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RESEARCH ARTICLE

A STUDY TO ASSESS THE EFFECT OF AN AWARENESS PROGRAMME ON KNOWLEDGE REGARDING DOMESTIC VIOLENCE AMONG WOMEN IN SELECTED RURAL AND URBAN COMMUNITIES IN PATHANAMTHITTA DISTRICT, KERALA

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Abstract

Violence against women is widely recognized as a serious human right abuse, and an important public health problem with substantial consequences physical, mental, sexual, and reproductive health. The social construction of the divide between public and private underlies the hidden nature of domestic violence against women. The position of women in the Indian society has been a very complicated one and domestic violence is a growing epidemic in Indian societies. The present study was conducted to assess the effect of an awareness programme on knowledge regarding domestic violence among women in selected rural and urban communities. A quantitative quasi experimental design was used and the study participants (100) were selected by using multi-stage cluster sampling (random selection) technique. The data was collected by using a structured knowledge questionnaire on domestic violence and awareness program was given to the participants on the same day. The post test was conducted after seven days of awareness program. Results revealed that the awareness program was effective (paired t test = 23.85) which was highly significant at 0.01 ($p = 0.000$). The association of baseline variables with pre-test knowledge scores was calculated by using Chi-square test. Results also revealed a significant association between educational status and type of family with pre-test knowledge scores regarding domestic violence at 0.05 level ($p = 0.04$). No significant association was seen with other baseline variables like: women's age, family income, area of residence, occupation, occupation, type of marriage, number of children with pre-test knowledge scores regarding domestic violence. The study concludes that awareness about the problems related to domestic violence will help the victims know about their rights and also will reduce the rate of the problem.

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Introduction:-

Violence against women is widely recognized as a serious human right abuse, and an important public health problem with substantial consequences physical, mental, sexual, and reproductive health.¹The social construction of the divide between public and private underlies the hidden nature of domestic violence against women. The position

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of women in the Indian society has been a very complicated one and domestic violence is a growing epidemic in Indian societies.²

According to the Encyclopaedia of crime and justice, “violence is a general term referring to all types of behavior either threatened or actual that result in the damage or destruction of property or the injury or death of an individual”. Violence occurring within the family, which is referred as Domestic violence, cuts across lines of race, nationality, language, culture, economics, sexual orientation, physical ability and religion to affect people from all walks of life. It is the most pervasive form of gender violence.³

The United Nations Declaration on the Elimination of Violence against Women (1993) defines violence against women as “any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life.

WHO estimates that 15–71% of women experience physical or sexual violence by an intimate partner at some point in their lives. Research also shows that intimate partner and sexual violence lead to a wide range of short- and long-term physical, mental and sexual health problems.

In India woman is considered as “Tower of Tolerance” In ancient India woman enjoyed significant role in the family and in the community as well. Domestic violence is the most prevalent yet relatively hidden and ignored form of violence against women and girls, studies estimate that, from country to country, between 20 and 50 per cent of women have experienced physical violence at the hands of an intimate partner or family member. Wife beating is not only rampant, but male justify it with plethora of contexts. According to the The National Crime Records

Bureau (NCRB) Report for the year 2011 there was considerable increase of domestic violence against women from 3.8% in 2007 to 4.3% in 2011.⁴

In recent years, domestic violence is being increasingly recognised as a human rights and social and public health concern. The studies reveals the following as the major causes for the occurrence of domestic violence are cultural systems legitimise violence, legal authorities fail to protect women, economic structures subordinate women, and political systems marginalize women’s needs, it is more prevalent in societies in which patriarchal systems are strong, it is the reflection of the power relationships between the spouses, and moreover the society encourages the husbands to exercise their rights to dominate and control wives.⁵

