

## Domestic Violence against Women in Sivas, Turkey: Survey Study

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**Aim** To determine the self-reported prevalence of domestic violence and associated risk factors in the Sivas province of Turkey.

**Method** Five hundred and eighty-three households were chosen by the method of stratified random sampling. The average age among women was  $28.65 \pm 4.64$ . A total of 45.3% of women were in 30-34 age-group, 76.5% were housewives, and 91.2% were married. The data were gathered by performing face-to-face interviews in participants' homes. Demographic data were obtained by fill-in forms.

**Results:** We found a statistically significant relationship among the types of violence and annual income, type of family, education and occupation level of women, education level of perpetrators, watching violent films, and childhood experience of emotional abuse or negligence. Fifty-two percent of women were exposed to at least one type of violence. Verbal violence was the most frequent type of violence (53.8%), followed by physical violence (38.3%). About 45% of women exposed to violence were in the 30-34 age group, 41.6% completed only primary schools, 73.6% were housewives, 91.7% were married, 71.0% had been exposed to violence during their childhood, and 45.2% had been exposed to violence several times in a month. Economic problems were reported as the most important reason for domestic violence (31.4%).

**Conclusion:** Our study found higher prevalence of domestic violence than expected. As an important public health problem, domestic violence requires a multidisciplinary approach to understand its causes and plan preventive measures.

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Domestic violence against women is a serious public health concern in every community and culture (1). Domestic violence against women has drawn attention from the medical community because it has a negative and harmful impact on the mental, physical, and social health of women (2-5). World Health Organization (WHO) has defined domestic violence as “the range of sexually, psychologically, and physically coercive acts used against adult and adolescent women by current or former male intimate partners” (6,7). It is often difficult to conduct research on violence against women, since most women are reluctant to disclose information they consider confidential and intimate. They often feel shame, fear, guilt, and do not want to be disloyal to their partners (8). Besides this, differences in prevalence patterns can occur, because of different survey methods.

Violence cannot be attributed to a single cause. According to the ecological model, factors related to violence are covered under four subtitles: 1) biological and personal factors; 2) close relationships, intimate partner; 3) the community context; and 4) the broad societal factors (3,9,10). However, this model only is not sufficient to explain violence and its characteristics.

There is a number of studies highlighting the problem of domestic violence in the developing countries (8,10-13). Some studies showed a strong association between socioeconomic status and domestic violence, indicating a significant inverse relation between the income or education level of the male partner and violence (14). Some studies reported that women with greater autonomy, higher educational level, and control over economical resources are more protected against violence (3). However, in many families the husband is the sole decision-maker and the only one in control over financial matters (2,3,15,16). Experiencing abuse or witnessing domestic violence in childhood often turns individuals into either victims or perpetrators, thus closing the vicious circle of domestic violence. According to some

studies, large families or larger number of children is associated with a reduced risk of domestic violence (11,17).

It has been reported that one out of five women in South Australia has been exposed to domestic violence in forms of physical and/or sexual abuse (18). Violence against women in North America is still prevalent, with lifetime prevalence of 40%-51% (19). The rate of physical violence is higher in developing than in developed countries. The rate of women who are exposed to violence by their husbands is 45% in India, 47% in Philippines, 52% in Kenya (20). In Arab and Islamic countries, domestic violence is not yet considered a major concern, although its frequency is quite high. Surveys carried out in those countries have shown that the ratio of women who have been exposed to violence by their husbands is at least one in three women (21).

Domestic violence is an increasingly important issue in Turkey as in the rest of the world. It has gained its importance since 1970, and in the mid 1980s it was brought to the public agenda for discussion. The first collective reaction of women against violence was the march of “No Violence” campaign performed in 1987. This was followed by reactions in “Kariye Women Festival” in 1987. In Turkey, violence is perceived as a discipline tool, which lead to legitimization of violence within the family and society that reproduces and camouflages violence. There are legal provisions accepting the legitimacy of domestic violence. In Turkish Criminal Law, there is no special provision for domestic violence. It is easier for a woman to complain to the formal authorities about violence in the street than about domestic violence.

