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An Investigation on Aggression Level among Female Victims of Wife Abuse Referred To Kermanshah Forensic Medicine

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ABSTRACT

Domestic violence has many side effects for victims. The abused person's psychological problems is one of its adverse consequences. One of the most common problems is that the victims get prone to aggressive behaviors. The current study tries to study level of aggression among female victims of wife abuse who had referred to Kermanshah Forensic Medicine. This study is of cross-sectional type. Its statistical population include all female victims of domestic violence referred to Kermanshah Forensic Medicine in 2010. Research subjects include 60 women who are available and ready to participate in this research. Here, Buss Perry aggression questionnaire is used and the collected data is analyzed by SPSS-18. Data analysis show that overall level of aggression among female victims of wife abuse is above normal (r= 46.021 and P= 0.000). This is the case for other components of aggression and level of verbal aggression (r= 21.502 and P= 0.000), physical aggression (r= 25.646 and P= 0.000), anger (r= 37.780 and P= 0.000) and hostility of female victims of wife abuse (r= 28.993 and P= 0.000) is above normal as well. In this way, aggression level of female victims of wife abuse who had referred to Kermanshah Forensic Medicine is above normal and it seems that such women suffer from different psychological problems including high level of aggression.

KEYWORDS: Aggression, Anger, Hostility, wife abuse.

1- INTRODUCTION

Domestic violence is defined by World Health Organization as a behavior which causes physical, sexual and psychological harm in an intimate relationship and includes actions such as physical aggression, sexual coercion, psychological abuse and controlling behaviors [1]. This matter appears to be a common mental health problems all over the world [2]. "Violence against women" contains a wide range of behaviors including sexual behavior, excitements, sexual assault, threats, verbal abuse, contempt and murder by spouse [3].

Several studies performed by World Health Organization about prevalence of physical violence against women in different sectors of the world show that between 20%-50% of women experience violence in any country [4]. According to America Psychological Association in 1996, 3.5 million children witness domestic violence against their mothers per year. In a national survey research on violence against women, the primary physical violence (from the first days of marriage till now) has been estimated 81.7% and the secondary physical violence (from the middle of marriage till then) has been estimated 62.2% at the national level. Moreover, this study show that severe physical violence in Iran had a prevalence of 32% [3]. Vamghi's findings [5] show that in total 22.8% of students in Tehran have witnessed physical violence between their parents at least once upon a time.

Esvan and Snow in 2002 defined three types of abusive relationship for women: women as victim (34%), women as the cause of aggression (12%), and the combined relations (50%). However, gender differences should be taken into consideration in relation to consequences of violence against spouses. In general, women often need more medical care compared to men [6].

Violence against women has alarming consequences include threatening their mental and physical health and destroying their self-esteem which in turn have negative effects on women' health and more broadly on their child's health status. Moreover, this matter leads to certain femininity diseases, damage to mental health and pregnancy problems. This may also increase the risk of women's diseases and chronic pains, physical disabilities, alcohol and drug abuses and depression [7].

Several researches have been made in this field including those in the developing countries indicating the important links between domestic violence against women and their physical and mental health. According to Skoda and Hershen [8], female victims of violence are helpless, susceptible, ashamed, weak, flexible, depressed and defenseless. Palhoni et al., [9] introduce physical violence against women as the cause of their grief, fear, unsafety and anger. Haqqi et al., [10] in their study on prevalence of domestic violence among the depressed women who had referred to Psychiatric hospitals show that 69.5% of them had experienced a kind of domestic violence. In studies

undertaken about women' emotional and psychological abuse and their efforts to suicide in US, it is observed that probability of their suicide is 12% more than others and in general 35% -40% of them commit suicide [4]. In Iran, Yousefabad et al., [11] consider high level of angry, low level of happiness and lack of inflexibility as the characteristics of the women suffer from anger. Moezzi et al., [12] consider domestic violence against women as the cause of their mental health problems particularly their physical compliment, depression and aggression. Shahedifar et al., [13] consider domestic violence against women as the cause of sexual disorders, the decreased self-confidence and the disrupted interpersonal relations. Panaghi et al., [3] show that the abused women gain lower scores in social support and mental health and higher score in coping strategies [3].

In this way, several researches have been performed about unfavorable consequences of violence against women by their closest person who despite the fact that he is their support in the family cause them to feel unsafety. Anger, hostility and aggression of female victims of wife abuse are among the important issues which have been seemingly addressed to a less extent. Wife abuse may cause the victims to sacrifice themselves or other members associated with them in different ways.

On this basis, the current research investigates aggression feature among female victims of wife abuse who had referred to Kermanshah Forensic Medicine.

2- MAIN CONTENTS

Wife abuse is a damage imposed on the person particularly at the time of anger and aggression. Aggression is a behavior appeared to harm (physical or verbal) or somehow hurt others and destroy their property [14]. Buss Perry consider four types of aggression subcomponents including verbal aggression, physical aggression, anger and hostility [15]. To define anger and hostility and their differences with aggression, it should be noted that anger is described as an exciting state underlying aggression and hostility. Hostility refers to inclusive aggressive attitude leads to aggressive behaviors and as it has been already said aggression refers to the observable behavior aims to damage [17].

