A Psycho-Social Study of Domestic Violence in Samastipur Bihar

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ABSTRACT

Domestic violence is a sub-type of interpersonal violence, which is known as characteristics based violence. Generally we see that violence between family members and intimate partners usually through not exclusively, taking place in the home. Thus we can define domestic violence that “Domestic violence is an intimate relationship such as marriage, dating, family, friends or cohabitation”.

Thus, today domestic violence make a main issue for Indian society and individuals. So, it is decided that to do research work should perform in the field of domestic violence.

The main objectives of the investigation has been to study the domestic violence in Psycho-social perspectives. The study is aim to see the relationship between depression and adjustment, Socio-Economic-Status and frustration, and comparative study between domestic violent and non-violent family in term of depression and Socio-Economic Status. The sample consists of 100 families (50 normal families and 50 domestic violent families) were selected from Samastipur district in Bihar. The incidental cum purposive sampling method was used for this study. The Depression Scale developed by Karim, Frustration Scale developed by H.S. Chauhan & G. Tiwari, Hindi version of Bell’s Adjustment Inventory adapted by M.Shamshad & K. Jehan and Socio-economic Status Scale developed by Singh & Saxena was used. The background information about sample was also collected through self-prepared Personal Data Sheet.

The obtained results showed that (i) Depression and Adjustment and its different dimensions (home, health, social emotional and total score) was positively correlated (i) Socio-economic status of respondents was negatively correlated with frustration, (iii) There were significant difference between domestic violent family and normal family in term of depression and socio-economic status.

Key Words : Psycho-social, Domestic, Violence
INTRODUCTION

Violence is defined by the World Health Organization as the intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community, that either results in or has a high likelihood of resulting in injury, death, psychological harm, maldevelopment or deprivation. This definition associates intentionality with the committing of the act itself, irrespective of the outcome it produces.

Globally, violence takes the lives of more than 1.5 million people annually: just over 50% due to suicide, some 35% due to homicide, and just over 12% as a direct result of war or some other form of conflict. For each single death due to violence, there are dozens of hospitalizations, hundreds of emergency department visits, and thousands of doctors’ appointments. Furthermore, violence often has life-long consequences for victims’ physical and mental health and social functioning and can slow economic and social development.

Violence, however, is preventable. Evidence shows strong relationships between levels of violence and potentially modifiable factors such as concentrated poverty, income and gender inequality, the harmful use of alcohol, and the absence of safe, stable, and nurturing relationships between children and parents. Scientific research shows that strategies addressing the underlying causes of violence can be effective in preventing violence.

Domestic Violence is a sub-type of interpersonal violence which is known as characteristics based violence.

Generally, we see that violence largely between family members and intimate partners usually, through not exclusively, taking place in the home. Thus, we can define domestic violence that, “Domestic violence is as a pattern of abusive behaviors by one or both partners in an intimate relationship such as marriage, dating, family, friends or cohabitation.

Thus, today domestic violence make a main issue for Indian society and individuals. So, it is decided that to do research work should be perform in the field of domestic violence.

According to the National Family Health Survey (NFHS), one in five married women in our country faced domestic violence from the age of 15. A nation wide survey showed that 52 percent of women suffer at least one incident of physical or psychological violence in her whole life. Every six hours, a young married women is beaten to death, burned alive, or driven to commit suicide. It is estimated that more than 15,000 women’s suffers from dowry-related violence every year. As per UN statistics two third married Indian women are victims of domestic violence.

The term ‘depression’ covers a variety of negative mood and behavioral changes (Sarson and Sarson, 1999). Some are normal fluctuation and others meet the definition of
clinical problems. The mood change may be temporary or long-lasting, it may range from a relatively minor feeling of melancholy to a deeply negative view of the world and an inability to function effectively. There are several kinds of depression. Long lasting negative mood that may interfere only mildly with effective behavior and several depressed mood accompanied by a marked but usually temporary inability to function effectively. Some symptoms of depressive disorder include dissatisfactions and anxiety, changes in appetite, sleep and psychomotor function, loss of interest and energy, feelings of guilt, thought of death, and diminished concentration. Many of these symptoms of depression are frequently reported by people who are not classified as having a depressive disorder. For instance, almost 23% of men and 36% of women in large epidemiological study reported a period lasting two week or more when the felt sad and blue (Robinson and Roger, 1991). However, only a much smaller proportion of the sample i.e. about 4% of the men and 9% of the women had enough of these symptoms at any one time so that they could be classified as experience a depressive episode.