A study including 300 married women treated in the psychiatric outpatient clinic of the Hospital of Cumhuriyet University showed that domestic violence against women was highly prevalent and that women were trying to hide it (22). The study determined that 57% of women in the 16-29 age group were exposed to physical

violence. The prevalence of emotional violence was 36%, economical 32%, sexual 30.7%, and verbal 29.3%.

According to data from the Institution of Family Research (23), 35% of women in Turkey experienced physical violence from their husbands. According to the research, domestic violence was common to all socio-economical levels both in urban and rural areas. Among the causes of domestic violence reported, there were economical difficulties, temperament of the husbands, and provocation of husbands by their relatives. However, we do exactly not know which factors affect the prevalence of domestic violence in Turkey. As far as we know, there is no study investigating the relationship between domestic violence and childhood traumas. In this study, we aimed to determine the self-reported prevalence of domestic violence and the associated risk factors in the Sivas province in Turkey.

## Participants and methods

### Settings

This survey was conducted in the Sivas province in 2004. Sivas is a semi-rural city in central Anatolia, with a population of 252 500 according to the 2000 census data. Approximately 40% of the population is younger than 18 years of age, and 4% are older than 65. Twenty-two percent of the population in the province is illiterate. Animal farming and agriculture are common sources of family income. Besides migration from the villages, there is also migration from the city of Sivas which is not an industrialized city, with low education and high unemployment rates and ongoing traditional attitudes.

The dominant religion in Turkey is Islam, with the estimated Muslim population of 98%. Although we did not ask our participants directly, we presumed that they were Muslims. Because of the traditional role of woman in Islam, women are more likely become victims of domestic vi-

olence and are less likely to complain. However, within last twenty years, especially in big cities, women have begun to seek their rights legally.

### Participants

Our target population comprises 63 neighborhoods and 37 986 households in the Sivas province. The size of sample was estimated using  $n = N + t^2 \times p \times q / d^2 \times (N-1) \times t^2 \times p \times q$  formula (24) ( $N$  = universe,  $t$  = table  $t$  value,  $\alpha = 0.05$ ,  $t = 1.96$ ,  $p$  = the observation frequency of the analyzed facts,  $q$  = the observation possibility of the analyzed fact,  $d$  = the value of deviation in the average value of the analyzed facts). This means that 583 households (one woman per each household) were included in the survey using the stratified sampling method. Ten neighborhoods have been chosen from the universe to represent typical characteristics Sivas province population (five of them represent peripheral and other five represent central neighborhoods).

Five hundred and eighty-three households included in the sampling have been chosen using the method of stratified random sampling. Our assessment unit was the woman who represented the family.

Women were asked about age, level of education, occupation, marital status, annual income of the family, number of the children, childhood history involving exposure to violence, presence of violence in the women's parent's house, type of violence, the violent party, frequency of the violence, causes of the violence, type of the family, socioeconomic level, the habitual rate of watching movies/serials including violence, whether the one who applies violence experienced abuse or neglect when he or she was a child.

### Procedure

Permission to conduct this research was received from the Sivas governorship. It was conducted by four trained female pollsters, who were provided supervision in case of problems.

Informed consent to participate in the study was obtained by all participants.

The data were gathered by having face-to-face interviews with women in their homes. Women from the households accepted to participate in the questionnaire. During the interview, the woman was alone with the interviewer. We guaranteed the anonymity of the responses. We carried out the questionnaire in accordance with recommendations of WHO ethical and safety recommendations for domestic violence research (25). The interview lasted for an average of 30 minutes.

### Statistical analysis

Statistical analysis was performed using Statistical Package for Social Sciences, version 11.0.1 (SPSS Inc., Chicago, IL, USA). Multi-nominal logistic regression analysis was used in statistical evaluation.

### Results

Demographic characteristics of the sample such as age, marital status, income level, educational level, family structure, childhood exposure to violence are shown in Table 1. The average age of all participants was  $28.65 \pm 4.64$ . Among them, 45.3% of women were in the 30-34 age group, 42.7% of them completed only primary school, 76.5% were housewives, 91.2% were married, 56.6% had 3-4 children, 54.2% of them had annual income of less than US \$5000, and 66.4% had been exposed to violence during their childhood.

