)		
Severe (34%- 100%)	64(47.7)	31(31.6)		
D).PPES (SA) scale			1.794	0.616
No violence	112(81.8)	81(82.7)		
Mild (5% - 9%)	4(2.9)	4(4.1)		
Moderate (10%- 29%)	16(11.7)	12(12.2)		
Severe (30%- 100%)	5(3.6)	1(1)		

It was seen that 47 victims (urban 77% & rural 78.3%) were detected as not having violence according to both ISA-P scale & PA scale, suggesting these victims were abused by the perpetrators other than husband & with the violence other than physical & sexual violence. Nearly half of the victims from urban (48.7%) & nearly 3/4<sup>th</sup> from rural (71.1%) area were detected to be suffering from mild physical violence by both the scale. Significantly higher rate of severe physical violence was detected by PA scale from both the areas which was classified as no violence or as mild violence by ISA-P scale (urban & rural p=0.000).

Similarly most of the victims 58(95.1%) & 59(98.3%) were detected as not having sexual violence according to ISA-P scale as well as SA scale. This indicated that these victims were abused by the perpetrators other than husband & with the violence other than physical or sexual. Victims (urban 54 & rural 22) were found to be having mild abuse according to ISA-P scale, whereas as per SA scale developed by us these victims did not suffer from the sexual violence. ISA-P scale did not differentiate between physical & sexual harassment & both types of abuse were considered together whereas in newly developed PPES

(PA) & PPES (SA) were specific scales for physical & sexual violence respectively.

It suggested that, these were the victims suffering from physical violence performed by the husband. Also it was found that 3 victims from urban & one from rural area had sexual violence by the abuser other than husband hence was missed by use of ISA-P scale. It was seen that significantly high rate of moderate (urban 16 & rural 4) type of sexual violence was detected by SA scale which was classified under mild type of violence under ISA-P scale (urban  $p=0.001$  & rural  $p=0.000$ ) (Table III).

Majority of victims from both areas suffering by the psychosocial abuse

according to PSA scale were detected as not having violence under WEB scale. It suggested that these victims were getting abused by the abuser other than husband. Significantly high rate of moderate (38.5%) & severe (51.9%) psychosocial abuse was categorised as having mild violence with WEB scale in urban area ( $p=0.000$ ). Similarly high rate of moderate psychosocial abuse was detected to have no violence (46.2%) & mild (40.6%) violence with WEB scale. A severe form of psychosocial violence (16) was detected as mild violence under WEB scale ( $p=0.000$ ) from rural area (Table IV).

**Table III: Association of newly invented PPES abuse scales with ISA-P\* scales:**

PPES Abuse Scale prepared for present study	ISA-P Scale* in Urban victims			ISA-P Scale* in rural victims		
	No violence <=2%	Mild (3%-50%)	Moderate & Severe (51%-100%)	No violence <=2%	Mild (3%-50%)	Moderate & Severe (51%-100%)
PA scale						
No violence	47(77)	5(6.6)	0(0)	47(78.3)	0(0)	0(0)
Mild	9(14.8)	37(48.7)	0(0)	13(21.7)	27(71.1)	0(0)
Moderate	0(0)	2(2.6)	0(0)	0(0)	0(0)	0(0)
Severe	5(8.2)	32(42.2)	0(0)	0(0)	11(28.9)	0(0)
	$\chi^2 = 71.889, p = 0.000$			$\chi^2 = 61.037, p = 0.000$		
SA scale						
No violence	58(95.1)	54(71.1)	0(0)	59(98.3)	22(57.9)	0(0)
Mild	1(1.6)	3(3.9)	0(0)	0(0)	4(10.5)	0(0)
Moderate	0(0)	16(21.1)	0(0)	1(1.7)	11(28.9)	0(0)
Severe	2(3.3)	3(3.9)	0(0)	0(0)	1(2.6)	0(0)
	$\chi^2 = 15.891, p = 0.001$			$\chi^2 = 26.638, p = 0.000$		

\*ISA-P Scale is based on violence by husband in the form of physical & sexual abuse. It does not take in to consideration psychosocial & economical abuse. From PPES scale also only these components were considered.

