

# The Influence of Family Violence and Age on The Manifestation of Depressive Symptoms Among Women

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## Abstract

The study investigated the influence of family violence and age on the manifestation of depressive symptoms among women. The sample for the study comprised 200 married women (100 battered and 100 non-battered) who were selected from Onitsha North Local Government Area, Anambra State, Nigeria. Marital Conflict Behavior Checklist (MCBC) was used to serve as an indicator of conflict behaviors spouses engaged in, during conflicts. The Centre for Epidemiological Studies Depressive Scale (CESD) was used to measure the levels of depressive symptoms manifested by the participants. Data were analyzed using 2x2 Analysis of Variance (ANOVA). The results showed that there was significant difference, between battered and non-battered women on the report of depression,  $F(1,196)=16.06, p<.01$ . There was a statistically significant age difference in the manifestation of depression  $F(1,196)=37.49, p<.01$ . Young battered women reported higher depression than old battered women. There was interaction effect between battering and depression. The finding suggest that depression was as a result of battering. Correlation was significant at  $r=p<.01$ . The findings were discussed, implications and limitations highlighted and recommendations were made.

**Keywords:** Family violence • Battered women and Depressive symptoms

## Introduction

Violence is an act carried out with the intention or perceived intention to cause pain, injury, or abuse. According to World Health Organisation [1] family violence may be seen in behaviors such as threats, damaging property, violent sexual behaviors or play fighting. When two people or parties fail to achieve a consensus over an issue, the tendency is to resort to the use of violence. The stronger party may lord it over the weaker one as in the case of husband and wife. Violence can be an act carried out with the perceived intention of causing physical pain or injury to another person. The common forms of domestic violence against women in Nigeria are wife battery, acid attack, molestation, rape, corporal punishment, girl- child marriage and gun shots [2]. The [3] declaration noted that deprivation of women's human rights are acts of violence against women which violate, impair or nullify their enjoyment of human rights and fundamental freedom. Physical, sexual and psychological violence that occur in the family include the following: battering, sexual abuse of the female children in the household, dowry related violence, marital rape, female genital mutilation and other traditional practices harmful to women, non-spousal violence and violence related exploitation [4]. A Domestic violence can also be described as any violent or abusive behaviors, which is used by one person to control and dominate another with whom they have or have had a relationship. Such acts according to the United Nations' General Assembly are, ... any act of gender-based violence that results in or likely to result in physical, sexual, mental harm or suffering to women, including threats of such acts as coercion or arbitrary deprivation of liberty, whether occurring in public or private life.

Domestic Family or conjugal violence 'or wife battery are violence that occurs within the home or family and is usually perpetrated by the male members

of the family. It involves the abuse of power and authority by force or show of force, with the intent of inflicting not only physical or psychological pain, but also humiliation and degradation in the family. It is observed that the traditional Igbo family violence includes not only battering (physical violence) but also other forms of abuse like female child- marriage, forced or arranged, female genital mutilation, widow abuse and others. The definition of family violence varies by social-cultural cum religious orientation, social class, race and ethnicity [5].

Traditionally, the family is usually idealized to be a place of warm intimacy, and a place where one's security is assured. Paradoxically, it is also in the family that people are more likely to be abused, physically assaulted, sexually victimized, beaten up, slapped or spanked by other members than anywhere else or by anyone else. The victims of family violence include husbands, wives, parents, children, elders, siblings and dating partners [6] also stated that family violence affects every member of the family, but women appear to be the most frequent victims of violence in the home and are termed "appropriate victims." The long-term effects of domestic violence are far reaching and devastating. Often women and children suffer from psychosomatic illness, gastrointestinal disturbance, mental health disorder, self-chronic pain, etc.