Domestic violence against women has for a long time been considered only as a legal issue to be handled by the judicial system of the country. However, given its adverse effects on the women’s health, there has been growing consensus that the health sector should also take initiatives to help these women. Women may not voluntarily report instances of violence due to the sensitive nature of the problem. Since domestic violence varies with the local social norms and literacy level of women, it is important to assess the problem of domestic violence in the given geographical region for initiating supportive measures. The studies including the NFHS-3 have reported varied levels of domestic violence in different states and communities. Hence, this study was carried out to determine the effect of an awareness program on knowledge regarding domestic violence among women in selected urban and rural communities in Kerala.⁶

Statement of the problem

Domestic violence occurs in the family and it refers to violence against women in particular, as almost always the victims are women. Kerala has often been cited as a model and is considered to be unique in many aspects as compared to the rest of India. Kerala has achieved a quality of life, which is much higher than all the other states in India as well as some industrialized countries.

Although, many developments has been occurred in the status of women especially related to educational advancement, health improvement, entrepreneurship, etc. the status of women is still not equal to that of men. But, even with this increased rate of literacy and increased pace towards ultra-modernization, the state of women is no way better.

In India the study by International clinical Epidemiologists Network (INCLEN) was undertaken between 1997 and 1999 at seven diverse and regional sites: Bhopal, Chennai, Delhi, Lucknow, Nagpur, Thiruvananthapuram and Vellore. According to this study the overall figure of domestic violence for India are 36.9% physical violence and 35.5% psychological violence, while for Kerala it is 62.3% and 61.61% respectively. In the rural areas the overall figure is 51.7% of physical violence and 49.7% of psychological violence, while the Kerala figure 68.8% physical violence and 68.9% psychological violence.⁷

Studies which examine the causes, its nature and manifestations and consequences would help the general society to understand the magnitude as well as its implications on the lives as well as the institution of family. So this is a quasi-experimental study to assess the effect of an awareness program on knowledge regarding domestic violence among women in selected rural and urban communities in Pathanamthitta District, Kerala.

Objectives of the study:-

1. To assess the level of knowledge regarding domestic violence among women using structured knowledge questionnaire.
2. To assess the effect of an awareness programme by comparing the pre and post test scores of knowledge regarding domestic violence
3. To find out the association between pre-test knowledge scores and selected base line variables.

Hypothesis

1. H1: There is a statically significant difference between mean pre-test and post-test knowledge scores.
2. H2: There is a statistically significant association between selected baseline variables and pre-test level of knowledge regarding domestic violence.

Operational definition

1. Knowledge: In this study it refers to extent to which women aware about domestic violence against women and domestic violence protecting act which is measured by using structured knowledge questionnaire.

Conceptual definition

1. Awareness programme: In this study it refers to first stage in the process of learning about what does domestic violence means and the aspects of domestic violence and the protection of women from domestic violence.

Assumptions

1. Domestic violence is prevalent in our society.
2. A good number of women may be unaware of the legal and social protective measures available in our country against domestic violence.
3. Awareness programme may enhance knowledge and empowers women against domestic violence.

Conceptual/ Theoretical Frame work:

Ludwig Von Bertalanffy's General System Model (1986) was used as the theoretical framework of the study. According to this theory, a system is composed of interactive elements and makes each system distinct from environment in which it exists.⁸ The key elements of the System theory applied to this study consists of an input which is the preparatory phase in which the researchers collect the baseline proforma of the subjects such as age, religion, occupation, socio-economic status, education marital status and throughput which includes assessing the existing knowledge by pre-test and conducting a teaching program regarding domestic violence and output which includes the reassessment of knowledge regarding domestic violence by post-test.