**Table IV: Association of components of PPES abuse scales with WEB\* scales:**

PPES Abuse Scale prepared for present study	WEB* in Urban victims			WEB* in rural victims		
	No violence <=32	Mild (33%-67%)	Moderate & Severe (68%-100%)	No violence <=32	Mild (33%-67%)	Moderate & Severe (68%-100%)
PSA scale						
No abuse	3(3.6)	0(0)	0(0)	0(0)	0(0)	0(0)
Mild	39(47)	5(9.6)	0(0)	27(41.5)	3(9.4)	0(0)
Moderate	29(34.9)	20(38.5)	0(0)	30(46.2)	13(40.6)	1(100)
Severe	12(14.5)	27(51.9)	2(100)	8(12.3)	16(50)	0(0)
	$\chi^2 = 35.669, p = 0.000$			$\chi^2 = 21.072, p = 0.000$		
EA scale						
No violence	29(34.9)	5(9.6)	0(0)	33(50.8)	11(34.4)	0(0)
Mild	5(6)	3(5.8)	0(0)	2(3.1)	1(3.1)	0(0)
Moderate	13(15.7)	18(34.6)	0(0)	15(23.1)	5(15.6)	0(0)
Severe	36(45.4)	26(50)	2(100)	15(23.1)	15(46.9)	1(100)
	$\chi^2 = 15.956, p = 0.014$			$\chi^2 = 7.890, p = 0.246$		

\*WEB scale is based on psychosocial abuse by husband.

In urban area severe form of economical violence (p=0.014) was classified under no violence 36(45.4%), mild violence 26(50%) according to WEB scale. These victims were severely economically abused by the perpetrator other than husband. It was seen that nearly 1/4<sup>th</sup> (15, 23.1%) & half (15, 46.9%) rural victims suffering with severe economical violence were detected as not having violence & mild violence respectively as per WEB Scale. The scale prepared from

present study is highly sensitive for Indian population (Table 4).

Physical abuse scale is significantly correlated with psychosocial, economical & sexual abuse score in both urban and rural areas. Psychosocial abuse scale was not significantly correlated with the economical and sexual abuse score in urban victims. Whereas it was significantly correlated with the economical and sexual abuse score in rural victims (Table V).

**Table V: Correlation of Abuse scales:**

Abuse scales*	Urban area r(p values)			Rural area r(p values)		
	PSAS r(p-value)	EAS r(p-value)	SAS r(p-value)	PSAS r(p-value)	EAS r(p-value)	SAS r(p-value)
PAS	0.311 (0.000)	0.320 (0.000)	0.305 (0.000)	0.210 (0.038)	0.485 (0.000)	0.498 (0.000)
PSAS		0.123 (0.150)	0.104 (0.102)		0.137 (0.178)	0.287 (0.004)
EAS			0.053 (0.535)			0.458 (0.000)

\*SRS= Suicidal Abuse Scale, PAS= Physical Abuse Scale, PSAS= Psychosocial Abuse Scale, EAS= Economical Abuse Scale, SAS= Sexual Abuse Scale.

## DISCUSSION

In the present study total 455 respondents (68.7% urban & 59.3% rural area) have been interviewed. Among 455 respondents, about 2/3<sup>rd</sup> respondents (64.4%) have experienced one or the other form of violence which is apparently more prevalent in urban (68.7%) than rural area (59.3%). Life time one or the other form of violence & economical violence is significantly higher in urban than rural area. Women in every country irrespective of the class, culture and political development face violence on the street or within homes. Violence against women in the family is deeply embedded and contributes to the low status of women, in spite of the constitutional and human rights guaranteed to women in most countries of the world today.

According to WHO study, violence against women exists in epidemic

proportions in many countries around the world. Globally domestic violence is very much prevalent. It varies from 3.1% in women of Georgia to 78% of violence among women of Ethiopia. Countries having high violence rate are Bolivia 47.2%,<sup>[16]</sup> Central and Eastern Europe/CIS/Baltic State of Estonia 52% ( age 65 & older),<sup>[17]</sup> Liberia Montserrado County 54.1% & Liberia N County 55.8%,<sup>[18]</sup> Iraqi Kurdistan region 58%,<sup>[19]</sup> south eastern North Carolina 76.3% ,<sup>[20]</sup> North western Ethiopia 78%.<sup>[21]</sup> The countries with low violence rate are Republic of Georgia 3.1%,<sup>[22]</sup> Canadian military personnel 9.6%,<sup>[23]</sup> among Hispanic women 10.9%,<sup>[24]</sup> in Rural Hispanics 14.5%,<sup>[25]</sup> Norwegian women 16.7%,<sup>[26]</sup> Slovenia 17.1%,<sup>[27]</sup> Spain, Europe 18%,<sup>[28]</sup> Ankawa Iraq 18.8% & Erbil Iraq 20.8%,<sup>[29]</sup> Toronto, Canada 22%,<sup>[30]</sup> Nigeria 22%<sup>[31]</sup> & Sweden 23.2%,<sup>[32]</sup> Sub Saharan Africa 26.8%.<sup>[33]</sup>

