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Prevalence of Intimate Partner Violence and Associated Factors Among Married Nepalese Men in Kathmandu Metropolitan City

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ABSTRACT

Background: Intimate Partner Violence is defined as the intentional use of physical force, or power, threatened or actual against on self/others or groups that results in injury, death, psychological harm.

Methods: A community-based cross-sectional study was conducted in Kathmandu Metropolitan city in 2018. An adequate sample of 210 married men was selected from randomly selected 10 wards of Kathmandu Municipality. A semi-structured questionnaire including standard scales was used for data collection. Multivariate analysis was performed to find out the association of Intimate Partner Violence with different variables.

Results: The mean age of male respondents was 40.19 years. More than half of the respondents were Janajatis. Overwhelming respondents were Hindu (religion). Intimate Partner Violence was estimated in forms of Physical violence, 31.9%, Sexual violence, 4.3%, and Psychological violence, 50.5%. Age, age at marriage, marriage type, marriage decision, spousal age gap, family income, education, smoking habit and depression were independently associated with violence. However, family income and education were found to be significant factors associated with violence even after adjusting the effects of other potential factors.

Conclusions: Strong association of Intimate Partner Violence with family income, and education of male respondents was observed. More than half of the males had psychological violence and nearly one-third of the participants had Physical violence. The study concludes that Intimate Partner Violence among males could not be neglected.

Keywords: Intimate partner violence; married men; Nepal

INTRODUCTION

WHO defines violence as the intentional use of physical force or power, threatened or actual, against oneself another person, or against a group or community that either result in or has a likelihood of resulting in injury, death, psychological harm, mal development or deprivation.¹

Intimate partner violence (IPV) is behavior by an intimate partner that causes physical, sexual or psychological harm. IPV is most prevalent in the United States of America; the study shows that 90% of men experience the controlling behavior of their intimate partners.^{2,3}

Literature searches in various journal sites resulted in very few or limited studies on IPV upon men in abroad and published literature from Nepal could not be found so far as we are concerned. This study was therefore conducted to identify the magnitude of the IPV problem and its associates among Nepalese men in the context of

the capital city of Nepal.

METHODS

A community based cross sectional study was conducted among 210 respondents residing in the Kathmandu Metropolitan city to assess the prevalence and associated factors of intimate partner violence among married men. Data was collected from September 2018 to May 2019.

Ethical approval was obtained from the Institutional Review Committee of the B.P Koirala Institute of Health Sciences (Ref.No.186/075/076-IRC) before conducting the study. The approval was also obtained from Nepal Health Research Council (NHRC) (Ref. No. 2329) .Written permission was obtained from Kathmandu Metropolitan city ,and respective wards .Verbal consent was obtained from each participant prior to the interview. Participants were assured about the confidentiality and anonymity. No patient involved in the study.

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Kathmandu Metropolitan City was purposively selected then, out of 35 wards of KMC 10 wards were conveniently selected. A total of 210 men were interviewed from selected wards equal sample size of 21 each was taken from each ward. Participants aged 20-55 years who consent to participate were included for this study.

The sample size was calculated on the basis of prevalence of any form of violence, 34.1% as reported in a study done by Babolola et al.⁴ Considering 20% of permissible error along with a 10% addition for non-response rate the final sample size was 210.

Data was collected by face to face interview using semi-structured questionnaire which also included validated and reliable instrument, socio-demographic characteristics, Kuppusswamy scale⁵, Fagerstorm test⁶, CAGE score for alcohol drinking⁷, Severity of violence against women questionnaire and SVAWS⁸ scale, Index of psychological abuse scale⁸, and CES-D questionnaire for depression.⁹

Fagerstorm test for nicotine dependence is a standard instrument for assessing the intensity of physical addiction to nicotine. The test was designed to provide an ordinal measure of nicotine dependence related to cigarette smoking. It contains six items to evaluate the quantity of cigarette consumption, the compulsion to use and dependence. Yes/No items are scored from 0 to 1 and multiple choice items scored from 0-3. The items summed up to yield a total score of 0-10. Score: 0-2 Very Low Addiction, 3-4 Low Addiction, 5 Medium Addiction, 6-7 High Addiction, 8-10 Very High Addiction.

The CAGE questionnaire was used for alcohol problems. It consists of 4 questions. A total of 4 scores and 2 or greater is considered clinically alcoholic, and less than 2 as nonalcoholic. SVAWS was for measuring the experience of physical and sexual violence. It can be applied to men by changing the pronoun. Point values are given in response to each item in the subscale are summed up to create the sub score. Higher scores are indicative of greater abuse.

Psychological abuse index for psychological violence. A summary score was created by summing across items. A higher score is indicative of higher psychological abuse. CES-D is used to measure depression. There are 20 questions, and possible abbreviation ranges from 0-60. A score of 16 points or more is considered depressed.