Women basically get angry whenever they are denied and behaved unfairly or in non-responsible ways [12]. The researches show the relationship between interpersonal rejection and aggression. Rejection will result in anger and aggression if it causes the person's emotional distress or threatens his self-esteem. In fact, aggressive behavior is often considered as the means of re-establishing control, improving mood and retaliating [17].

The above descriptions are associated with backgrounds cause aggression among female victims of wife abuse. In addition to other harmful effects of wife abuse which have already been mentioned, it is considered as a serious threat to self or others. Originally, lack of comprehensive studies about aggression consequences for female victims of wife abuse which may make them to victimize is obvious. Such studies should be done to find appropriate strategies to prevent its harmful consequences. On this basis, the current research investigates aggression of female victims of wife abuse who had referred to Kermanshah Forensic Medicine.

1-2. MATEREAL AND METHODS

The current study is of descriptive type. Its aim is to study all female victims of domestic violence who had referred to Kermanshah Forensic Medicine in 2010. Statistical population include 60 female victims of domestic violence who are ready to participate in the study. The subjects are available or easily ready to participate in the research.

Research tools include Buss Perry aggression questionnaire. The main version of this questionnaire contains 52 questions but many of its weak questions have been deleted based on factor analysis and so its questions have been reduced to 29 questions. This questionnaire has been translated by Sanaee and its reliability and validity has been shown by Langari [17].

This 29 question questionnaire surveys four dimensions of aggression including physical aggression, verbal aggression, anger and hostility as well as overall level of aggression. In foreign research, this questionnaire has been shown to be well in terms of internal validity. Moreover, Cronbach's Alpha coefficient is calculated for subscales of physical aggression (85%), verbal aggression (72%), anger (83%) and hostility (77%). Cronbach's Alpha coefficient for total score of questionnaire is also calculated (89%). Its reliability coefficient after a ninth course has been reported for physical aggression (80%), hostility (72%), anger (72%), verbal aggression (76%) and total questionnaire (80%) as well [18]. Buss Perry reported this test in the second test-retest between 72%-80%. Also, they reported internal consistency of these four factors along with total score of its validity between 72%-89%. In addition, they reported internal consistency of this test by Cronbach's Alpha (89%) as well as its validity in the second retest (r= 0.080) (Garcia et al.,2002). In addition, internal consistency of components of this test along with total score in a study on 184 Spanish subjects for verbal aggression (57%), hostility (82%), anger (77%), and physical aggression (63%) have been calculated [17].

After collecting the required information through the questionnaire, data are analyzed by SPSS software and both descriptive and deductive index including mean, deviation standard, Pearson correlation coefficient and regression are calculated.

2-2- RESULTS

Statistical population include female victims of domestic aggression who have referred to Kermanshah Forensic Medicine in 2010. Research subjects include 60 women who are reluctant to participate in the research. The subjects are

available. Table 1 represents mean and deviation standard associated with the research variables. One group t-test is also used to analyze the data research hypothesis. The results is presented in table 2.

Table 1. Statistical Index based on Deviation Standard and Mean

Variable	Mean	Standard Deviation
Anger	20.6167	4.22700
Hostility	23.5167	6.28286
Physical Aggression	28.0667	10.11102
Verbal Aggression	13.9667	4.21847
Overall Aggression	84.4667	14.21680

Table 2. One Group T-test in relation to Level of Aggression, Anger and Hostility among Female Victims of Wife Abuse

Variable	Correlation Coefficient	Meaningful Level
Anger	37.780	0.000
Hostility	28.993	0.000
Physical Aggression	21.502	0.000
Verbal Aggression	25.646	0.000
Overall Aggression	46.021	0.000

Given the results for statistical analysis and based on the scores obtained in aggression test, it is observed that overall aggression of female victims of wife abuse (r=46.021 and p=0.000) is above normal. Moreover, in relation to other components of aggression test it can be said that level of verbal aggression (r=21.502 and p=0.000), physical aggression (r=25.646 and p=0.000), anger of female victims of wife abuse (r=37.780 and p=0.000) and level of their hostility (r=28.993 and p=0.000) are above normal.

3- CONCLUSION

The fact is that anger has long term effects on the victims' behavior and decreases their own physical-psychological health and compatibility ability [19]. Studies show a meaningful relationship between domestic violence and suicidal behavior [4]. In addition, interpersonal rejection, the decreased self-esteem and incentives for reestablishing control or retaliating are considered as the causes of violence and aggression [17].

Given the goal of this study, the women who had referred to Kermanshah Forensic Medicine as the target society and 60 persons are studied based on Buss Perry questionnaire and their regression scores at 4 level of physical aggression, verbal aggression, anger and hostility and overall aggression. The results show that aggression level among female victims of wife abuse were meaningfully above average in these aspects.

