



INTIMATE PARTNER VIOLENCE AMONG COUPLES ATTENDING INFERTILITY CLINIC AT TERTIARY CARE HOSPITAL, DELHI.

Community Medicine

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ABSTRACT

Objectives: To Study the association of intimate partner violence with socio-demographic attributes and their predictors among infertile couples.
Methods: This cross-sectional study was conducted among 80 infertile couples, attending infertility clinic of GTB Hospital Delhi. HITS scale was used to measure the intimate partner violence. Univariate analysis was done to find out the association and variable with $P < 0.25$ were included in multiple logistic regression and model was developed.
Results: There was statistically significant relationship found between duration of marriage and domestic violence ($p < 0.05$). Occupation of females, marriage duration and type of infertility were the predictors.
Conclusion: The deep rooted issue of intimate partner violence associated with infertility needs a major transformation.

KEYWORDS

Infertility, Couples, Intimate partner violence

Introduction

Infertility is supposed to be a major health problem for couple's lives worldwide. As one side fertility is a big health problem but opposite to that infertility is also arising at shocking pace. World Health Organization estimates that 8-12% of couples around the world experience difficulty conceiving a child¹. Intimate partner violence and infertility has been emerging as a distressing health problems all over the world. The prevalence of female factor infertility is similar to that of male factor infertility² but still female considered for couple's infertility and she often punished socially and economically as a consequence³. Domestic violence against infertile couples is a considerable, though under-reported problem. According to NFHS-3, approximately 35% of women in the age group of 15-49 years have experienced physical or sexual violence⁴. So it is important to study the underexplored area of violence among infertile couples in an Indian setting as various studies has been done internationally but there are very few studies in Indian setting among infertile couples.

Material and methods

This study was a Cross sectional, facility-based in the Infertility clinic of Obstetrics & Gynecology OPD of a GTB Hospital, Delhi and it was descriptive enquiry conducted from Dec 2013 to Apr 2015. The unit of sampling was the infertile couple and the unit of study were male and female subjects. The inclusion criteria was infertile couple with both the partners consenting to participate and the exclusion criteria was subject unable/unfit to comprehend making administration of instrument difficult. The sample size calculation was based on the reported data which showed that prevalence of physical violence among female were 80 percent⁵. So minimal sample size for random sample at 95% confidence level, 5 percent type one error and 10 percent absolute precision was computed to be 64. Thus for the purpose of present study 80 couples included in the study. A pre tested, semi-opened ended, self-prepared questionnaire was used. The Hurt, Insult, Threaten, Scream Scale (HITS) scale^{6,7} is a 4 item questionnaire designed to screen intimate partner violence. It has been widely used by family and medical Practitioners- in clinic and community. A score of greater than 10 is considered positive. The aim and purpose of the study was explained to all the subjects and written informed consent was taken from them. To find the predictors of domestic violence, multiple logistic regression was applied. Independent variables were

selected by univariate method (chi-square), having $p < 0.25$, and model was developed for domestic violence. The following were the variables included in the domestic violence model: occupation of females ($P = 0.129$), marriage duration ($P = 0.031$) and type of infertility ($P = 0.102$). The final predictor variable of domestic violence among females are depicted in Tab 3. Variables that were found to be collinear were not entered in the final regression model. The criteria for entering and removing the independent variables from the backward stepwise model was $P < 0.05$. The Hosmer Lemeshow goodness of fit test was applied.

Results

Of the total of 80 infertile couples, majority (72.6%) of females were between the age group of 20-29 years and of males were (68.8 %) between age group of 25-34 years. Regarding education, 94 % of females and 96 % of males were literate. Most of the females (91%) were housewives whereas the majority (99%) of males were employed with 46 % involved in the unskilled labor sector. Fig 1 shows almost half of them (52%) belonged to Upper-Lower socio-economic class, 24% belonged to Lower-middle class, 21% belonged to Upper-Middle class, only 3% of them belonged to Upper class. 47.5 % of infertile couples have 5 years of married life and 42.5% of couples have completed 6-10 years of married life. 36.3% of the infertile couples do not know the reason behind their failure to conceive. Infertility was mostly attributable to female factors (36.3%) followed by male factors (13.6%). Females were more sufferers than males as magnitude of violence among females more than their partner. There were no statistically significant association found between age, education, employment, socioeconomic status, duration of infertility among infertile couples and domestic violence. For the purpose of finding association between domestic violence and marriage duration among infertile couples, marriage duration categorized into two groups less than equal to 5 years and more than 5 years and domestic violence named as present and absent. Table 1 depicts that 2.6% of female with marriage duration ≤ 5 years were victims of domestic violence as compared to 19% of females who were having marriage duration of > 5 years and this difference was found to be statistically significant ($p < 0.05$) $p = 0.03$ on the univariate analysis. Table 2 depicted that the predictor of Domestic Violence that was found to be significant among females of infertile couples. The odds of having Domestic Violence

was 8.706 times (95%CI=1.034-73.285) in infertile females who were having duration of marriage greater than 5 years, than in those who were having duration of marriage less than equal to 5 years.

