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ABSTRACT

Introduction
Domestic violence (DV) is a health, legal, economic, educational, and importantly a human rights issue. A fair question arises whether DV is given enough attention in the local context. It should be appreciated with the risk factors contributing to it in the society and effect it has on the society as a whole.

Objectives
Identify the demographic factors, awareness and understanding on domestic violence.

Methods
The study was conducted as a randomized cohort study, using a self-administered questionnaire, and analysis was done using the SPSS 22.0.

Results
98 participated. Majority were females. 88% were employed and 80% had completed GCE O/L. Sixty four percent stated they had faced some form of DV. 75.6%, 50%, 56% respectively agreed that sexual, verbal & psychological abuses are included in DV. Only 32% agreed that economical harm is included. 47.6% believed physical injuries are essential to file a law suit. 42.1% was not aware that the ex-spouse/partner can be a perpetrator and 37.5% stated only the spouse can be the perpetrator. 93.3% was aware that there are specific laws with regard to DV.

Alcoholism was identified as a major cause for DV by 74% and they believed that the perpetrators are usually aggressive people (53.8%), and DV is an expected normal phenomenon in family (34.2%).

Conclusion and recommendation
Sixty four percent had faced some form of DV, 68% was unaware that economical harm is included and 47.6% believed physical injuries are essential to file a law suit, indicating below average Knowledge of DV and related law. Thus further studies and awareness programmes are recommended.

Key Words: Domestic violence, rural community

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INTRODUCTION
Domestic Violence (DV) is defined as “any incident of threatening behavior or abuse (psychological, physical, sexual, financial or emotional) between adults who are, or have been intimate partners or family members, regardless of gender or sexuality”\(^1\). The Prevention of Domestic Violence Act 2005 Sri Lanka, which is gender neutral, defines domestic violence, inclusive of emotional violence, in a broad manner and includes violence between two members of the family including children and the elderly\(^2\). DV has long been a topic which discussed behind closed doors, with the Sri Lankan cultural background and the common belief of taking
care of their own family matters by themselves, which left the victims with stoic endurance as the only socially attractive solution.

There is a common misconception in the society that only women and children succumb to domestic violence and that the perpetrator is always a male. However, violence against women has reached epidemic proportions in many societies. Only a few individuals appreciate the broadness and complexity of domestic violence.

It is not a topic which can be considered in isolation, but instead should be appreciated with the risk factors contributing to it in the society and effect it has on the society as a whole. Multiple risk factors in varying capacities contribute towards the persistence of domestic violence seen in many societies. There can be characteristics of the victims and perpetrators that lead to acts of DV and the effects of such acts can remain long term, thus, understanding the nature of this problem is important in preventive aspects. Due to the very nature of matters arising related to DV, the problems cannot be directly observed and many reasons such as taboos, fear and feelings of guilt and shame can account for not coming forward.

During an extensive literature search, we identified a significant scarcity of recent research with regard to DV in the local context. None of the studies had been conducted in a rural setting. Furthermore, most of the previous studies were found to be outdated.

We conducted a preliminary study to explore the socio-demographic factors, personal experience of facing domestic violence, in order to have an insight regarding the prevalence within the selected group, awareness and risk factors regarding domestic violence and the awareness of the law such as what components are included in domestic violence act, options in acting against DV etc in a rural community.

OBJECTIVES

Identification of the,
1. Demographic factors with regard to DV
2. Awareness and general understanding regarding domestic violence.

MATERIAL AND METHODS

The study population was a group of individuals from a rural community of Galagedara from the central province of Sri Lanka. Convenient sample collection method was used in sample collection method.

A self-administrative questionnaire, which was pre tested and validated for this study was given to a selected random group of participants. They were informed that participation was purely voluntary in nature and that the data would be confidential and used for research purposes only. Ethical clearance was obtained from the ethical review committee, faculty of medicine, university of Peradeniya. People who were illiterate and refused to participate in the study were excluded. The data thus obtained was analyzed using SPSS version 22.0.

RESULTS

There were 98 participants included in this study. Two were excluded from the study due to the incompleteness of the submitted questionnaires.

1. Socio demographic factors

When considering the socio-demographic factors of the study population, the vast majority of the participants were found to be female 92. Of the study group, majority was married (92%) but none of them were divorced or co-habiting with their partners. The Mean age of the sample was 48 yrs. Eighty eight percent were employed and eighty percent had completed the General Certificate Examination – Ordinary Level.
2. Awareness and understanding regarding DV

From the participants, 64% have faced some form of domestic violence, while 32% denied any such problems. However, 4% was unaware whether they had faced DV or not. In this study, 75.6%, 50%, 57%, 56% respectively agreed that sexual violence, verbal abuse, denying access to basic necessities, psychological abuse are included in domestic violence while only 32% agreed that damaging property is included. Knowledge regarding the components of domestic violence is shown in Figure 1.

Physical injuries were identified an essential component in domestic violence by sixty nine percent of the population. Furthermore, 47.6% believed physical injuries are essential to file a lawsuit.

With regard to perpetrators of domestic violence; 42.1% were not aware that the ex-spouse or a co-habiting partner can be a perpetrator and 37.5% stated only the spouse can be the perpetrator. Fifty nine percent stated that the only legal measure is to complain to police, in a case of DV, while 35% was unaware that a protection order could be taken through a magistrate court, without a police complaint. However, 93.3% was aware that there are specific laws with regard to DV.

Alcoholism was identified as a major cause for DV by 74% and they believed that the perpetrators are usually aggressive people (53.8%). DV was also an expected normal phenomenon in the family in 34.2% of cases. The commonest mode of acquiring knowledge was newspapers (37%). Poverty, marital problems, and lack of awareness of DV were identified in descending frequency, as the common risk factors for DV by the study group. Figure 2 elaborates the frequencies of risk factors as identified by the study group.