Characteristics of husbands are shown in Table 2. Among them, 42% completed only primary school, 61.2% had been exposed to violence during childhood, and 57.6% experienced abuse/neglect in childhood

### Outcome measures

Out of 583 women, 303 (52%) were exposed to at least one type of violence (Table 3). About

45% ( $n = 134$ ) of women who were exposed to violence were in the age group of 30-34, 41.6% ( $n = 126$ ) were primary school graduates, 73.6%

**Table 1.** Demographic characteristics of women from the province of Sivas, Turkey included in the survey

Characteristics	No. (%) of women
Age group (years):	
15-19	20 (3.4)
20-24	94 (16.1)
25-29	168 (28.8)
30-34	264 (45.3)
≥35	37 (7.4)
Educational level:	
illiterate	144 (24.7)
primary school	249 (42.7)
high school	171 (29.3)
university	19 (3.3)
Marital status:	
single	21 (3.6)
married	532 (91.2)
widowed	30 (5.2)
Type of family:	
nuclear	403 (69.1)
large	150 (25.7)
separated	22 (3.8)
no answer	8 (1.4)
Occupation:	
housewife	446 (76.5)
civil servant	48 (8.2)
worker	89 (15.3)
No. of children:	
no	44 (7.6)
1-2	155 (26.6)
3-4	330 (56.6)
≥5	54 (9.2)
Annual income of family (US \$):	
<5000	316 (54.2)
5000-9999	218 (37.4)
≥10000	49 (8.4)
Violence in childhood:	
never	196 (33.6)
sometimes	297 (50.9)
frequently	90 (15.5)

**Table 2.** Demographic characteristics of husbands, as reported by interviewed women from the province of Sivas, Turkey

Characteristics	No. (%) of husbands
Educational level:	
illiterate	146 (25.0)
primary school	247 (42.4)
high school	171 (29.3)
university	19 (3.3)
Occupation:	
tradesman	207 (35.5)
worker	139 (23.8)
civil servant	109 (18.7)
unemployed	87 (14.9)
other	41 (7.1)
Watched violent movies/series:	
yes	357 (61.2)
no	226 (38.8)
Emotional abuse and/or neglect in childhood:	
yes	336 (57.6)
no	247 (42.4)

**Table 3.** Demographic characteristics of women exposed to violence from the province of Sivas, Turkey

Characteristics	No. (%) of women reporting violence
Age:	
15-19	12 (4.0)
20-24	39 (12.9)
25-29	90 (29.6)
30-34	135 (44.6)
≥35	27 (8.9)
Educational level:	
illiterate	114 (37.6)
primary school	126 (41.6)
high school	54 (17.8)
university	9 (3.0)
Marital status:	
single	16 (5.3)
married	278 (91.7)
widowed	9 (3.0)
Type of family:	
nuclear	206 (68.0)
large	79 (26.1)
broken	18 (5.9)
Occupation:	
housewife	223 (73.6)
civil servant	28 (9.2)
worker	52 (17.2)
Annual family income (US \$):	
<5000	191 (63.0)
5000-9999	90 (29.7)
≥10000	22 (7.3)
Violence in childhood:	
never	88 (29.0)
sometimes	165 (54.5)
frequently	50 (16.5)

(n = 223) were housewives, 1.7% (n = 278) were married, 68.0% (n = 206) had nuclear family, 63.0% (n = 191) had an annual income of less than US \$5000, and 71.0% (n = 215) had been exposed to violence in childhood.

A total of 163 (53.8%) women reported verbal violence, which was the most frequent form of violence (Table 4). Almost half of the women (45.2%) reported being exposed to violence several times in a month. The husbands were the most frequent perpetrators (n = 217, 71.6%), whereas economic reasons were most frequently reported (n = 95, 31.4%) as the cause of violence.

In Table 5, we showed the distribution of the types of violence according to various variables such as annual income, type of family, educational level, occupation, childhood emotional abuse and/or neglect. Domestic violence was the most prevalent in examinees had an annual income of less than US \$5000, in nuclear family, in house-

**Table 4.** Characteristics of domestic violence reported by women from the province of Sivas, Turkey

Characteristics	No. (%) of women reporting
Domestic violence:	
yes	303 (52.0)
no	280 (48.0)
Type of violence:	
verbal	163 (53.8)
physical	116 (38.3)
sexual	24 (7.9)
Frequency of violence:	
every day	27 (8.9)
few times in a week	56 (18.5)
few times in a month	137 (45.2)
few times in a year	83 (27.4)
Perpetrators of violence:	
husband	217 (71.6)
father	29 (9.6)
male child (son or brother)	22 (7.3)
other members of family	35 (11.5)
Reasons of violence:	
economic	95 (31.4)
cultural	83 (27.4)
psychological	67 (22.1)
sexual	28 (9.2)
no reason	16 (5.3)
other	14 (4.6)

wives, in illiterates, and had been sometimes exposed to violence during their childhood.