Research Methodology:-

- A Quantitative experimental research approach with quasi experimental one group pre-test post-test design was adopted for this study. The dependent variable for the study was knowledge regarding domestic violence and the independent variable was the awareness program. The baseline variables for the study were age, marital status, religion, educational status, occupation, family income/month, socio economic status, area of residence, type of family, type of marriage, whether the husband is staying with you, number of children, duration of the stay in the family, experience of domestic violence, previous knowledge and its source, witness of any kind of domestic violence, addiction of the partner, and awareness about laws

existing for domestic violence. The present study was conducted at selected kudumbasree units in Pathanamthitta district, Kerala. The population of the present study was women who are the members of kudumbasree units who fulfilled the inclusion criteria, were selected as participants for the study and were selected by using multi-stage cluster sampling. Women who were the members of kudumbasree units and between the age group of 18 – 60 years and who were present at the time of data collection and could speak and understand Malayalam and English were included. Women who were not willing to participate in the study, who had any learning disability and those who belonged to upper socio economic status were excluded from the study.

Data collection tool:

The following tools were used for the study.

1. **Baseline Proforma.** This tool consisted of eighteen items to collect the baseline data regarding the client like: age, marital status, religion, educational status, occupation, family income/month, socio economic status, area of residence, type of family, type of marriage, whether the husband is staying with you, number of children, duration of the stay in the family, experience of domestic violence, previous knowledge and its source, witness of any kind of domestic violence, addiction of the partner, and awareness about laws existing for domestic violence.
2. **Structured knowledge questionnaire on domestic violence:** Structured knowledge questionnaire was used to assess the knowledge of women regarding domestic violence. It consists of 30 multiple choice questions. All questions have one correct answer and each correct response carries one mark.

Validity and Reliability of the tool

The tools were given to nine subject experts to get their consensus regarding the appropriateness of these tools. The content validity of the tools was established by the agreement of all nine experts. The tools were translated to the vernacular language and it was retranslated to English and the reliability of the translated tools was assessed. The reliability of the tools was established by using split half method using Spearman's Brown Prophecy formula. The calculated r value was $r = 0.88$ and the tools were found to be reliable.

Pilot study

The pilot study was conducted among 15 samples who were the members of kudumbasree units, in Thiruvalla Municipality. The study was found to be feasible and no modifications were needed in the tool or methodology after the pilot study. Hence the researchers proceeded for the main study.

Data collection process

The main study was conducted among 100 women who were the members of kudumbasree units in Pathanamthitta District. After obtaining formal written permission from the concerned authorities of selected municipalities and panchayats, the participants were selected by random method. The participants were explained regarding the purpose of the study and written informed consent was taken. Confidentiality was assured to all the participants to get their cooperation. The baseline variables and the assessment of knowledge regarding domestic violence were done by interview method. Teaching program was conducted immediately after the pre-test. Post-test assessment of knowledge regarding domestic violence was done after 7 days by using the same knowledge questionnaire. It took 45 minutes to complete the data collection interviews for each subject. The obtained data were checked for completeness and coded for analysis.

Plan for data analysis

The data were organized, tabulated, summarized and analysed using descriptive and inferential statistics. The demographic variables were analysed by using frequency and percentage. Effect of awareness program was analysed by paired t test and the association between the selected baseline variables with the pre-test knowledge score was assessed by Chi-square analysis.

Results:-

Section 1: Description of baseline variables of women in kudumbasree units.

The mean age of women was 43.1 years (S.D ± 9.6). Out of the 100 samples, majority (63%) was Hindus, 37% completed high school education and 76% were unemployed. Majority of the participants (84%) were from rural area and 83% of women were married and majority of them (82%) of them were living with their husband. Most of the participants (61%) belonged to nuclear family.

Among 100 samples, (82%) had arranged marriage and majority of them (83%) were not married to their relatives. Most of the participants (47%) were having two children and many of them (37%) never experienced any kind of domestic violence in their life time. Among 100 women 62% of women had previous knowledge regarding domestic violence. Majority of the participants (71%) gained knowledge regarding domestic violence through different types of media. Majority of them (74%) has not witnessed any kind of domestic violence in their house of origin. Majority of the participants (89%) were staying in the house for more than five years. Among 100 participants, 38% reported that their husband is having the habit of taking alcohol. Majority of the women (79%) were staying in their own house and 56% among them women is aware about the rules regarding domestic violence.