Pretesting of tool was done by administering tool to 10% of the total sample in a similar setting. The internal

consistency was measured via cronbach's alpha, which was found to be 0.856 for life time, and 0.844 for past year for sixty items. Data entry was done in Microsoft Office Excel 2007 and analysis in SPSS (11.5 version). Descriptive statistics were presented in terms of percentage, mean, and standard deviation. Chi-square test was used to compare categorical variables. Odds Ratio with 95% Confidence Interval was calculated to find out the strength of association between IPV and different variables. P value was presented to explain significance of the variables. Multiple logistic regression was used to find out adjusted effects of different potential risk factors with Intimate Partner Violence.

RESULTS

Of the total 210 participants who participated in the study the mean age was 40.19 years with a standard deviation of ± 8.57 . The majority of the respondents (59.5%) belonged to Janajati ethnic groups. Likewise majority of the participants were Hindus. Nearly one quarter of the participants (24%) had completed master's level of education. More than half of respondents (54.8%) belonged to nuclear families. The respondents (38.6%) had two children, and 37.1% had children of both sex. Majority of the participants had family income of Nrs <50000 per month. Most of the men belong to upper middle class based on Kuppusswamy scale. The mean age at marriage was 24.73 and most of the participants were bonded by arranged marriage. Similarly, more than half (61.9%) of the respondents got married below or equal to 25 years of age, and half of the respondents (59.5%) had spousal age gap less than 5 years. The mean age of wife was 36.84 years. Respondent's spouses were involved in business, and had completed bachelor level of studies.

More than half of the respondents (59%) consumes alcohol among them only 21% have an alcohol addiction problem. Whereas, 26.2% among wives consume alcohol and amongst them 18.2% had an alcohol addiction problem. Nearly one third (39.5%) of respondents were smokers where 6% had higher addiction. Very less only 3.8% of wives were smokers (Table 1).

Table 1. Behavior related to health factors, and Depression in the study.

Characteristics	Categories	Respondent n (%)	Wife n (%)
Alcohol Consumption	Yes	124 (59)	55 (26.2)
	No	86 (41)	155 (73.8)

If Yes	Alcoholic (≥ 2)	26 (21)	10 (18.2)
	Nonalcoholic (<2)	98 (79)	45 (81.8)
Smoking	Yes	83 (39.5)	8 (3.8)
	No	127 (60.5)	202 (96.2)
If Yes	Very low addiction(0-2)	60 (72.3)	4 (50)
	Low addiction(3-4)	17 (20.5)	3 (37.5)
	Medium addiction(5)	1 (1.2)	0 (0)
	High addiction(6-7)	5 (6)	1 (12.5)

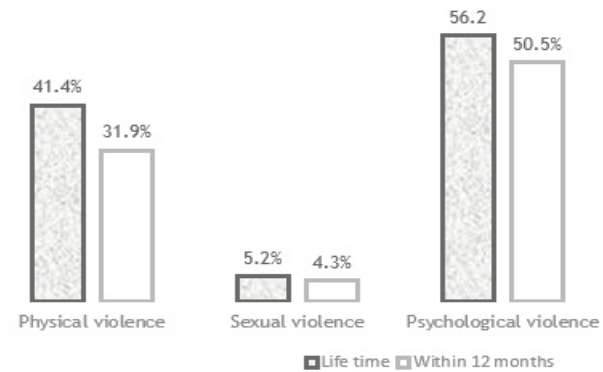


Figure 2. Prevalence of intimate life partner violence among men in K.M.C (n=210).

The majority of the respondents 93.8 % (197) were without depression and rest 6.2 % (13) were depressed which was measured using CESD-scores where the above 16 score is depressed which is self-report depression scale.

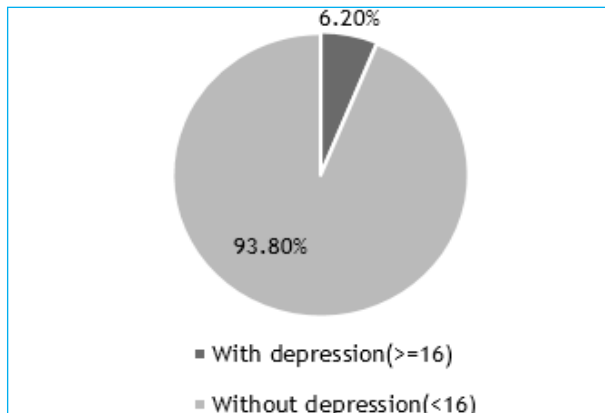


Figure 1. Depression among respondent in the study sample (n=210).

