

RESEARCH ARTICLE

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Burden of Domestic Violence among Infertile Couples in Delhi: A Hospital Based Study

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Received: 1 August 2017;

Accepted: 25 September 2017

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Abstract

Objectives: To determine the magnitude of the domestic violence among couples attending infertility clinic of tertiary care hospital. **Methods:** This cross-sectional study was conducted among 80 infertile couples attending infertility clinic of GTB Hospital Delhi. **Results:** 11.3% of female had experienced domestic violence; among 11.3%, almost all of them experienced physical hurt. Whereas only 2.5% of male had experienced violence. **Conclusion:** Females attending infertility clinic are more prone to violence than males. Counselling of couples and screening of domestic violence should be integrated with infertility treatment.

Key word: Infertility, Couples, Domestic Violence, India.

INTRODUCTION

Infertility has come to be recognized as a major health issue. A multi country study carried out by the World Health Organization estimates that 8-12% of couples around the world experience difficulty conceiving a child.^[1] Infertility has been associated with anger, stress, marital problems and domestic violence. Domestic violence and infertility are emerging as health problems for millions of couples. According to NFHS-3, approximately 35 percent of women in the age group of 15-49 years have experienced physical or sexual violence.^[2] It is important to screen the violence among infertile couples as the infertility associated with domestic violence. Various studies has been done internationally among infertile couples and domestic violence but there were very few studies in Indian setting.

MATERIAL AND METHODS

This study was cross sectional and descriptive enquiry conducted between Dec 2013 and Apr 2015 at Obstetrics and Gynecology outpatient clinic of GTB Hospital New Delhi, India. The unit of sampling was the infertile couple and the unit of study were male and female subjects. Published data reported that prevalence of physical violence among female were 80 percent^[3] so the minimal sample size for random sample at 95% confidence level, 5% type 1 error and 10% absolute precision is computed to be 64. Thus for the purpose of present study 80 couples were interviewed in infertility



clinic. A pre-tested, semi-opened ended, self-prepared questionnaire included socio-demographic characteristics of couples and standardizes validated screening tool to screen magnitude of the violence i.e. Hurt, Insult, Threaten, Scream Scale (HITS) scale.^[4-5] The study was approved by Ethics committee of GTB Hospital, Delhi and all the subjects gave informed consent before interview. The data was compiled using SPSS software version 20.0.

RESULTS

Table 1 shows that the mean age of female subjects were 26.88 ± 3.7 years and male were 30.19 ± 4.7 years. Table 2 shows that most of couples were literate. 91 % of females were housewives whereas majority (99 %) of males were employed with 46 % involved in the unskilled labor sector hence not well paid. Majority (81%) of patient belonged to Hindu region followed by Muslims (16%). Figure 1 shows that the primary infertility among couples (85%) was more than the secondary (15%) infertility and it was mostly attributable to female factors (36.3%) followed by male factors (13.6%). Figure 2 shows that the 11.3% of infertile females and 2.5% of infertile males screened positive for Domestic violence by using HITS scale. Females were more sufferers than males. Figure 3 shows that among whom in which Domestic Violence was present (11.3% of females and 2.5% of males); history of physical hurt were present in almost all of them. Table 3 shows that 36.3%

of infertile couples do not know the reason behind their failure to conceive. Infertility was mostly attributable to female than males.

DISCUSSION

The increased vulnerability for violence of any kind among female associated with infertility is really a stressful condition. The effect of violence may also be fetal as a result of intentional homicide, severe injury or suicide.^[6] The prevalence of domestic violence among infertile female was 33% by Yildizhan R *et al* in Turkey,^[7] 41.6%

Table 3: Etiology of infertility among the study couples (n=80)

Etiology	N (%)
Female factor	29 (36.3)
Male factor	11(13.6)
Both female and male factor	4 (5)
Both Normal	7 (8.8)
Not known	29 (36.3)
Total	80 (100)

Age (completed years)	Females	Males
	N (%)	N (%)
20 – 24	23 (28.8)	8 (10)
25 – 29	35 (43.8)	27 (33.8)
30 – 34	19 (23.8)	28 (35)
35 – 39	3 (3.6)	13 (16.2)
>=40	0 (0)	4 (5)
Total	80 (100)	80 (100)

Education	Females	Males
	N (%)	N (%)
Professional/ Honors	0 (0)	3 (3.8)
Graduate/postgraduate	16 (20)	16 (20)
Intermediate/ Post high school	18 (22.5)	10 (12.5)
Post diploma/ High school	9 (11.3)	20 (25)
Middle school	17 (21.3)	23 (28.8)
Primary	15 (18.8)	5 (6.3)
Illiterate	5 (6.1)	3 (3.6)
Total	80 (100)	80 (100)