![Figure 1: Knowledge regarding components of the domestic violence](image-url)
DISCUSSION

In Sri Lanka, domestic violence Act no 34 of 2005 is intended to prevent and to provide necessary legal measures on such instances. According to that, domestic violence is defined as “All offences contained in Chapter XVI of the Penal Code 2, Extortion-Section 372 of the Penal Code, Criminal Intimidation-Section 483 of the Penal Code 4, attempt to commit any of the above offences and any emotional abuse”. It also states that “any person co-habiting in a same property could be perpetrators, not necessarily a legal relationship is required to exist between intimate partners”. The offenses set out in chapter XVI of the penal code are “offences affecting the human body, i.e. offences affecting life, causing hurt, wrongful restraint and confinement, criminal force and assault, kidnapping, abduction and slavery, rape and incest and publication of matters relating to certain offences and any emotional abuse, (either of which is) committed or caused by a relevant person within the environment of the home or outside and arising out of the personal relationship between the aggrieved person and the relevant person”.

Majority of the study population in this study was females. The disparity of the sex of the participants might be due to the prevalent social myth, stating that only women are victims of domestic violence. Even though this was a sample of individuals from a rural community of Sri Lanka, literacy and employment rate was above average in this population. Therefore, it gives a better overview of the awareness and experience regarding DV.

This study shows a significant prevalence of DV (64%) among the rural population, showing it to be an essential issue on which further evaluation must be conducted on. Prevalence of domestic violence in Sri Lanka, ranges from 27% (Perera, 1990), 32% (Samarasinghe, 1991) and 40% (Jayatilleke et al., 2010) to as high as 60% (Deraniyagala, 1992). A community survey in western province in Sri Lanka concluded that the lifetime prevalence of physical violence(34%), controlling behavior (30%), and emotional abuse (19%) was high and the prevalence of sexual violence was low (5%). However, our study did not specifically explore the form of DV, and yet figured to be a significant issue.

Unsurprisingly, most of the group (75.6%) selected sexual violence as a key component of domestic violence. This level of awareness might be attributed to the broad media coverage on sexual violence and its prevention by the authorities. Interestingly, only 32% reported the damage to one’s

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Figure 2: Risk factors for domestic violence.
property / economical harm being a part of domestic violence. This highlights the lack of a comprehensive programme for improvement of awareness on DV.

Nearly half of the study group believed physical injuries are essential to file a law suit. Thus, bringing to light the majority opinion that DV is mainly of a physical nature, and to present any legal action, there must be documentable physical injuries. This downplays the psychological aspect of DV and the role of psychological traumatization. However, it is noteworthy that proving psychological damage of a victim may need expert support, and might be a collective conclusion.

Lack of knowledge regarding the perpetrators highlights the common misconception and false opinion rampant in the society regarding DV occur only between spouses. This fact may contribute to under reporting of the DV, since women may be socially embarrassed to file a complaint against a co-habiting partner who is not legally married. In fact, violence against those women may be intense, both physically and psychologically, where they are ill-treated in the social background of our country.

Majority Stating that the only legal measure is to complain to police, in a case of DV, shows lack of any dissemination of knowledge or awareness on the legal aspect of DV, rights of the victims and the steps to be taken against perpetrators. It is clearly stated in the law that a protection order could be obtained directly from Magistrate Court with the help of a lawyer. Lack of help seeking behavior were due to embarrassment, concerns of family reputation and fear of more violence and some women have accepted violence as normal behavior, where in this study 34% agreed similarly. This situation indeed is a downfall of all the re-enforcements that are carried to empower victims of DV, since many people will stay behind assuming DV must be tolerated than act upon.

It is worthwhile to look into the risk factors of DV a point where authorities can implement programmes in prevention. An Indian study highlights the fact that economical dependency may be the reason why most women remain silent, where in our study poverty was pointed out as a risk factor for DV. Apart from that Alcoholism, relationship problems, lack of awareness regarding DV were the risk factors identified by the study group. This is in consistence with existing literature of risk factors in the local context.

Characteristic of the perpetrators of the DV was identified as the ‘usually aggressive’ people by the study group, which may be not true in most circumstances, where some of the perpetrators tend to be emotionally/ relationship dependant while only some are antisocial and primarily hostile towards women. Perpetrator training programmes could an effective method in preventing DV and also survivors of the DV should be taken care at the community level since they are prone to social, psychological and economical instabilities.

DV is an unpleasant experience one can encounter in their life, which may create a huge impact on the victims that will hinder their normal perspectives of family and marriage. The need for extensive and long term programming to address DV is urgent from policy level to community level in the local context.

CONCLUSION AND RECOMMENDATION

Majority of the study population were females, employed and with secondary education. A majority had faced some form of DV, with many agreeing to physical abuse being the key component of DV. Majority were of the opinion that spousal abuse was the primary component of DV. Regarding the legal proceedings and laws on DV, the majority stated that the police should be the first contact in a complaint against DV, where some were unaware of alternative methods of obtaining protection against DV. Alcoholism and aggressiveness were noted as common
traits in the perpetrators. Commonest mode of acquiring knowledge was from newspapers. Poverty, marital problems, and lack of awareness of DV were identified as the common risk factors for DV by the study group.

We recommend the use of this study as a baseline in the identification of the socio-demographic factors and level of awareness and experience of DV in the community. This preliminary result can be the first step in other studies with a substantial study population in the thorough analysis of the various risk factors and preventive factors regarding DV. Furthermore, the proper dissemination of knowledge and awareness building should be directed to the rural communities of Sri Lanka, with the aim of significantly reducing the level of domestic violence prevalent in the community.

REFERENCES