Metropolitan City (Physical violence=41.4%, Sexual violence=5.2%, Psychological violence=56.2%) while the prevalence of violence within twelve months (Physical violence=31.9%, Sexual violence=4.3%, Psychological violence =50.5%) (Figure 1).

The prevalence of physical, sexual, and psychological violence in a lifetime among men in Kathmandu

Bivariate analysis was carried out to determine the association between intimate partner violence, and associated factors. It was found that age of respondent ($p=0.034$), ethnicity ($p=0.038$), education ($p=0.02$), family income ($p=0.001$), marriage type ($p=0.03$), marriage decision ($p=0.03$), age of wife ($p=0.026$), smoking respondent ($p=0.010$) smoking wife ($p=0.014$), depression ($p<0.001$) were significant for physical violence. However, binary logistic regression analysis indicated that family income, education, smoking respondent, and depression influenced intimate partner violence (Table 2).

Alcoholic habit of wife ($p=0.003$) was significant for sexual violence.

Education ($p=0.031$), Family income ($p=0.014$), Age at marriage ($p=0.014$), Spousal age gap ($p=0.023$), Marriage type ($p=0.011$), Marriage decision ($p=0.012$), smoking habit of respondent ($p=0.045$) were significant for psychological violence. On contrary education, and family income was significantly associated with psychological violence in binary logistic regression (Table 3).

Table 2. Binary logistic regression of factors associated with Physical Violence (Model 1) (n=210).

Characteristics	Category	OR	p value	Unadjusted		OR	p value	Adjusted	
				95% CI for OR	95% CI for OR			Lower	Upper
Age of respondent	20-40	1.93	0.035	1.04	3.56	1.59	0.394	0.55	4.60
	>40								Ref
Caste	Brahmin/Chhetri	1.86	0.039	1.03	3.38	1.67	0.181	0.79	3.52
	Janajati								Ref

Family income	Rs <50000	4.65	0.002	1.74	12.42	3.55	0.027	1.15	10.91
	Rs ≥50000								Ref
Marriage type	Love	2.44	0.003	1.35	4.42	1.46	0.505	0.48	4.49
	Arrange								Ref
Marriage decision	Self	2.44	0.003	1.35	2.44	1.29	0.653	0.43	3.87
	Others								Ref
Age of wife	≤35	1.95	0.027	1.07	3.52	1.50	0.450	0.53	4.27
	>35								Ref
Education	Primary	1.31	0.520	0.57	2.99	1.07	0.902	0.39	2.91
	Secondary	0.58	0.234	0.23	1.43	0.86	0.794	0.29	2.57
	Higher secondary	2.32	0.027	1.10	4.88	2.51	0.039	1.05	6.03
	Graduate and Above								Ref
Smoking respondent	Yes	2.17	0.011	1.20	2.16	2.54	0.010	1.25	5.19
	No								Ref
Smoking wife	Yes	6.93	0.020	1.36	35.33	3.80	0.152	0.61	23.62
	No								Ref
Depression	Depression	13.85	0.001	2.97	64.48	10.78	0.004	2.09	55.33
	No Depression								Ref

Significant at $p < 0.05$, p -value in bold indicates significant, Ref=Reference group, OR: odds ratio

Table 3. Binary logistic regression of factors associated with Psychological Violence (n=210).

Characteristics	Category	Unadjusted				Adjusted			
		OR	p value	95% CI for OR		OR	p value	95% CI for OR	
				Lower	Upper			Lower	Upper
Age at marriage	>25	2.02	0.015	1.15	3.60	1.84	0.68	0.96	3.53
	≤25	Ref							
Marriage type	Love	2.07	0.011	1.20	3.63	1.72	0.269	0.66	4.52
	Arrange	Ref							
Marriage decision	Self	2.04	0.012	1.17	3.55	1.31	0.578	0.50	3.42
	Others	Ref							
Spousal age gap	≥5	1.91	0.023	1.09	3.34	1.77	0.70	0.96	3.27
	<5	Ref							
Education	Primary	0.99	0.976	0.46	2.15	0.90	0.82	0.37	2.20
	Secondary	0.35	0.008	0.16	0.76	0.36	0.016	0.16	0.83
	Higher secondary	1.03	0.939	0.50	2.11	1.03	0.951	0.46	2.30
	Graduate and above	Ref							
Family income	<50000	2.35	0.016	1.17	3.55	2.22	0.042	1.027	4.80
	≥50000	Ref							
Smoking respondent	Yes	1.7	0.046	1.01	3.09	1.70	0.103	0.90	3.10
	No	Ref							

Significant at $p < 0.05$, p -value in bold indicates significant, Ref=Reference group

DISCUSSION

In our study prevalence of physical violence was 41.4% in a lifetime which was closer to the findings of a study done in Pakistan where 39.92% men were exposed to some kind of physical violence over their marital life time.¹⁰ However, the study done by Tsui reported 55% of violence for a lifetime which was higher than ours.¹¹ Physical violence for the past year was 31.9% in our study. This is in contrast to a 2010 national survey by the Centers for Disease Control and Department of Justice of the United States which revealed that in the last 12 months, more men than women were victims of intimate partner physical violence, and over 40% of severe physical violence was directed at men.¹² Results suggesting the variation in prevalence of violence may be due to cultural, social, and geographical differences across the world.