We found statistically important relationships between the types of violence and certain characteristics such as subgroups of annual income, type of family, educational level, and occupation (Table 6).

## Discussion

Our study showed the prevalence of domestic violence of 52.0%. The most prevalent type of violence was verbal violence, while the most frequent rate of violence was several times in a month. Economic, cultural, and psychological factors were the most prevalent causes of violence. Among women who were exposed to violence by their husbands, more than two thirds were also exposed to childhood violence and experienced violence in parents' house. Most women also reported that their husbands watched violent TV series and films, and that they were exposed to childhood abuse/neglect.

The rate of domestic violence of 52.0% is considerably higher than the rates found in oth-

**Table 5.** Distribution of the types of violence according to various variables of women (annual income, type of family, educational level, occupation, childhood emotional abuse and/or neglect) in the province of Sivas, Turkey

Variables	Types of violence (No., %)		
	verbal (n = 163)	physical (n = 116)	total (n = 303)
Annual income (US \$):			
<5000	103 (63.2)	73 (62.9)	191 (63.0)
5000-9999	50 (30.7)	34 (29.3)	90 (29.7)
≥10000	10 (6.1)	9 (7.8)	22 (7.3)
Type of family:			
nuclear	107 (65.7)	84 (72.4)	206 (68.0)
large	47 (28.8)	26 (22.4)	79 (26.1)
broken	9 (5.5)	6 (5.2)	18 (5.9)
Educational level:			
illiterate	72 (44.2)	36 (31.0)	114 (37.6)
primary school	66 (40.5)	51 (44.0)	126 (41.6)
high school	24 (14.7)	22 (19.0)	54 (17.8)
university	1 (0.6)	7 (6.0)	9 (3.0)
Occupation:			
housewife	117 (71.8)	85 (73.3)	223 (70.0)
civil servant	11 (6.7)	17 (14.6)	28 (9.2)
worker	35 (21.5)	14 (12.1)	52 (17.2)
Childhood emotional abuse and/or neglect of victims:			
never	46 (28.2)	35 (30.2)	88 (29.0)
sometimes	89 (54.6)	65 (56.0)	165 (54.5)
frequently	28 (17.2)	16 (13.8)	50 (16.5)

er counties. The rate of domestic violence was between 21%-30% in the USA (23), 17.8% in South Australia (26), and 24.6% in South Africa (3). Lifetime prevalence of all kinds of domestic violence was 52% in Nicaragua (18), 62% in Kenya (23), and 43.3% in Mexico (26). Prevalence of physical violence was 30.4% in Uganda (7), 13% in Philippines (27), 40% in Zimbabwe (28), whereas the prevalence of verbal violence was 40.1% in Uganda (7).

High rates are generally seen in developing societies. It has been found that the most prevalent type of violence was the verbal type, similar to other studies (29).

The most frequent rate of violence was several times in a month. These findings can be explained by the concept of violence in Turkish culture, where violence against women is tolerated and considered as a means of discipline or punishment. It is a common thing for most men to speak rudely and swear in daily life.

Economic, cultural, and psychological factors are among the most frequently stated causes

**Table 6.** Relationships between women's characteristics and different types of violence in the province of Sivas, Turkey

Variables	Subgroups of variables*	Odds ratio (95% CI)
Verbal violence:		
annual income	5000-9999 US\$	8.80 (3.27-23.64)
educational level	illiterate	231.12 (26.80-1993.34)
	elementary	15.00 (1.82-115.48)
	high school	15.05 (1.82-124.41)
occupation	housewife	0.08 (0.03-0.23)
	civil servant	0.07 (0.02-0.26)
Physical violence:		
annual income	5000-9999 US\$	7.47 (2.74-20.38)
educational level	illiterate	17.12 (5.42-54.10)
occupation	housewife	0.17 (0.06-0.52)
Sexual violence:		
type of family	nuclear	0.14 (0.02-0.95)
	large	0.09 (0.01-0.66)
occupation	housewife	0.17 (0.04-0.81)

