MATERNAL PARENTING AND DEPRESSION IN FEMALE VICTIMS OF DOMESTIC VIOLENCE OF RURAL AREAS OF PUNJAB, PAKISTAN

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ABSTRACT

Objective: To explore the relationship of domestic violence with maternal parenting and depression and further to find the predictors of depression in female victims of domestic violence in rural area of Lahore, Punjab-Pakistan.

Methodology: The current research was conducted in rural areas of Punjab including the villages of Qila Staar Shah, Kamahan, Attari, Badho Pulli, Rachna Town and Hadiyala Virkin. The sample included 200 married women with age range between 20-45 years. Purposive sampling technique was used for data collection. Domestic violence (both physical and psychological) was measured by The Karachi Domestic Violence Screening Scale (KDVSS; 2001), maternal depression by Center for Epidemiologic Studies Depression (CES-D; Radloff, 1977) and maternal parenting style by Parenting Practices Questionnaire (PPQ; Robinson, 1995). Data were analyzed using correlation and regression analyses.

Results: There was a significant positive correlation of domestic violence with authoritarian parenting (r =.65, p <.001) and depression (r =.35, p <.01) in the participants of study. Domestic violence was contributing 49%, 56% and 47% in the authoritarian parenting, authoritative parenting and depression in the victims of domestic violence, respectively.

Conclusion: Domestic violence was associated with authoritarian parenting and depression in victims.

Key Words: Domestic violence, Parenting style, Authoritarian, Authoritative, Depression, Punjab

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INTRODUCTION

Domestic violence is the use of power by a partner against other in a relationship or after separation. Physical, sexual and emotional violence, economic deprivation and social abuse are the common types of domestic violence¹. Intimate partner violence is defined as the pattern of physical, sexual and psychological threats that are used by adults and adolescents, to control their intimate relationships². Physical injuries are experienced by the victims of domestic violence. Domestic violence is becoming the main cause of injury to the women of ages between 15-55 years. Injuries in domestic violence victims include cuts, bruises, black eyes and trauma to the vital organs and also include hearing and vision problems³.

In a study, 92% victims reported cuts, scrapes and bruises, 11% reported broken bones or fractures and 3% reported gunshot wounds⁴. Compared to the women who have never experienced any physical abuse, female victims have significantly higher rate of health problems even after the abuse ends⁵. In a study,100 Pakistani obstetricians and gynecologists were asked to check whether their patients were the victims of domestic or intimate partner violence and 30-79% of their patients were found to be the victims of domestic violence. Though the range mirroring different socio-economic strata, but the highest prevalence was in the lowest socio-economic strata. The common reported types of violence included third degree burns, acid burns, and honor killings and the common injuries reported were bruises, lacerations and vaginal trauma⁶.

Life time prevalence rates of intimate partner violence in European and Western countries fall between 26% and 74%⁷. A large scale General Society Survey conducted by Canadian government (2004) reported that 653000 (7%) women and 546000 (6%) men were self-reported victims of violence by their current or previous spouses during past five years⁸. The most recent survey of Canadian population found that 40,200 incidents of abuse were reported to police amongst couples who were either legally married or in common law relationship and in those 83% victims were females⁹.

Living with violence can affect a woman's parenting in both direct and indirect ways. The effects of abuse may include higher levels of maternal depression, which has been shown to be related to severity of abuse; more severe violence is associated with higher levels of depression¹⁰. A significant relationship has been found between high levels of parental warmth and lower levels of externalizing behavior problems among children in different studies¹¹. Poor monitoring and supervision of child's activities as well as lack of involvement predict antisocial behavior in children¹².

In authoritarian parenting, the parents do not provide warmth, involvement and nurturance to their child. They exert high control, use the power assertiveness and demand a lot from them. These parents don't allow their children to communicate or negotiate and usually want their children to do whatever their parents like¹³. Research suggests that these children show more psychological and adjustment problems¹⁴.

On the other hand, authoritative parents give importance to warmth and engage in favorable parent-child relationship 13. In a study, it was found that children from authoritative families were more competent in academics and psychosocial development. This parenting is considered the most effective parenting in many studies¹⁵.