The word ‘frustration’ comes from the Latin ‘frustra’ meaning ‘in vain’. Dictionary definition ordinarily includes the idea of being defeated or thwarted. Frustration, which begins in the very earliest period of life is a condition in which one seeks to attain a goal of some kinds and finds that his or her way to the goal is blocked by a barrier (Kisker, 1977).

When a person’s strivings are thwarted within by obstacles that block progress toward a desired goal or by the absence of an appropriate goal, frustration occurs. Frustrations can be particularly difficult for an individual to cope with because they often lead to self devaluation making the person feel that he or she has failed in some way.

Marital adjustment and domestic violence are negatively related each other. In many researches it is found that domestic violence exploits due to bad relationship between life partners. Bad relationship between life partner is known as poor marital adjustment level. So, hence researcher felt that analyze marital adjustment as a psycho-social factors for domestic violence.

Amidst various controversies regarding and agreed definition of adjustment we followed the following interpretation given by Hussain, S. (1987). Adjustment can be regarded as a process by which the individual tries his best to maintain a harmonious, stable and satisfying relationship with his environment. In the process of adjustment and individual attempts at satisfying his needs in the light of environmental pressure as well as his own abilities and limitations. A healthy adjustment aims at long term satisfaction instead of satisfying of their own motives. Further, one should remember than it is difficult to describe peoples as well adjusted or poorly adjusted because adjustment involves a continuous variable.
Another important question is that who are well adjustment and who are poorly adjusted; or when does a person make healthy adjustment? It will not be a simple question of classifying individuals as adjusted and maladjusted. Adjustment is considered to involve a continuous variable so the evaluation of individual’s in terms of this variable cannot be limited to two extremes. Moreover, psychologist, or for that matter even other persons, fail to provide scientific and objective criteria of healthy adjustment, or unhealthy adjustments. The reason for this has been enumerated. We know that standards of adjustive behaviour may vary with time, place, culture, circumstances and the characteristics of the individual.

An individual may be called adjusted at one time but he may be maladjusted at another time in the same social context. He may be adjusted to one aspect of life and not to another. For example, he may be emotionally adjusted but socially maladjusted. Criteria against which adjustment is evaluated either as good or bad are provided by a particular cultural context, based on its value systems. And this value system naturally differs from one culture to another or from one generation to another. Some of the indicates of good adjustment at present might become a sign of maladjustment in the future, as for example in a few societies psychotic hallucinations were identified as supernatural and god gifted, whereas numbers of other societies considered psychotic persons as possessed by the devil and wanted to destroy them (Lazarus, 1961). Even today psychotics are considered to be extremely maladjusted persons.

Socio-Economic status of respondents also assist in violent behavior. It is (SES) for responsible for domestic violence. Therefore, hence research decided to use SES Scale for assessing Socio-Economic-Status of respondents, which determine domestic violence.

**OBJECTIVE & HYPOTHESIS**

The main objectives of the study was to make a psycho-social analysis of domestic violence.

On the basis of review of literature and objectives of the research work following hypotheses were formulated :-

1. There would have positive relationship between Depression and Adjustment.
2. There would have negative relationship between SES and Frustration.
3. There would have significant differences between domestic violent family and domestic non-violent family in term of depression.
4. There would have significant differences between domestic violent and non-domestic violent family in term of Socio- Economic status.
METHODOLOGY

(i) Sample:- For imperial study 100 families (50 normal families and 50 domestic violent families) was selected from both rural and urban areas of Samastipur District in Bihar.

(ii) Tests used:- The following scales was used for further study:-

(a) DEPRESSION SCALE:-To measure the depression level of subjects, depression scale developed by Karim in Hindi was used. This scale measures the various areas i.e., apathy, sleep disturbance irritability, social with drawl and self centeredness, self harm, change of self image, loss of libido, somatic reoccupation and indecisiveness. This scale has 96 items. It is found valid, reliable and confident for research purpose. It is published by Agra Psychological Cell, Agra.