In Nigeria violence against women was culturally accepted as in most African societies [7]. Gender stereotype prejudice against women in Nigeria see the male as superior and the female as inferior. The male role socialization and cultural influence invest them with lots of powers and recognition. The wife and children are expected to submit to his desire and wishes even in the face of inhuman treatment. A man can inflict corporal punishment on the wife for drinking alcohol, eating gizzard which is a particular part of meat special reserved for men, he can divorce her because she fails to give birth to a male child [8]. stated that men often enact laws and women bear the burnt. For instance, adultery and promiscuity are often punished in women but not in men.

The family is usually held as a sacred institution and so intrusion is not normally tolerated. Family violence is always considered a family conflict matter and no concern of outsiders. The women in trying to keep the family conflict secret suffer in silence. In trying to cope with all the stressors in family life, the women may begin to manifest such depressive symptoms as sleeplessness, sadness, loss of weight and crying spells.

In Nigeria, [9] noted that there are countless reports of wives serving as punch bags for their husbands. It is also observed that many women and girls in Nigeria experience one form of violence or the other ranging from physical, sexual, psychological, economic, cultural, social abuse to homicide, from their husbands, partners or even other members of the extended family and the larger society. All these acts of violence were linked with men's attempts to control, dominate and keep women subordinate. Other factors found by researchers such as [10,11] to be associated with family violence are: personality, anxiety, depression, social and cultural factors, demographic and economic or financial factors.

Physical violence is the inflicting or attempt to inflict bodily or physical harm or injury by beating, battering, slapping, grabbing, kicking, stabbing, punching, flogging, shooting, using weapon against partner (e.g. pangas, guns, knives) [12]. Physical abuse and neglect also include withholding access to resources of medical care and hygienic assistance, forced alcohol and drug use [13] also support the examples of physical abuse.

Psychological violence or Neglect may be verbal or non-verbal form of abuse against one's spouse. It may take such patterns of behaviors such as degrading, bullying, terrorizing, isolating, corrupting, gas lighting. Rejecting and denying emotional responsiveness [14] Psychological abuses are actions that serve to undermine an individual's self-worth or esteem. It may be evident in constant criticism, belittling, name-calling, silent treatment, making and breaking of promises. Emotional abuse or mental abuse characterized by a person exposing or subjecting another to behavior that may result in lots of psychological trauma, such as: fear, anxiety, depression, stress post-traumatic disorder and other forms of psychological wounds.

The frequency of the force of violence has become a concern and worry to family physicians, psychologists, sociologists, social health workers, community leaders, politicians and families themselves because of its life's long-lasting effect not just on the women involved but also their children,

families and communities. It causes harm to the individual's health, physical and mental, possible long-term emotional wounds to children and harm to the community's-economic, social and moral wellbeing.

There is also evidence that spousal violence is more prevalent in blue and low socio-economic families [15]. Women in abusive relationship frequently lose their jobs, experience high job turnover and are sometimes forced to quit or are fired. Many wives are totally dependent on their husbands for basic necessities of life such as food, shelter and clothing [16]. Their material dependency may keep them in an abusive relationship not because they are masochistic, subconscious or wish to remain but because they have very little choice and after some time begin to internalize the belief that they are helpless. Men do not just have and control material power, but also have idealized real power, their beliefs, opinions, perception, explanation have continued to be more influential.

In the social learning model, we are all born into a family and it is in the family that we are taught the first profound lessons of social interaction and society's rules of accepted conducts. The social learning model can be better understood by the use of the phrase "CYCLE OF VIOLENCE"-that violent childhood of that abused children grow up to become abusive parents and violent adult. This is what [17]. termed inter-generational transmission of violence. One can say that much of violent behavior that occurs in the school is a re-play of violence that has been learned at home. On the other hand, women who experienced spousal violence in the family of orientation are more likely to accept conjugal violence as part and parcel of married life. However, this model affirms that since violence is a learned behavior, it also can be unlearned.

The social situation model proposes that violence arises out of two main factors, stress and cultural norms. Stressful events associated with family violence include low income or inadequate financial resources, unemployment, poor educational opportunities, poor-living conditions, illness, sexual difficulties, large family size.