Pakistan is a traditional country where the male dominance is practiced frequently and females are intentionally kept dependent on male members of the family. Due to illiteracy women are generally not involved in any job and mostly remain in their homes. Women are snubbed, disregarded and even found intolerable by a large section of society¹⁶. The traditional behaviors are still adapted to oppress the rights of wives. Domestic violence is a common practice in Pakistani society. Domestic violence leaves negative impacts upon the psychological health of the victims and upon the children of these victims. Therefore the present research was conducted to explore the relationship of domestic violence with two types of parenting named authoritarian and authoritative and to find the predictors of depression in the victims of domestic violence.

The following hypotheses were generated: 1) Domestic violence is positively correlated with authoritarian maternal parenting and depression in the victims of domestic violence; 2) Domestic violence is negatively correlated with authoritative parenting in the victims of domestic violence; and 3) Domestic violence will predict authoritarian parenting and depression in the victims of domestic violence.

METHODOLOGY

Departmental permission was sought from the host department for carrying out the current research. Institutional permission was obtained by counselor of every village to collect data from women of that village. Sample of 200 married women was taken for this study by visiting door to door and requesting them to participate in the study. Researchers gave brief introduction and the importance of their co-operation to participate in the study. Initially the researchers obtained oral consent and if participants agreed then written consent and other scales were presented to them. The victims were identified by calculating their cut off score on domestic violence scale and those who obtained cut off or more score were included in the study. Finally, the participants were thanked for their participation and cooperation.

The sample includes the married women from rural areas of Qila Staar Shah, Kamahan , Attari, Badho Pulli, Rachna Town and Hadiyala Virkin village etc. These villages are included in the district Lahore. Their age range was between 20-45 years (M =32, SD =4.25 years). Correlation research design was used in the present research. Purposive sampling technique was used for data collection. Data was collected in 5 months period. The inclusion criteria were as following: the duration of marriage of 5-20 years; The education level of females from primary to graduation level; the education level of their husbands from primary to masters; and the monthly income of their husbands ranged between Rs. 10000-60000/per month.

Demographic information form was prepared by the researcher keeping in view the literature review. The factors that can affect the personality dimensions of a women of rural areas, such as their age, participant education, her husband's education and profession, family system, number of children, income sources and length of relationship (in years), were considered (Table 1). Domestic violence was measured through 'The Karachi Domestic Violence Screening Scale (KDVSS)'. The english version of KDVSS was first developed by Hassan (2001). The scale was translated, reviewed by experts and then empirically validated through women's reports of experiencing intimate partner's violence. The indigenous scale comprised of 35 items organized into 5 sub-scales i.e. abuser characteristics sub-scale, victim's characteristics sub-scale, physical abuse sub-scale, psychological abuse sub-scale and sexual abuse sub-scale. The total of all items or sub-scales comprise total domestic violence which was used in the present research. The scale has a significant internal consistency measured by Cronbach's Alpha (.92) as reported by author¹⁷.

The Parenting Practices Questionnaire was designed to assess parenting styles with different aspects of par-

enting practices. The present study used 9 items which identified two different parenting styles (authoritarian and authoritative). The measure was rated on a 5-point Likert-type scale, from 1 (never) to 5 (always). The coefficient α for the authoritative items was .91, and for authoritarian items was .86¹⁸.

The 20-item Center for Epidemiologic Studies Depression (CES-D) scale by Radloff (1977) was used to assess the depression in this research. Each item was rated on a 4-point scale ranging from 0 = rarely or none of the time (less than 1 day) to 3 = most or all of the time (5-7 days). A total score was calculated by summing the responses after reversing the positive affect items. Higher scores reflect greater levels of depressive symptomatology. Radloff (1977) reported good internal consistency for the measure, with Cronbach's alpha coefficient of .95¹⁹. Data was analyzed by using Pearson correlation to check the relationship among study variables and Cronbach alphas were computed to estimate the internal consistency of scales. Multiple regression analysis was run to find out the predictors of maternal parenting and depression in the victims of domestic violence.

RESULTS

Table 2 shows correlation between domestic violence, maternal parenting (authoritative and authoritarian) and depression in the victims of domestic violence. Results indicate a significant positive correlation of domestic violence with authoritarian parenting (r =.65, p <.001) and depression (r =.35, p <.01) in the participants of study. Similarly the results show a significant negative correlation between domestic violence and authoritative parenting in the victims of domestic violence.