(b) FRUSTRATION SCALE:- To measure the frustration level of respondents Frustration Scale developed by H.S. Chauhan and G. Tiwari was used. This scale has 40 items based on different areas like; Agg, RT, AP, F, RE, S and overall areas. For research purpose this scale is very suitable, reliable and valid in Indian Psycho-social context.

(c) ADJUSTMENT SCALE:- To measure the adjustment level of respondent’s, Hindi version of Bells Adjustment Inventory adopted by M. Shamshad & K. Jehan (1987) was used. It has 124 items based on different areas like home, health, social and emotional as well as overall. The high score on this scale indicate poor adjustment and low scores on this scale indicate better adjustment. This scale is largely used by researchers in Indian socio-cultural view point.

(d) SOCIO-ECONOMIC STATUS SCALE:- To measure the Socio-economic status of respondent’s Socio-Economic-Status Scale (rural and urban) developed by Singh & Saxena will be used. This scale is also valued and reliable for measuring Socio-Economic Status of proposed sample.

(e) PERSONAL DATA SHEET:- For electing the personal background information’s such as; name, age, sex, rural-urban inhabitation, education level of respondents and their family members, family type, No. of family members, attitude of family member’s toward respondents etc. was collected with the help of Personal Data Sheet, developed by researcher.
Table No.-01

Correlation between Depression and Adjustment

<table>
<thead>
<tr>
<th>Depression</th>
<th>Adjustment and its dimensions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Home</td>
</tr>
<tr>
<td>.67*</td>
<td>.69*</td>
</tr>
</tbody>
</table>

*Significant at <.01 ** Significant at <.05 Level.

Above table no.- 01 displayed that there were negative relation between depression and adjustment and its dimensions (i.e. home, health, social & emotional) as well as total scores. The obtained Rs .69, .75, .52 and .80 were significant at less than .01 level and only Rs .46, on emotional adjustment was significant at less than .05 level of confidence. This result shows that if depression level found higher then level of adjustment found poor. Hence, we all ready to know that high scores on adjustment scale denotes poor level of adjustment and low scores on adjustment scale denotes better level of adjustment.

Table No.-02

Correlation between Socio-Economic Status and Frustration

<table>
<thead>
<tr>
<th>SES</th>
<th>Frustration and its dimensions</th>
</tr>
</thead>
<tbody>
<tr>
<td>.29*</td>
<td>Agg</td>
</tr>
<tr>
<td></td>
<td>.63*</td>
</tr>
</tbody>
</table>

**Significant at <.05 * Significant at <.01 Level.

Looking at the table no.-02 revealed that there were SES negatively related with frustration and its dimensions (i.e. Agg, RT, AP, F, RE and S) as well as total scores. The obtained rs. on Frustration scale were significantly correlated with socio-economic status of respondents. This result clear's that if socio-economic-condition of respondents found lower then respondent's frustration level higher. The rs (except F) were significant at <.01 level of confidence and only F were confident on <.05 level of confidence.
An attempt was also made to examine the effect of depression on domestic violence. For this purpose, scores obtained and analyzed with t-test. The findings presented in above table no.-03 revealed that there were significant differences between domestic violent family and normal family. The obtained t-test was significant at less than .01 level of confidence. This result cleared that depression level play important role in domestic violence comparison to normal family.

An inspection of above result put in the table no.-04 cleared that there were significant difference between domestic violent family and normal (non-domestic violent) family in term on socio-economic status. This result indicate that poor socio-economic status of respondents occures domestic based violent activities. This result too found significant at less than .05 level of confidence.

**CONCLUSION**

On the basis of results obtained, it may be concluded that depression and poor adjustment level play important and positive role in domestic-violence. Poor socio-economic condition also play vital role in domestic-violence. If we say that depression, adjustment and poor socio-economic status inclusively determine and increase occurrence based domestic violence there would no any suspicion in this context.
SUGGESTION

If we want to control the domestic violence, we must work on large scale in respect of its causal factors.

REFERENCES


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