Fig: 1 Socio-economic Status of Infertile Couples

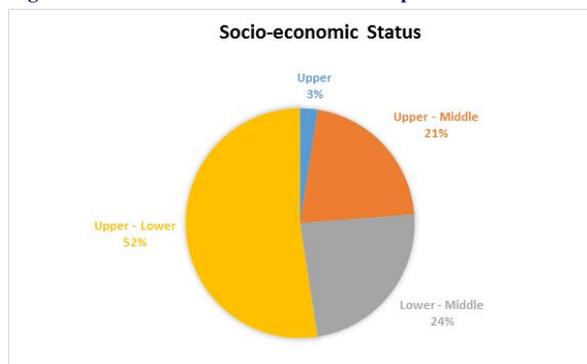


Table 1: Association of Domestic violence with the duration of marriage of the infertile couples

Married For	Domestic Violence (F)		Domestic violence(M)	
	Present	Absent	Present	Absent
Wife				
<=5 years	1 (2.6%)	37 (97.4%)	1 (2.6%)	37 (97.4%)
>5 Years	8 (19%)	34 (81%)	1 (2.4%)	41 (97.6%)
Chi Square	5.385			0.005
P Value	0.031*		1.000*	

*(Fisher Exact)

Table 2: Predictor variable for Domestic Violence among female (n=80)

PREDICTOR VARIABLE	B	SE	Adjusted OR (95% CI)	P value
Marriage Duration >5 years	2.164	1.087	8.706 (1.034-73.285)	0.046
<= 5 years			1#	

1#Reference category, Nagelkerke R Square 0.094

**Statistically Significant (p < 0.05)

Discussion

Infertility give rise to violence among couples and it is really a stressful condition for both of them. Domestic violence is commonly visited upon infertile women due to inability to live up the expectation of the husbands. The prevalence of domestic violence in infertile couples ranged from 1.8% to 61.8% in different socio-cultural settings in various studies done across the globe. For example, 1.8% found by Leung T W et al in Hongkong⁸, 10% by Desai et al⁹, 33% by Yildizhan R et al in Turkey⁷, 47.8% by Moghadam et al in Tehran¹⁰, and 61.8% by Ardabily et al¹¹. Our study shows that 11.3% of the females were subjected to domestic violence and whereas among males 2.5%. In contrast to above studies the magnitude of violence in our study are much lower and these has been supported by Leung T W et al⁸ study. Marriage duration was found to have significant association with infliction of violence on an infertile female. Contrary result has been reported by Yildizhan⁷ where there was no significant association between domestic violence and marriage duration which is consistent with the finding of Ozgoli G et al¹². Our study is a couple based study and majority of the husbands were supportive and accompanied their female partner providing much needed support during the arduous and often long-winded and frustrating management of infertility.

The limitation of present study are the study could not find statistically significant relationship between sociodemographic indices such as age, education, employment, socio-economic relationship and duration of infertility with domestic violence. Strength of the study was as the study screened both the partner of infertile couples and confidentiality preserved among them while taking interview.

Conclusion

The deep rooted issue of violence associated with infertility needs a major transformation in the socio cultural milieu to curb it. Screening for violence is important step and for this well trained professional counsellor should be integral part of infertility management team.

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Conflict of interest

None

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REFERENCES

- World Health Organization. Infertility: A tabulation of available data on prevalence of primary and secondary infertility. Geneva: Programme on maternal health and family planning, Division of Family Health. 1991.
- Yildizhan R, Adali E, Koulsari A, et al. Domestic violence against infertile women in a Turkish setting. Int J Gynaecol Obstet. 2009Feb;104(2):110-2.
- Dyer SJ, Abrahams N, Mokoena NE. Psychological distress among women suffering from couple infertility in South Africa: a quantitative assessment. Hum Reprod 2005;20:1938-43.
- International Institute for Population Sciences (IIPS) and Macro International. National Family Health Survey (NFHS-3), 2005-06, India, Vol1. Mumbai:IIPS; 2007Sep.p540.
- Ali TS, Bustamante-Gavino I. Prevalence of and reasons for Domestic Violence among women from low socio-economic communities of Karachi. East Mediterr Health J. 2007Nov;13(6):1417-26.
- Sherin K, Sinacore JM, Li XQ, et al. HITS: A short Domestic Violence Screening Tool for Use in a Family Practice Setting. Fam Med.1998;30(7):508-12.
- Chen PH, Rovi S, Washington J, et al. Randomized comparison of three methods to screen for domestic violence in family practice. Ann Fam Med. 2007Sep-Oct;5(5):430-5.
- Leung TW, Ng EHY, Leung WC, et al. Intimate partner violence among infertile women. Int J Gynecol Obstet. 2003May;83(3):323-4.
- Desai P, Shrinivasan V, Hazra M. Understanding the emotions of infertile couples. J Obstet Gynaecol Ind. 1992;42:498-503.
- Moghadam ZB, Ardabily HE, Salsali MS, et al. Physical and psychological violence against infertile women. J Fam and Reprod Health. 2010Jun;4(2):65-7.
- Ardabily HE, Moghadam ZB, Salsali MS, et al. Prevalence and risk factors for domestic violence against infertile women in an Iranian setting. Int J Gynecol Obstet. 2011;112(1):15-17.
- Ozgoli G, Sheikhan Z, Zahiroddin A et al. Evaluation of prevalence and contributing factors of psychological intimate partner violence in infertile women. J Midwifery & Reprod Health. 2016;4(1):571-81.