India lies in the countries with high prevalence of domestic violence (51.8% to 60.1%).<sup>[9]</sup> In Indian subcontinent, violence against women is very common. Bangladesh 14.5% to 48.2%,<sup>[34,35]</sup> Nepal 31.3% to 58.3%<sup>[36,37]</sup> are the countries which have a very higher rate of women abuse. In India there are many studies showing rate of various types of violence against women from 3.8% in the state Himachal Pradesh<sup>[38]</sup> to 63.9% in Mumbai Maharashtra.<sup>[5]</sup> High prevalence states of India are West Bengal (51.8%), Jharkhand (58.9%),<sup>[9]</sup> Orissa (60.7%), & low prevalent state is Rural West Bengal 23.4%.<sup>[39]</sup> Our results of 64.2% (68.7% urban & 59.3% rural area) are comparable with other Indian studies which have reported high rates of violence.

From various studies it is found that women's status is secondary to the men may be due to women are considered as of weaker sex. Generally women are inferior to the husband by the age, height & also physique. Most of the women remain at home as housewives and most of the husbands are the bread earners. Traditionally a woman has to leave her parent's house and stay with in-laws family even after paying the dowry. Women are vulnerable to various stress factors in in-laws house because women are emotional and have to cope up with the relationship of strange people in marital home. They face considerable pressures to prove their fertility. Moreover, they have limited decision-making, autonomy within marriage, and are highly vulnerable to domestic violence.

Most commonly reported lifetime violence is psychosocial violence from various countries (Erbil Iraq 32.4%,<sup>[29]</sup> Uganda 41.4%,<sup>[40]</sup> Iraqi Kurdistan region 52.6%,<sup>[19]</sup> Sub Sharan Africa 65.3%,<sup>[33]</sup> Ethiopia 73.3%,<sup>[21]</sup> Norway 83%,<sup>[26]</sup> Spain, Europe 76.6%.<sup>[28]</sup> The low rate of psychosocial violence has been reported by Brazil (19.11%)<sup>[41]</sup> & Bolivia (21.1%).<sup>[8]</sup> In

Indian subcontinent it has been reported low (29.2%).<sup>[42]</sup> In India the rate of psychosocial violence is from 37% to 52.3%.<sup>[1,9,43]</sup> Many states in India have reported high psychosocial violence (West Bengal: 50.6%, Orissa: 52.5%, Jharkhand: 54.5%),<sup>[9]</sup> W. Bengal 85.71%.<sup>[44]</sup>

Physical violence is next commonly reported form of violence (United Kingdom 25%, United States 28%, Norway & Canada 29%, Israel 32%, Zimbabwe 32%, among Middle East: Egypt 35% Korea 38%, African countries, Kenya 42%, Uganda 41%, In Latin America and the Caribbean countries, Chile 26%, Mexico 30%, Tajikistan 23% (aged 18-40),<sup>[17,26]</sup> Iraqi Kurdistan region 38.5%,<sup>[19]</sup> Norway 29%,<sup>[26]</sup> Uganda 31.3%,<sup>[40]</sup> Latin America and the Caribbean: Nicaragua 52%, Japan: 59%, Sub Saharan Africa 54.3%, Ethiopia 58.4%, Poland 60%(divorcee).<sup>[17,21,33]</sup> The least rate of physical violence have been reported by Brazil (6.5%)<sup>[41]</sup> & Bolivia (6.9% to 19.2%).<sup>[16]</sup> In Indian sub continent, Bangladesh has reported 46.6% to 48.2%<sup>[35]</sup> & Maldives 18%<sup>[42]</sup> of physical violence. In India 35.1% to 40.3%,<sup>[1,9]</sup> Rural India 34.3%,<sup>[45]</sup> Rural Goa 32.2%,<sup>[46]</sup> Uttar Pradesh 45%,<sup>[17]</sup> In North India: 25.5% to 40.3%, Central India 29.2% to 44%, Eastern India, 32.7% to 34.7%, In Northeast India, Arunachal Pradesh 37.5%, Assam 36.7%, Western India, Gujarat 25.7%, Maharashtra 30.6%, South India; Andhra Pradesh 35.0%, Tamil Nadu 41.9%, Bangalore 40.9%, Gwalior Madhya Pradesh 30.9%, & East: Bihar 55.6%.<sup>[38,47,48]</sup>

The sexual violence has been reported from minimum rate of 6.7% of Maldives to highest 73.8% in Liberia Nimbi country.<sup>[17,18,21,26,28,33,35-37,40,42]</sup> In India, 35% to 61% from lower to higher Socio-economic status have showed increased sexual violence,<sup>[4]</sup> Orissa 32.4%, Jharkhand 27.4%, West Bengal 57.14% from Eastern India which have reported higher rate of

sexual violence <sup>[9]</sup> than the current study (Urban 13.6% & Rural 11.3%).

