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## Risk factors for domestic violence: findings from a South African cross-sectional study

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### Abstract

In 1998 a cross-sectional study of violence against women was undertaken in three provinces of South Africa. The objectives were to measure the prevalence of physical, sexual and emotional abuse of women, to identify risk factors and associated health problems and health service use. A multi-stage sampling design was used with clusters sampled with probability proportional to number of households and households were randomly selected from within clusters. One randomly selected woman aged 18–49 years was interviewed in each selected home. Interviews were held with a total 1306 women, the response rate was 90.3% of eligible women. For the risk factor analysis, multiple logistic regression models were fitted from a large pool of candidate explanatory variables, while allowing for sampling design and interviewer effects. The lifetime prevalence of experiencing physical violence from a current or ex-husband or boyfriend was 24.6%, and 9.5% had been assaulted in the previous year. Domestic violence was significantly positively associated with violence in her childhood, her having no further education, liberal ideas on women's roles, drinking alcohol, having another partner in the year, having a confidant(e), his boy child preference, conflict over his drinking, either partner financially supporting the home, frequent conflict generally, and living outside the Northern Province. No significant associations were found with partners' ages, employment, migrant status, financial disparity, cohabitation, household possessions, urbanisation, marital status, crowding, communication, his having other partners, his education, her attitudes towards violence or her perceptions of cultural norms on women's role. The findings suggest that domestic violence is most strongly related to the status of women in a society and to the normative use of violence in conflict situations or as part of the exercise of power. We conclude by discussing implications for developing theory on causal factors in domestic violence. © 2002 Elsevier Science Ltd. All rights reserved.

*Keywords:* Domestic violence; Gender inequality; South Africa

### Introduction

Intimate partner violence, or domestic violence, is increasingly being recognised as a public health problem and associated with injuries and a wide range of other mental and physical health problems (Campbell et al., forthcoming; Heise, Ellsberg, & Gottemoeller, 1999). Its causes have preoccupied social scientists for several decades. Hypotheses that domestic violence might be biologically determined were significantly undermined

by observations that its occurrence varies considerably between as well as within societies, and in some it has been reported to be exceptionally rare or even absent (Levinson, 1989; Counts, Brown, & Campbell, 1992). Understanding of social causation has been significantly hampered by the narrow geographical base of research (most work being from North America), a tendency of academics and activists to pursue single-factor theories and the reliance on data from small samples or women who had succeeded in accessing sources of help such as shelters (Hoffman, Demo, & Edwards, 1994; Heise, 1998). In the last decade there have been several papers from well-designed studies conducted in a range of countries which discuss risk factors and processes using

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survey (e.g. Hoffman et al., 1994; Ellsberg, Pena, Herrerias, Liljestrand, & Winkvist, 1999; Martin, Tsui, Maitra, & Marinshaw, 1999; INCLEN, 2000) and ethnographic methods (e.g. Rao, 1997; Wood & Jewkes, 2001; Bourgois, 1996; Harvey & Gow, 1994). These have enabled hypotheses to be explored more critically and an understanding of the social plausibility of relationships. However the body of evidence available to date falls very far from the standards of epidemiologists for establishing disease causation (Hill, 1965).

Household research on violence against women is regarded as difficult. Many women are reluctant to disclose abuse<sup>1</sup> because of perceptions of shame, fear of blame or reluctance to be 'disloyal' to their partner. Differences in question wording and the number of times questions asked can result in widely differing prevalences (Ellsberg, Heise, Pena, Agurto, & Winkvist, 2001). The research is difficult for field workers. Listening to a daily litany of abuse can provoke overwhelming feelings of powerlessness, as well as difficult memories and reflections on experiences of the field workers' own intimate relationships. Without adequate support, and an ability to support women interviewees, field workers may burn out or learn to ask questions in a manner which discourages disclosure (Jewkes, Watts, Abrahams, Penn-Kekana, & Garcia-Moreno, 2000; Ellsberg et al., 2001). Interviewers also bring their own views on gender to the interview setting and this is also believed to influence levels of disclosure. Careful interviewer training, selection and support is essential, however interviewer effects may persist. Recent advances in statistical methodology have enabled adjustment for interviewer effects (O'Muircheartaigh & Campanelli, 1998); however these have not previously been used in violence against women research.

In understanding the origins of intimate partner violence (physical and sexual), Heise's (1998) ecological framework has recently assumed prominence. Based on review of the mainly, but not exclusively, North American literature, it premises that abuse results from an interplay of personal, situational and socio-cultural factors at different levels in the social environment. Heise seeks to present the factors which are predictive at each level of the social ecology. At an individual level, factors include being abused as a child or witnessing marital violence in the home, having an absent or rejecting father; at the level of the family or relationship factors include use of alcohol, male control of wealth and decision-making in the family and marital conflict; at a community level factors include poverty and unemployment, social isolation of the woman and male participation in delinquent peer associations; and at a societal level factors include male ownership of women,

ideas of masculinity linked to aggression and dominance, rigid gender roles, acceptance of interpersonal violence and acceptance of physical chastisement. This model and other theories (e.g. of status inconsistency (Gelles, 1974)) were drawn on in the development of a questionnaire for cross-sectional study of violence against women in South Africa, and subsequently used to develop a list of candidate variables for the risk factor analysis. In this paper we present findings from the first representative study of violence against women in South Africa on risk factors for experiencing physical violence from an intimate partner and we conclude by discussing their implications for a broader theoretical understanding of the problem.

## Background

South African society is very violent. Decades of apartheid State-sponsored violence and reactive community insurrection, meticulously described in the report of the Truth and Reconciliation Commission (1998), have contributed to a situation in which for many people physical violence is a first line strategy for resolving conflict and gaining ascendancy (Simpson, 1991). All forms of interpersonal violence are very common. Violence is used regularly, for example, in disputes between neighbours (Department of Health, forthcoming), male and female peers (Wood & Jewkes, 2001), nurses and patients or their relatives (Jewkes, Abrahams, & Mvo, 1998) and fellow workers (Abrahams, Jewkes, & Laubscher, 1999). Injury is the major cause of death among youth and, for example, amongst 14–34 year old, 58% of injury deaths are due to homicide (Peden, 2000).

Gender-based violence is viewed in Government and civil society as a major problem (Usdin, Christofides, Malepe, & Maker, 2000). Physical violence is a prominent feature of sexual relationships from the start of dating during teenage years (Wood, Maforah, & Jewkes, 1998; Jewkes, Vundule, Maforah, & Jordaan, 2001). Forms of violence have been described as lying on a continuum between slapping, 'persuading' a woman to have sex, threatening to beat, hitting with sticks or other objects, pushing, assaulting with fists, violent rape, stabbing with a knife or shooting (Wood & Jewkes, 2001). In a country of approximately 40 million people, as many as five women are estimated to be killed each week by an intimate partner (Vetten, 1995). Amongst the youth, violence is very often associated with a woman rejecting a man's 'proposal' to have a relationship, their actual or suspected infidelity, attempts to end relationships, resistance to men's attempts to dictate the terms of a relationship, and acts which undermine a boyfriend's success with other women (Wood & Jewkes, 2001). Physical violence is very often accompanied by a

<sup>1</sup>In this paper when discussing intimate partner violence the terms 'violence' and 'abuse' are used interchangeably.

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