Chapter 5

Conclusions and Discussion

The purpose of this study is to investigate the factors associated with nature of domestic abuse to pregnant women in Pattani Province, and to develop a model for describing the risks of the various types of domestic abuse for pregnant married women. The study sample comprises 611 pregnant women attending antenatal care clinics in Pattani Hospital between 1 July 2002 and 21 November 2002. The responses from these subjects who agreed to participate were obtained using a structured questionnaire.

Statistical method

The analysis involves using chi-squared tests to investigate possible associations between the domestic abuse outcome, classified into five abuse categories, and the ordinal and nominal determinants specified on the questionnaire. The five abuse categories are 0: no abuse, 1: sexual abuse only, 2: sexual and emotional (but not physical) abuse, 3: physical (but not severe physical) abuse, and 4: severe physical abuse. Odds ratios with 95 percent confidence intervals are used to show the strengths of these associations.

Next, the determinants found to be associated with the outcome are incorporated into an ordinal logistic regression model in which the outcome categories are ordered according to the codes specified above. This model contains only those determinants found to be statistically significant at the 5% level in the preliminary analysis.

Finally, the ordering of the abuse outcome is varied by interchanging codes 2 and 3, to see if it is more reasonable to assume that sexual and emotional abuse might be more
serious, in terms of the direction of the risk factors already established, than physical abuse. The criterion for answering this question is based purely on the goodness-of-fit of the model, measured using its residual deviance. Finding that the residual deviance increases substantially when the codes for sexual+emotional abuse and physical (not severe) abuse are interchanged, it might be concluded that the original coding is plausible.

5.1 Conclusions

The following findings were observed in the study.

The overall percentages of the types of domestic abuse are as follows. Most of the women (54.8%) suffered some form of abuse, with 5.2% experiencing sexual abuse only, 20.0% experiencing sexual and emotional (but not physical) abuse, 17.5% suffering physical abuse but not severe physical abuse, and 12.1% being severely abused physically.

When the associations between the abuse outcome and 20 specified determinants (religion, residence, length of relationship, marital status, family type, family size, number of children, age, age at marriage, education, occupation, income, previous partners, card-playing habit, partner’s age, partner’s education, partner’s occupation, partner’s income, partner’s number of wives, and partner’s addiction) are considered, ten are found to be related to the outcome. These comprise length of relationship, marital status, number of children, age at marriage, education, income, having a previous partner, card-playing habit, partner’s education, and partner’s addiction. However, when these factors are considered jointly using multiple logistic regression analysis, only five are found to be associated with the abuse outcome, namely age at
marriage, education, income, having a previous partner, and partner's addiction. When
the other five determinants found to be statistically significant in the univariate analysis
are omitted from consideration, the results may be summarised as follows.

(a) Women who marry before turning 20 are at higher risk of abuse than those who
marry at age 20 or more.

(b) Women with a university education are at lower risk of abuse than less educated
women.

(c) The lower the woman's income, the greater the risk of abuse.

(d) Women who have had one or more previous partners are at higher risk of abuse.

(e) Women whose partners are addicted to gambling and drinking (but not smoking or
taking drugs) have increased risks of abuse.

The risk of abuse depends on the type of abuse. The estimate of this risk is given by a
model, using a formula. This model gives estimates for the risks of different types of
domestic abuse based on the five determinants found to be risk factors. Substituting the
results given in Table 4.2 into Equation (2.15), the risks for the various types of
domestic abuse can be obtained for any given set of determinants, as the next example
shows.