Culturally in most Africa societies violence is used by husbands and fathers as disciplinary and corrective measures against women and children [16]. The culturally approved violence when combined with stressful family situation like unemployment and poverty, the tendency is for the man to use violence as a coping strategy for his stressful and frustrated situation. The social situation model seems to give an insight to the alarming rate of family violence in Nigeria. [17] summed up the situation thus:

The fact of existence of violence in Nigeria is indisputable. There are continued violent clashes leaving floods of blood and bringing sorrow to thousands of families.

Cognitive theories state that it is not events or problems which cause depression but rather it is the individual's interpretation of the events [18] went on to assert that depression is linked with self-defeating beliefs. The depressed person perceive life irrationally and negatively. The negative views about themselves, life situation and the future lead them to overestimate the severity of negative or feared events and underestimate the positive or their ability to cope. Thus, these thoughts or images may not correspond with external situation or reality. The individual in this condition misinterprets any physical symptoms and situations are exaggerated.

These self-defeating beliefs/thoughts may arise from Seligman "Learned helplessness". The battered women seem to be helpless and come to see the batterer as being in control. The result is the tendency to withdraw, become passive, feel weepy, depressed and ultimately despairing of themselves, their plight and future. All these are as a result of the self-defeating beliefs and negative thoughts.

Depressive reaction is commonly associated with marital stress. Conflict abound in marriage that predispose couples to symptoms of various types of psychopathology. Heene found that there are basic ways that depression and marriage are connected; first, depression caused by collapse of the personality (withdrawal, unavailable to the spouse, loss of interest in sex, being gloomy and sad). Secondly, presence of depressive reaction or illness aggravates long-standing marital problem. Finally, a partner engaging in a more negative conflict may be associated with increase in depression.

Clinical as well as survey data consistently reveal a high incidence of depression, anxiety and an increased risk of suicide, among samples of women victims of violent marriages. Durbach, however, the degree of married depressive symptoms manifested by battered and non-battered married women in Nigeria is investigated to ascertain the impact of battering on women well-being.

## Statement of the Problem

Family violence against women in Nigeria is a well-known issue that continues to attract global concerns of psychologist, sociologist, medical and mental

health personnel. Male chauvinism appears to be an accepted norm such that in most family's women both young and old are battered by their husband. By extension the effect of violence on the victim is so devastating that some battered women begin to manifest depressive symptoms. The statement of the problem of this study therefore is to investigate the extent to which married battered women, young and old manifest depressive symptoms.

## Hypotheses

Based on the findings from the reviewed work, the following hypotheses were proposed.

1. There will be no significant difference in the manifestation of depressive symptoms between battered women and non-battered women.
2. There will be no significance difference in the manifestation of depressive symptoms between young and old battered women.
3. There will be no significant correlation between marital conflict and depression.

## Methods

### Participants:

The participants comprised of two groups -100 from reported or identified cases of violent families and 100 from non-violent families. The names and addresses of the battered women were selected from the files of various reported cases in the area of study, Onitsha North Local Government Area of Anambra State, Nigeria. They were married women living with their husbands and at least with one child. The ages of the participants ranged from 20 to 40 years of younger women 41 to 55 years for older women. Purposive sampling was employed in the selection of the battered group.

### Instruments:

Two instruments, the Marital Conflict Behavior Checklist (MCBC) [19] and the Center for Epidemiological Studies Depressive Scale (CESD) [20] were used for the data collection. The MCBC [19] is a 37-item test that measure conflict in marriage, with a reliability index of .94 and concurrent validity index .90. MCBC was considered to be reliable and valid for the study of marital conflict and violence. The scale is used because it incorporates the two forms of violence, physical and psychological that this work is studying. Each item was scored on a four-point scale.