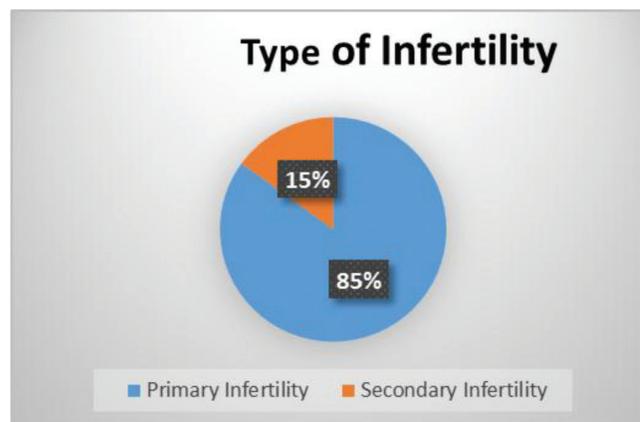


Figure 1: Type of Infertility of Infertile Couples (n=80)

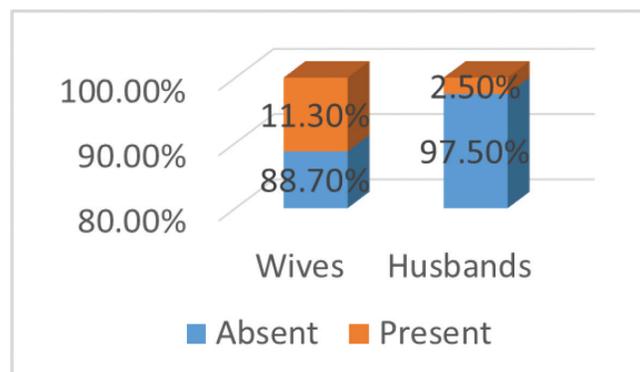


Figure 2: Magnitude of Domestic Violence among infertile couples (n=80)

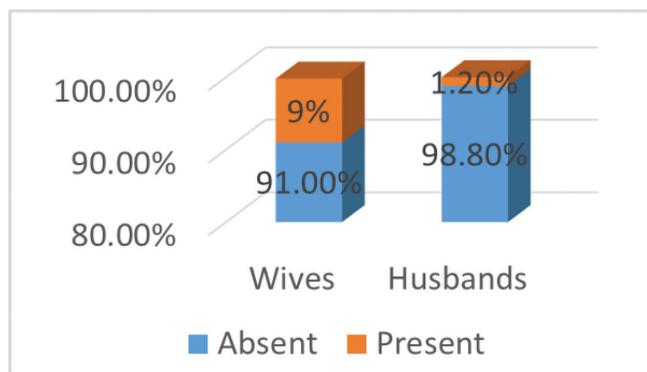


Figure 3: Magnitude of Physical Hurt among infertile couples (n=80)

by Ameh N *et al* in Nigeria^[8] and 61.8% by Ardabili *et al*,^[9] this are much larger than the our present study. Our study found that magnitude of domestic violence more in females (11.3%) than males (2.5%) and among females in which domestic violence present (11.3%), all most all of them screen positive for physical hurt. These finding support those of previous studies done in Egypt (34%)^[10] Canada (17%),^[11] Bangladesh (42%)^[12] and Pakistan (80%).^[13] The domestic violence in our study much low as compared to other studies. Perhaps reason for that the study is a couple based study and majority of the husbands were supportive as they accompanied with their female partner.

One of the limitation of present study are low prevalence of domestic violence among couples. The sample size was small and highly selected from single hospital. The strength of the present study was to represent the situation male attending infertility clinic. Domestic violence is frequently unreported because women fear the perpetrators reprisal, shame, court procedure and uncertainty about the outcome.^[13] When the domestic violence identified, the physician should evaluate its severity and make note of details.^[14]

CONCLUSION

Based on emerging evidence regards to domestic violence and infertility, prompt evaluation and screening of couples for violence in the same setting are very important steps.

ACKNOWLEDGEMENT

Hereby, we extend our gratitude to all the participants and the support from the departments.

Conflict of interest: None

Financial support and sponsorship: None

Abbreviations: None

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Cite this article as: Budh N, Chaturvedi S, Upadhyay M, Bhatia MS, Radhakrishnan G. Burden of Domestic Violence among Infertile Couples in Delhi: A Hospital Based Study. J Pharm Pract Community Med. 2017;3(4):274-6.