For a woman married aged 20-24, with a bachelor's degree, no income, no previous
partner, whose partner smokes but does not have any other addictions, the score
function \( \sum b_j x_j \) is \(-0.4884 + (-0.8263) + 0 + 0 + (-0.2745) \), that is, \(-1.5892 \). The risk
of at least physical abuse is given by \( 1/(1+\exp((-1.1775)-(-1.5892))) = 0.0592 \), and
the risk of severe physical abuse is \( 1/(1+\exp((-2.3876)-(-1.5892))) = 0.0184 \).
Table 5.1 shows the predicted risk of various kinds of domestic abuse for three sets of determinant values. Set A (average risk) refers to women married before turning 20, with a primary or secondary school education, no income, no previous partner, and partner having no addictions. Set B (lowest risk) refers to women married at age 20-24, with a bachelor degree, earning 10,000 baht/month or more, no previous partner, and partner a smoker only. And set C (highest risk) refers to women married before turning 20, with high school completed by no university degree, earning was less than 4,999 baht/month, at least one previous partner, and having a current partner with every addiction.

| Set | Abuse level |  |
|-----|-------------|------------------|------------------|------------------|------------------|
|     | none | any | At least Sexual+emot. | At least Phys-notSev. | At least Phys-severe |
| A   | 0.498 | 0.502 | 0.443 | 0.236 | 0.084 |
| B   | 0.954 | 0.046 | 0.037 | 0.015 | 0.004 |
| C   | 0.090 | 0.910 | 0.889 | 0.756 | 0.479 |

Table 5.1: Estimated risks of types of domestic abuse

This model thus provides useful estimates of the risks of domestic abuse for pregnant women. The advantage of this model is that government and health professionals could use it for screening and prevention. The institute of education should be concerned about domestic abuse, such as effects and prevention, and co-operate with the government to stimulate the appreciation and dignity of women. Community attitudes reveal that domestic abuse is not just a domestic problem but a community problem.
5.2 Discussion

Our study found that more than 50% of women who consented to be interviewed during their pregnancy said that they had experienced abuse by their partner. While this proportion is perhaps higher than those found in previous studies (for example, Walker 1984, Gazmararian et al, 1996, Muhajarine & D’Arcy, 1999, United Nations, 2000, Phijaisanit et al, 2000, Krug et al, 2002) those studies focused solely on physical abuse. Our study included physical, sexual and emotional abuse. We found that 30% of pregnant women suffered physical abuse, including 12% who suffered severe physical abuse. This figure is quite consistent with the findings of previous studies.

We found five factors, namely age at marriage, education, income, having a previous partner, and the partner’s addiction, to be positively associated with domestic abuse in the multiple logistic regression model.

Married women aged less than 20 have a higher risk of domestic abuse. We suggest that these women were likely to be particularly poor, yet being financially supported by a third party was protective factor. This appear to be confirmed by the finding from Thailand (Hoffman et al, 1994) that an important part of the relationship between poverty and domestic abuse is explained through greater conflict over resources in poor households.

In our study, a small number of women (10.3%) with a university education were found to be protective against having ever been abused. This result is similar to other studies which found that women who had a higher education or were economically independent were less likely to be abused (Rao, 1997).
In this study women’s income was associated with domestic abuse, agreeing with (Ellsberg et al, 1999, Hoffman et al, 1994). In contrast Jewkes et al (2002) found no evidence of an association between income and domestic abuse, however the women’s income in this study is not the main source of money.

Having more than one partner in the previous year was associated with domestic abuse. This finding was consistent with a study in South Africa (Jewkes et al, 2002).

Having a Partner with an addiction was found to be associated with domestic abuse. This may be partly because of association between conflict and domestic abuse. After drinking and gambling partners hit the women. This result has also been confirmed in previous studies (Hedin & Janson 2000, Jewkes et al 2002, Hoffman et al 1994, Rao 1997).

5.3 Recommendation and further Research

The social welfare or health professionals may use the result of this study for screening and prevention of risks associated with domestic abuse among married women.

In further studies, the questionnaire should be improved with clear and simple definitions of the abuse levels of domestic abuse. In addition, follow up of domestic abuse among women who have been interviewed should be done, to classify which levels of abuse are considered more serious and damaging in the long term. Moreover, a study sample should include not only women but also their partners.