Rarely-1, sometimes-2, often-3, always -4. The MCBC served as an indicator of conflict behavior spouses engaged in during conflicts and how often they do so. The CES-D is a 20-item test, designed to assess depressive symptoms in the general population [20]. The scale has been used in Nigeria by [17], who reported a reliability index of .85, while Ugwu (1998) reported concurrent validity index of 41. The item is scored on a four-point scale ranging from 1-4, (rarely 1, sometimes 2, often 3, always 4) Nos. 4, 8, 2 and 16 indicate positive experience of life, while the remaining 16 items are negative. The participants report the frequency with which the 20 events were encountered within a six months period.

### Procedure:

The two instruments: MCBC [19] and CES-D [20] were administered to the participants by the researcher. They were made up of identified victims from violent families and non-victims from various parishes and social welfare department in the selected areas of Onitsha North. The researcher also visited the women during their meetings in their different parishes and administered the instrument to those who willingly volunteered and those who did not volunteer were excluded. The administration and collection covered the areas already mentioned.

### Design/Statistics:

The design used was Factorial design. A 2 x 2 Analysis of Variance (ANOVA) with unequal sample sizes was used in testing hypothesis one and two. It was analyzed on SPSS version 7.5. For the third hypothesis, Pearson r was used to test the relationship between marital conflict and depression [21].

## Results

A 2 x 2 ANOVA was used for the differential effect of age and battering on depression Battering – Battered and Non-Battered. Age-Young and Old. Pearson r was also employed to test the relationship between marital conflict and depression.

The result as shown in Table 1 above indicates  $F(1,196) = 37.49, p < .01$  and this shows that there is a significant different between young and old women in their manifestation of depressive symptoms. The result indicated a

statistically significant difference between battered and non-battered women in their manifestation of depressive symptoms,  $F(1,196)=16.06, P<.05$ . There is also a significant interaction effect between age and battering in the report of depressive symptoms:  $F(1,196)=30.01, P<0.1$ . This showed that depressive scores of the participants were influenced by a combination of age and battering such that the scores of the young battered were higher than that of non-battered women.

The above Table II indicates the mean and standard deviation scores of depressions of the group of participants, young battered women and young non-battered women, old battered women and old non-battered women. The results show that young battered women had the highest depression scores ( $\bar{x}=47.24$ ) whereas the old battered women had the least depression scores ( $\bar{x}=34.12$ ). This indicates that there is a significant difference in the manifestation of depressive symptoms between the young battered women and old battered women. The result also shows that the young battered women had significant higher mean depression score (47.24) than the other three groups, whose depression scores did not differ significantly from each other, old battered women (34.12), old non-battered women (35.5) and young non-battered women (36.51).

The correlation co-efficient of 0.36 of marital conflict and depression was positive and significant ( $P<0.05$ ). This implies that the higher the marital conflict, the higher the depression of the participants.

### Discussion

The findings in the study indicate that there is a significant difference in the manifestation of depressive symptoms between battered and non-battered women  $F(1,196)=16.06, P<.95$ . The battered women ( $\bar{x}=47.24$ ) reported higher depression than non-battered women ( $\bar{x}=36.51$ ). This is in contrast with the first hypothesis which stated that there will be no significant difference in the manifestation of depressive symptoms between battered and non-battered women. The result indicates that battery induces a lot of depression, on the battered women. Marital relationship problem was also a common source of psychological distress equally observed that stress-related illness and stressful life events or family violent with their consequence could reinforce depression and these would have a lot of negative impact on the mental health of the battered group

The second hypothesis stated that there would be no significant difference in the manifestation of depressive symptoms between young and old battered women. Contrary to this prediction, the result showed that young battered women manifested higher depression than the old women. This confirms

that women under thirty years of age and "newer" marriages experience the highest rate of family violence than the older group. The National Population Commission (NPC) Nigeria confirmed that women under the age bracket of 15 – 49 years' experience the highest marital conflict from their intimate partners. The variables that may have contributed to the high depression reported by the young battered women may be inexperience, marital adjustment on the part of the "newer" married. They come into marriage with high expectations and when these are not met the result is disagreement, quarrels, disappointment and sadness. The older women having learnt through life lived experience tend to have a better shock absorber than the young ones, so are less depressed. On the hand the young battered women could be people with many responsibilities – like caring for their young children, adjusting to new jobs, some could be students without jobs so could be solely dependent on their husbands economically. So when there is crises in the marriage in form of battering the young women will definitely manifest high depressive symptoms than the old women