Very few studies have been focused on economical violence which itself is the cause for other types of violence. Dowry related cruelty has been reported by many Indian studies from 9.09% to 61.11%. <sup>[39,44,46]</sup> However in 2008 only 7.1% of dowry related crimes have been registered in India. Highest registrations are from Andhra Pradesh, Rajasthan, Kerala & Assam (from 11.5% to 12.5%) whereas least from Tamil Nadu & Jharkhand (2.5% & 2.8% respectively). <sup>[49]</sup>

The Cronbach's alpha coefficient for both the reduced 15-item scale & the Women's Experience with Battering Scale was high ( $\alpha=0.93$  &  $\alpha=0.95$ ). <sup>[6]</sup> The present study has considered four types of violence out of which physical & sexual abuse could be compared with modified ISA-P scale & physical could be compared with the WEB scale. Economic violence has not been covered by any of these scales. A modified version of the ISA-P, a 15-item scale was used to measure the severity of physical violence inflicted on women by their current or most recent male partners. The recommended weighted scale score and cut off points were used. To score ISA-P scale, addition of all the responses were carried out, from this sum the subtraction of the number of questions actually answered ( $n=15$ ) was done & multiplied by 100 & then divided by 90. A scores  $>2$  indicated physical intimate partner violence. <sup>[6]</sup>

The 10-item WEB scale was used, which measured battering by characterizing women's perception of their vulnerability to physical and psychological danger or loss of power and control in relationships with male partners. Respondents indicated their level of agreement or disagreement using a six-point Likert scale. For scoring WEB scale, addition of responses for items 1-10 was done. Range of score was from minimum 10

to maximum 60. Score  $\geq 20$  indicated battering. <sup>[6]</sup>

In a 15-item ISA-P scale, actual scores were used (Total score 60) without categorization. The cut off suggested is of  $> 2$  as abused, above which the scores were divided equally in to three categories. In the 10-item WEB scale, the score  $\geq 20$  suggested abuse, above which the score had been divided equally in to three categories. Similarly PPES (T) & its component scales also were categorised in to three.

The use of newly constructed PPES abuse scale with its component scales have been found useful in both the areas for the assessment of violence. The PPES abuse scale and its components scales have been found to be sensitive for detection of violence in comparison with 15 items ISA-P scale & WEB scale.

Most of the scales used for finding out the magnitude of the violence among women are constructed in the developed world. Hence they are not directly applicable under Indian conditions. In India, majority women are living in joint families after marriage. Hence influence & attitude of all members of the family very often results in a phenomenon of group violence which is not taken in to consideration by existing scales which focus only on intimate partner violence. The violence committed by other family members would have been completely over looked in absence of application of new PPES (T) scale.

India being a developing country & poverty being rampant, economic aspects of family life are of at most importance, which is not taken in to consideration in any of the existing scales. There has been economical violence of the magnitude of 47.6% in urban area & 30.6% in rural area, which would have been completely missed if the economic violence was not taken in to consideration.

To study the influence of individual types of violence & also combined effect of various forms of violence, construction of new scale has been essential as most of the scales do not take in to consideration the isolated & joint violence perspectives.

## **CONCLUSION & RECOMMENDATIONS**

Domestic violence is ignored in many homes as they are not aware about the negative drawbacks and harms of it. It hurts the whole community. Domestic violence can vary in different forms from hitting to biting, restraining, slapping, throwing objects, kicking, threatening, controlling, intimidation, stalking, passive/covert abuse, economic deprivation, emotional abuse, endangerment, imprisonment, stalking, harassment and so on. It is the major challenge for the social activist that majority of women have accepted harassment as their fate & a part of their life.

There is a need to bring about the attitudinal change among the women to live their life with availing their rights & with the respect. This can be brought about by educational change & creating awareness in general population.

Use of violence scale from which detection of severity of specific type of violence can be calculated & depending on which special care could be made available for the victims. For this risk assessment, health worker female, ASHA, Anganwadis workers could be trained.

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