\*Multinomial logistic regression analysis. Only significant variables are shown.

of violence. These can also be the effects as well as causes of violence (25). In our sample, families with low-income level showed a higher rate of violence. In our study, the rate of domestic violence decreased as the annual income level increased. This can be explained by the protective effect of economic independence (7,19). Low level of education is a risk factor for domestic violence (4,26,30,31). We also found a significant correlation between these two factors, especially among the illiterate groups.

About 74% of women exposed to violence were housewives, as opposed to civil servants and workers who together reached the rate of 26.4%, confirming the protective effect of economic independence.

More than two thirds of women exposed to violence were also exposed to violence during their childhood and in their parents' house. Women reported that their husbands were exposed to violence during their childhood and often watched films and series including violence. These findings are important, as violence is partially a learned behavior (4,9,22,26). Childhood abuse among husbands was high in our study. Living in a large family was reported to have a protective impact on domestic violence (15,20,31). We found lower sexual violence ratio in nuclear and large families than in broken ones.

The reasons of violence are various socio-economic factors such as power, employment, education level, economic level, and social status. Domestic violence is associated with poverty, male employment, and status differences between partners. Similar to other studies, perpetrators in our sample also had higher levels of unemployment, lower income, and lower education level (3,14,15,23,28).

Our study has some limitations. First, monthly and annual prevalence have not been studied. Second, domestic violence has not been studied from all points of view, so that the use of alcohol/substance, duration of living with the partner, and psychosocial factors are also investigated. Finally, our data could not be generalized to whole Turkey. The advantage of our study is that we took into consideration the childhood trauma of both victims and perpetrators.

In general, there are two constraints that affect the majority of studies on domestic violence. First, community-based data are relatively scarce due to the non-availability of the data from women who have not attended shelters or other services for victims of violence, ie, the silent majority (32,33). The second weakness is the lack of cross-cultural research. Culture is known to have an effect on violence and the meaning ascribed to different acts might differ depending on cultural differences among societies (2,34).

Turkey's legal arrangements on issues such as women rights and violence have been developed, but most of women are not aware of their rights. Women tend to accept violence as something normal. This might be related to the fact that men culturally possess women, that manhood is associated with violence, that sexual roles are rigidly differentiated, and that violence is widely accepted as a form of behavior. The Islamic rules which prescribe obedience to women may also contribute to this, since women consider opposing their husband as a sin. Besides that, domestic affairs are something that is usually kept a secret. Our study emphasizes the need for multidisciplinary approach to domestic violence as a public health problem, in order to develop and plan public health measures which would most effectively address this problem.