Section 2: Effect of awareness program on knowledge regarding domestic violence among women of kudumbasree units.

- Among 100 participants, majority (68%) had poor knowledge, 30% of women had moderate knowledge and only 2% had good knowledge about domestic violence. Actual gain in knowledge in mean percentage after teaching was 22.66%.
- Paired t test was used to test the hypothesis and result showed that there was a statistically significant increase in knowledge regarding domestic violence after the awareness program (t test = 23.85) at 0.01 (p = 0.000). Hence null hypothesis was rejected and research hypothesis was accepted. The results revealed that there was statistically significant difference between the pre-test and post-test knowledge scores regarding domestic violence among women in the kudumbasree units after the awareness programme and the result shows that the awareness program was effective.

Table 1:- Mean percentage of Pre-test and Post-test and Mean % actual gain in knowledge of Women regarding domestic violence n = 100.

Pre test			Post test			Actual gain in mean %	p value
Mean	SD	Mean %	Mean	SD	Mean%		
13.1	3.5	43.67	19.9	2.7	66.33	22.66	0.00*

Table 2:- Classification of pre-test and post-test knowledge scores among women regarding domestic violence. n = 100.

Knowledge level	Category	Classification of women			
		Pre-test		Post-test	
		Number	Percentage	Number	Percentage
Poor	< 10	68	68%	1	1%
Moderate	11 - 20	30	30%	85	85%
Good	21 - 30	2	2%	14	14%
Total		100	100%	100	100%

Table 3:- Effectiveness of awareness program on knowledge regarding domestic violence. n = 100

Knowledge	Mean	SD	N	Mean difference	paired t	p value
Pre-test	13.1	3.5	100	6.8	23.85**	0.000
Post-test	19.9	2.7	100			

**Significant at 0.01 level

Section 3: Association between pre-test knowledge scores and selected baseline variables.

The association of baseline variables with pre-test knowledge scores was calculated by using Chi-square test. Results revealed a significant association between educational status and type of family with pre-test knowledge scores regarding domestic violence at 0.05 level (p = 0.04). No significant association was seen with other baseline variables like: women's age, family income, area of residence, occupation, occupation, type of marriage, number of children with pre-test knowledge scores regarding domestic violence.

Table 4:- Association between pre-test knowledge scores and selected baseline variables.
n=100

Baseline variables	chi-square	p value
Age0.29	0.87	
Educational status6.64*	0.04 *	
Occupation3.41	0.07	
Family income0.93	0.34	
Area of residence1.09	0.30	
Type of family	3.88	0.04*
Marital status	0.06	0.80
Husband staying with you0.48		0.47
Type marriage0.02	0.90	
Married to relative0.06	0.80	
Number of children 0.57	0.75	
Previous knowledge 1.95	0.17	
Witness domestic2.63	0.10	
Violence		
Duration in family1.08	0.30	
Addiction2.47	0.30	
Living in2.05	0.15	
Awareness on domestic violence1.77		0.19

*Significance at 0.05 level

Discussion:-

Domestic violence is a global issue reaching across national boundaries as well as socio-economic, cultural, racial and class distinctions.⁹ This problem is not only widely dispersed geographically, but its incidence is also extensive, making it a typical and accepted behavior. Domestic violence is wide spread, deeply ingrained and has serious impacts on women's health and well-being.¹⁰

The purpose of the study was to assess the effect of an awareness program on knowledge regarding domestic violence among women who were the members of kudumbasree units.

Section A: Discussion of the baseline variables of women

Among the 100 samples, most of the subjects were in the age group of 41 – 50 years, 34% of them completed high school education and majority (76%) of them was housewives.

Majority of the participants (84%) were from rural area and 83% of women were married and majority of them (82%) of them were living with their husband. Most of the participants (61%) belonged to nuclear family.