The values of R² indicate that domestic violence was contributing 49%, 56% and 47% in the authoritarian parenting, authoritative parenting and depression in the victims of domestic violence, respectively. The results also indicate that domestic violence significantly positively predicts authoritarian maternal parenting and depression in the women victims. Similarly the results depict domestic violence as a significant negative predictor of authoritarian parenting in the victims.

Table 1. Demographic variables of study sample (11 – 200)								
Variables		Frequency	Percentage					
Family system	Joint	121	60.5					
Family system	Nuclear	79	39.5					
Religion	Islam	189	94.5					
	Christianity	11	5.5					
Dowry	Yes	165	82.5					
	No	35	17.5					
Type of Marriage	Parental choice	171	85.5					
	Own choice	29	14.5					

Table 1: Demographic variables of study sample (n = 200)

Table 2: Correlation between domestic violence, maternal parenting (authoritative, authoritarian) and depression

Variables	Domestic Violence	м	SD	α	
Authoritarian Parenting	.65***	25.62	7.32	0.84	
Authoritative Parenting	53***	23.57	8.25	0.79	
Depression	.35**	29.20	10.26	0.85	
М	26.17				
SD	8.64				
α	0.83				

Note: M = Mean of scores, SD = standard deviation, α = reliability alpha, A***=P<.001, **=P<.01, *=P<.05

Variables	Authoritarian Maternal Parenting			Authoritative Maternal Parenting			Depression					
	В	SEB	β	CI	В	SEB	β	CI	В	SEB	β	CI
Psychological Violence	.10	.04	.20*	.02- .30	12	.04	21*	01- .31	.36	.07	.34**	.02- .59
Physical Violence	.61	.15	.52***		10	.03	20*		.17	.02	.20*	
R2	.49			.56		.47						

 Table 3: Domestic violence predicting authoritarian, authoritative maternal parenting and depression in victims of domestic violence

Note: B = Unstandardized coefficients; SEB= Standard error, β = beta values

DISCUSSION

This research was carried out to find the relationship between domestic violence, maternal parenting and depression in the victims of domestic violence. The finding of the1st hypothesis revealed that domestic violence was positively correlated with authoritarian maternal parenting in the victims of domestic violence. It is reported that when battered women are in abusive relationship they are 8 times more violent towards their children compared to when they have terminated that relationship²⁰. It is established that children are abused physically by the victims of domestic violence²¹⁻²⁴. In community samples, increased child abuse potential in both mothers and fathers was found to be associated with domestic violence²⁴.

Domestic violence was also found to be significantly positively correlated with depression which indicates that domestic violence produces depressive behavior in victimized women. Findings of this study corroborate with previous researches that partner violence is associated with increased depression. Moreover, major depression is considered as the most common psychological disorder among battered women^{25,26}. According to these findings, depression is associated with greater abuse severity^{25,27,28}. Depressed victims are at the greater risk of all types of injuries²⁹.

Negative correlation was found between domestic violence and authoritative maternal parenting in victims of domestic violence. The effects of domestic violence on authoritative parenting were examined by some studies who found that authoritative parenting behaviors were caused by physical and psychological abuse inflicted by their spouses³⁰⁻³². The victims of domestic violence use the same practice with their children and most of the time they remain abusive with them.

LIMITATIONS

The first main limitation was small sample size which may not be considered a substantial sample to gener-

alize on the whole population. Second, a few villages of Punjab were selected which are not sufficient to generalize our research findings.

CONCLUSION

Domestic violence has significant positive relationship with depression and authoritarian parenting, and significant negative relationship with authoritative parenting in victims of domestic violence.

IMPLICATIONS

The existing research has its implications in understanding the negative effects of domestic violence and general awareness among the masses. The male spouses need to understand the negative consequences of violence upon their wives and their children and to make them realize that the whole atmosphere of house is disturbed. A mother cannot pay attention to her child's basic necessities and become depressed. They should try to create a friendly atmosphere at home.

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CONTRIBUTORS

AS conceived the idea, planned the study and drafted the manuscript. MM helped acquisition of data, did statistical analysis, editing and final approval of manuscript. All authors contributed significantly to the submitted manuscript.