However, the young non-battered women manifestation of a low level of depression ( $\bar{x}=36.51$ ) could be that their expectations about marriage were met by their partners and those around them. They have enjoyed love, care, economic support in their marriage and so are not likely to manifest high depressive symptoms like their young battered counterparts.

The old battered women ( $\bar{x}=35.78$ ) and old non battered women ( $\bar{x}=34.12$ ) did not manifest significantly in their depression scores because they may have over the long years of their marriage learnt to cope with their situation. Moreover, the older women at this stage of their lives may be enjoying the social and economic support of their grown-up children, relations, friends and other social groups. Again, they may be economically balanced and fulfilled in life so this may serve to cushion them from feeling the impact of battery and depression intensely. There was a significant interaction effect between age and battery on depression. Young battered women showed a higher depression than the old battered women.

The third hypothesis which stated that there will be no significant correlation between marital conflict and depression was not confirmed. There was significant relationship between marital conflict and depression. The young battered women who experienced a high level of marital conflict also reported higher depression. Therefore, this goes to show that when there is marital conflict there is also depression. Recent research equally showed that women, who suffer depression, are often killed by their family members, 51% of whom are spouses point to a long-standing spousal abuse as a factor (National Organization for women).

**Table 1.** Summary of a 2 x 2 ANOVA on effect of age and battering on depression.

Source of Variation	Sum of	df	Mean Square	F-Ration
Age	2355.51	1	2355.51	37.49**
Battering	1009.39	1	1009.39	16.06*
Age and Battering	1885.55	1	1885.55	30.01**
Error	12315.65	1	62.84	
Total	321056	1		

**Table 2.** Mean and Standard Deviation (SD) of Depression Scores of battered and Non-Battered Women.

		Battered	Non-battered
Young	X	47.24	36.51
	SD	8.19	8.06
Old	X	34.12	35.78
	SD	6.56	8.45

**Table 3.** Correlation of Marital Conflict and Depression.

	DEPRESS	MARCON
Pearson Depress Marcon	1	0.356**
Correlation	0.356**	1
Sig 2 (tailed) Depress		0
Macron	0	
N Depress	200	200
Macron	200	200

## Conclusion

Family or domestic violence is one of the most heinous abuses that women suffer in marriage or intimate relationships. Although the victims of family violence include; wives, husbands, parents, children, older adults etc. statistics shows that about 85% of family abuse victims are women. There is need for all hands to be on deck in order to eradicate this horrific and outrageously evil in the society. The Government on both Local, State and Federal levels should make policies and tougher laws that will protect the vulnerable members of the family especially women and girls from the hands of the perpetrators family violence.

## Recommendations

The findings presented in this study clearly point to the fact that some fundamental changes in the attitude, values and beliefs of the society towards women have to occur before a decrease in the level of marital violence against women can take place.

- Parents, teachers and all entrusted with the training of the child should start early to educate them on the need to live in partnership, equality and respect. Inequality between men and women starts from the home. Where the boy child is treated as a superior being than the girl, this at times is the most effective channels of teaching family violence. Elimination of this inequality right from the cradle would be a vital means of curbing family violence.
- Legal administrators of family laws should make effective policies and enforce them so as to protect women from marital violence.
- Family physicians can prevent suffering, serious injuries and death by being alert to the possibilities of marital violence and victimization when evaluating their patients.

Public awareness, enlightenment and education of the masses on the seriousness of family violence and its damaging consequences to the individual involved, to the children, families and the society at large.

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