Among 100 samples, (82%) had arranged marriage and majority of them (83%) were not married to their relatives. Most of the participants (47%) were having two children and many of them (37%) never experienced any kind of domestic violence in their life time. Among 100 women 62% of women had previous knowledge regarding domestic violence. Majority of the participants (71%) gained knowledge regarding domestic violence through different types of media. Majority of them (74%) has not witnessed any kind of domestic violence in their house of origin. Majority of the participants (89%) were staying in the house for more than five years. Among 100 participants, 38% reported that their husband is having the habit of taking alcohol. Majority of the women (79%) were staying in their own house and 56% among them women is aware about the rules regarding domestic violence.

The present study was conducted among women from selected rural and urban communities, who were the members of kudumbasree units. Kudumbashree is the poverty eradication and women empowerment programme implemented by the State Poverty Eradication Mission (SPEM) of the Government of Kerala, and the membership was given to only one woman from a family. The study finding reflects the increased involvement of women in a community organization which has been recognized as an effective strategy for the empowerment of women in rural as well as urban areas.

The findings of the present study corroborate with a study conducted by Ravneeth Kaur and Suneela Garg in New Delhi, India to explore the factors that perpetuate domestic violence and the mean age was 40 years. In another study conducted in Kerala, India, almost half of the victims stated the alcoholic nature of the husband as the major cause for domestic violence which also corroborates with the findings of the present study were most of the women reported about the alcoholic nature of their husband. The similarity in the findings may be due to the excess availability of addictive substances in the state.¹¹

In the present study, most (56%) of the women were aware about the laws against domestic violence. Though all the women knew that there is a law against domestic violence in India, they feared to resorting to law because of detrimental implications. Similar thoughts were echoed by women in many other studies too.¹²

Section B: Discussion on effect of awareness program on knowledge regarding domestic violence

In the present study, majority (68%) had poor knowledge, 30% of women had moderate knowledge and only 2% had good knowledge about domestic violence. Actual gain in knowledge in mean percentage after teaching was 22.66%.

Paired t test was used to test the hypothesis and result showed that there was a statistically significant increase in knowledge regarding domestic violence after the awareness program ($t = 23.85$) at 0.01 ($p = 0.000$). The results revealed that the awareness program was effective in improving the knowledge regarding domestic violence among women in the kudumbasree units.

The researchers did not come across any supporting studies which determine the effect of awareness program on knowledge regarding domestic violence. It was well evident that awareness is a process that seeks to inform and educate people about a topic or issue with the intention of influencing their attitudes, behaviours and beliefs. Hence the awareness program will improve the knowledge and it was demonstrated in the current study through t test.

Section C: Discussion on association between pre-test knowledge scores and selected baseline variables

The association of baseline variables with pre-test knowledge scores was calculated by using Chi-square test. Results revealed a significant association between educational status and type of family with pre-test knowledge scores regarding domestic violence at 0.05 level ($p = 0.04$). No significant association was seen with other baseline variables like: women's age, family income, area of residence, occupation, occupation, type of marriage, number of children with pre-test knowledge scores regarding domestic violence.

The findings of the present study were parallel to most of the previous studies which reported an association between educational status and domestic violence. Studies have indeed shown that low academic achievement was one of the risk factors predicting physical abuse of partners by men in New Zealand.¹³ This study showed that the awareness program focusing on domestic violence, women empowerment and mental health can be conducted in the community to decrease the further impact.

Conclusion:-

This study has thrown light to the facts that the women hood of the society was lacking in knowledge about domestic violence. Understanding the cultural norms and attitudes that promote acceptance of and even encourage violence against women and undermine women's enjoyment of their full human rights and freedom is essential. Policies and strategies to eradicate domestic violence must be accompanied by other measures to eliminate gender inequality and to ensure the equal and full participation of women in the decision-making and development processes. Long-term measures are needed to empower women and educate men to curb this menace. Taking the issue only as a public health problem will be a futile attempt unless a multifaceted approach using legal, social sciences, and mental health systems is employed to check it.

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