In this way, this research considers aggression of female victims as an alarming factor appeared as a result of domestic violence. It is an increasing threat to women and their relatives given their important roles in family such as motherhood as well as their social and occupational roles.

Consequences of domestic violence can be defined in two ranges of depression and passivity or violence of the female victims. Such consequences have harmful effects at the individual, family and social level. However, it can be significantly decreased by educating appropriate coping strategies, developing social support by organizations and providing families with the required information about supporting their daughters without relying on inappropriate belief and superstitious belief.

REFERENCES

- 1. Panaghi. Leily, Ghahari. Shahrbano, Ahmadabadi, Zohre, Yoosefi. Hamid (2008) Spouse abuse and mental health: The role of social support and coping strategies, journal of Iranian psychologists. Vol5.17.
- 2. Guedes, Rebeca., Tereza Medeiros, Ana (2007) "Marital Violence: Stating the Problems of Women Victims of Oppression under a Gender View", Brazilian journal of Nursing, vol. 6, pp. 3.
- 3. Alazmy, Saadoon F., Alotaibi, Deema M., Atwan, Aminah A., Kamel, Mohammed Ibrahim, El-shazly, Medhat (2011), "Gender difference of knowledge and attitude of primary health care staff towards domestic violence', *Alexandria journal of Medicine*, vol. 47, pp. 337-341.
- 4. Golu, Florinda, (2014) "Predictors of Domestic violence Coparative Analysis", *Procedia Social and Behavioral Sciences*, vol. 127, pp. 611-615.

- Taherkhani. Sakineh, Mir mohammad ali. Mandana, Kazem nejad. Anooshirvan, Arbabi. Mohammad (2009)
 A survey on prevalence of domestic violence against women and relationship with couple's characteristics.
 HBI Journals, 15(2), 123-129.
- Khosravipour, Elnaz., Mohammadkhani, Parvane., Dolatshahi, Behrouz, Pourshahbaz, Abbas., Alizadeh, Ommehani., Yousefnejad, Maedeh, (2011) "Risk factors of Marital Violence of Married Men and Women in Different Levels of Severity", *Procedia Social and Behavioral Sciences*, vol. 30, pp. 1221-1229.
- Almutairi, Ghaleb D., Alrashidi, Mohammad R., Almerri, Ali T., Kamel, Mohamed I., El-shazly, Medhat (2013) "How to screen for domestic violence against women in primary health care centers", *Alexandria journal of Medicine*, vol. 49, pp. 89-94.
- 8. Skoda, H., Medieval Violence: Physical Brutality in Northern France, 1270-1330 (Oxford, 2013)
- Rodrigues Garcia Palhoni, Amanda., Araujo Amaral, Marta., Maria Mottos Penna, Claudia (2014)
 "representations of violence against women and relationship ti their quality of life", Brazilian journal of
 Nursing, vol. 13, pp. 1.
- Haqqi, Sobia., Faizi, Abul., Haqqi, Sobia.(2010) "Prevalence of Domestic Violence and associated Depression in married Women at the Tertiary care hospital in Karachi", *Procedia Social and Behavioral Sciences*, vol. 5, pp. 1090-1097.
- 11. Zebardast Yousefabad, Maryam., Mahmoud Alilou, Majid (2013) "Comparision of attachment styles and personality sides between women who are victim of domestic violence and ordinary women", *Social and Behavioral Sciences*, vol. 84, pp. 1005-1009.
- 12. Moezzi, masoumeh. Azami, mehran, Shakeri. Mostafa, Pourheidar. Behrooz (2008) How does spousal violence affect mental health of women in Chahar-Mahal Bakhtiari, 16 (1), 20-25.
- 13. Shahedifar. Nasrin, Sharifian. Thani, Maryam, Blazing star. Ameneh, Biglarian, Ali (2009) Exposure to physical violence between the parents and their relationship with self- steem, *social walfar*, N.34.
- Abbasi, M (2009) Psychological factors in spouse abuse and attitude to Islamic teaching, The education journal, no.9, 30-38.
- 15. Rodrigues Garcia Palhoni, Amanda., Araujo Amaral, Marta., Maria Mottos Penna, Claudia (2014) "representations of violence against women and relationship ti their quality of life", Brazilian journal of Nursing, vol. 13, pp. 1.
- 16. Ratvs. Spencer, Promise. Jeffrey (2012) Mental health, translate: Syed Mohammad. Yahya, publisher Arasbaran, fourth edition.
- 17. Langari, MR (1997) "Compare of aggression rate in migrant student male and who they are not (Persian)", MA Thesis in Psychology, Faculty of Education Tarbiat Moalem University Tehran, vol. 12, pp. 83-102.
- 18. Leonard RL (2005) "Aggression, Relationships with Sex, Gender-Role Stress", MA thesis in psychology, Tennessee: The Department of Psychology East Tennessee State University, vol. 10, pp. 98-99.