This report further showed that lifetime and past year prevalence of sexual violence was 5.2%, 4.3% respectively. Nearly similar findings of sexual violence in a lifetime were found in the study of China that was 4.7%, but a lower prevalence of 2.4% was found for the past year.¹³ It was less than that of report done by National Intimate partner and sexual violence which shows approximately 8% of men experienced sexual violence by their intimate partners in life time.¹⁴

In the current study overall exposure to psychological violence was reported 56.2% in a lifetime which is lower than the findings of the study conducted in Pakistan which identified 99.6% of men were subjected to psychological violence by their wives.¹⁰ Nearly similar findings were seen in a study of China which identified 50% of participants exposed to violence.¹⁵ A study conducted in the United States stated 55%, 21.3% of violence for a lifetime, and last year that is almost equal to a percentage of lifetime violence of our study whereas past year rate was lower than this study.¹¹

The prevalence of psychological violence for a past year in our study was 50.5% which was higher from a study conducted in Sweden, and India where 24%, 22.2% had reported psychological violence.^{10, 16} However, approximately 90% of men indicated that they had received at least one emotionally abusive behavior in one year time.¹⁷

In this study, there was a significant association of the respondent's age with physical violence. Similar findings can be found in studies conducted in multi-country study.¹⁸⁻²¹ This might be due to in younger age people react more than in old age. However, various studies

showed no significant association with the age.^{10,22} Caste/ Ethnicity was significantly associated with violence in this study, a similar finding was found in a study done in San Diego.²³ However, there was no association with the caste in the study conducted in Sweden.^{22, 24}

Various studies show a positive association of education with violence. The lower the education level, the higher the violence.^{21, 25} Our study presents a significant association of men education with the prevalence of physical violence. The lower the income the more the violence was found in a study conducted in 18 territories of America where lower than \$15000 income respondent was a victim of violence²¹, similar findings is present in our study. This may have observed because income helps to run family financially. Generally people are dominated by those who earn more and if the earning is not sufficient then people get harassed in their own family for not earning more. However, no association was found between family income and victimization in a study conducted in Kyber.¹⁰ Marriage type and marriage decision had a significant association with the physical violence in this study. Some studies reported no association of marriage duration and violence like in our study.¹⁰ However, studies revealed the association of violence with duration of marriage.^{16, 17} In our study there was a significant association between the age of the wife and physical violence, a similar finding was found in the study in Dares Salam.²⁶ In our study, there was a significant association of smoking of respondents and their partners with physical IPV. Those respondents and spouses addicted to smoking (52.2%, 100%) were more likely to experience and perpetrate physical violence. Similar findings were presented on other studies.^{22, 27} In a study, IPV victimization was associated with increased risk of depressive symptoms.²⁰ Inconsistent with the findings our study also showed a positive association with depression and physical violence.

Education helps to handle situation gently as well as educated people think about consequences before going into action. In our study education had a significant association with psychological violence, a similar finding was found in a study conducted in China¹⁵, Hispanic couples of United States¹⁶, and Cunradi.²⁸ However, no association was seen in a study conducted in Canada¹⁹, and Pakistan.¹⁰ Males whose family income was high were less likely to experience psychological violence^{16, 17, 29} similar findings were reported in our study also.

Our study revealed that lower-middle-class families have more incidences of spousal abuse than middle to upper-class families. However, a study reported that spousal abuse cuts across every social and economic level, from

the very poor to the very wealthy, and it happens both in cities and suburbia.³⁰

Usually, in our society there is a concept that men should dominate their wives, if not then they are called losers. Therefore, the under-reporting of the wife's violent behavior is more likely.

CONCLUSIONS

Psychological violence was predominant in intimate partner violence followed by physical, and sexual violence. Physical violence was more among middle-aged respondents, whose wife was of a younger age. Violence was high among married couples with a history of love marriage, and both smokers. Men who completed an intermediate level of education were at higher risk of experiencing intimate partner violence. Depression of men could be a risk factor for physical violence.

Psychological violence was seen more among respondents who had completed higher secondary education. Similarly, respondents with lower family incomes were at great risk of experiencing violence. The men who did self-decided love marriage, and who married in the latter part of life were more prone to suffer violence. Educational level, family income, smoking habit of a husband could be determining factors responsible for the cause of female-to-male intimate partner violence.

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