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## References

- Hyman I, Guruge S, Stewart DE, Ahmad F. Primary prevention of violence against women. *Womens Health Issues*. 2000;10:288-93. [Medline:11077210](#)
- Heise L, Ellsberg M, Gottemoeller M. Ending violence against women. *Population Reports Vol. XXVII, Number 4. Population Information Program, Center for Communications Programs*. Baltimore: John Hopkins University School of Public Health; 1999.
- Jewkes R, Levin J, Penn-Kekana L. Risk factors for domestic violence: findings from a South African cross-sectional study. *Soc Sci Med*. 2002;55:1603-17. [Medline:12297246](#)
- Diaz-Olavarrieta C, Ellertson C, Paz F, de Leon SP, Alarcon-Segovia D. Prevalence of battering among 1780 outpatients at an internal medicine institution in Mexico. *Soc Sci Med*. 2002;55:1589-602. [Medline:12297245](#)
- Keeling J, Birch L. The prevalence rates of domestic abuse in women attending a family planning clinic. *J Fam Plann Reprod Health Care*. 2004;30:113-4. [Medline:15086997](#)
- WHO. WHO/WHO Violence against women: A priority health issue. Geneva: World Health Organization; 1997.
- Koenig MA, Lutalo T, Zhao F, Nalugoda F, Wabwire-Mangen F, Kiwanuka N, et al. Domestic violence in rural Uganda: evidence from a community-based study. *Bull World Health Organ*. 2003;81:53-60. [Medline:12640477](#)
- Ellsberg M, Heise L, Pena R, Agurto S, Winkvist A. Researching domestic violence against women: methodological and ethical considerations. *Stud Fam Plann*. 2001;32:1-16. [Medline:11326453](#)
- Heise LL. Violence against women: an integrated, ecological framework. *Violence Against Women*. 1998;4:262-90. [Medline:12296014](#)
- Krug EG, Mercy JA, Dahlberg LL, Zwi AB. The world report on violence and health. *Lancet*. 2002;360:1083-8. [Medline:12384003](#)
- Haj-Yahia MM, Edleson JL. Predicting the use of conflict resolution tactics among engaged Arab-Palestinian men in Israel. *J Fam Violence*. 1994;9:47-62.
- Schuler SR, Hashemi SM, Riley AP, Akhter S. Credit programs, patriarchy and men's violence against women in rural Bangladesh. *Soc Sci Med*. 1996;43:1729-42. [Medline:8961417](#)
- Fikree FF, Bhatti LI. Domestic violence and health of Pakistani women. *Int J Gynaecol Obstet*. 1999;65:195-201. [Medline:10405066](#)
- Hoffman KL, Demo DH, Edwards JN. Physical wife abuse in a non-western society: an integrated theoretical approach. *J Marriage Fam*. 1994;56:131-46.
- Ellsberg MC, Pena R, Herrera A, Liljestrand J, Winkvist A. Wife abuse among women of childbearing age in Nicaragua. *Am J Public Health*. 1999;89:241-4. [Medline:9949757](#)
- Martin SL, Moracco KE, Garro J, Tsui AO, Kupper LL, Chase JL, et al. Domestic violence across generations: findings from northern India. *Int J Epidemiol*. 2002;31:560-72. [Medline:12055156](#)

- 17 Rao V. Wife-beating in rural south India: a qualitative and econometric analysis. *Soc Sci Med.* 1997;44:1169-80. [Medline:9131741](#)
- 18 Grande ED, Hickling J, Taylor A, Woollacott T. Domestic violence in South Australia: a population survey of males and females. *Aust N Z J Public Health.* 2003;27:543-50. [Medline:14651403](#)
- 19 Erlick Robinson G. Violence against women in North America. *Arch Womens Ment Health.* 2003;6:185-91. [Medline:12920616](#)
- 20 UNESCO. Domestic violence against women and girls. Florence: Innocenti Research Centre; 2000.
- 21 Douki S, Nacef F, Belhadj A, Bouasker A, Ghachem R. Violence against women in Arab and Islamic countries. *Arch Women Arch Womens Ment Health.* 2003;6:165-71s *Ment Health.* 2003;6:165-71.
- 22 Akyuz A, Kugu N, Dogan O, Ozdemir L. Domestic violence, marriage problems, referral complaints and psychiatric diagnosis of the married women admitted to a psychiatry outpatient clinic [in Turkish]. *Yeni Symposium.* 2002;40:41-8.
- 23 Institution of family research. The results and causes of domestic violence [in Turkish]. Number 86, Ankara: Prime Minister Publishing; 1995.
- 24 Sumbuloglu K, Sumbuloglu V. Biostatistics [in Turkish]. Ankara: Ozdemir Yayinlari; 1995.
- 25 Ellsberg M, Heise L. Bearing witness: ethics in domestic violence research. *Lancet.* 2002;359:1599-604. [Medline:12047984](#)
- 26 Rivera-Rivera L, Lazcano-Ponce E, Salmeron-Castro J, Salazar-Martinez E, Castro R, Hernandez-Avila M. Prevalence and determinants of male partner violence against Mexican women: a population-based study. *Salud Publica Mex.* 2004;46:113-22. [Medline:15176573](#)
- 27 Hindin MJ, Adair LS. Who's at risk? Factors associated with intimate partner violence in the Philippines. *Soc Sci Med.* 2002;55:1385-99. [Medline:12231016](#)
- 28 Watts C, Keogh E, Ndlovu M, Kwaramba R. Withholding of sex and forced sex: dimensions of violence against Zimbabwean women. *Reprod Health Matters.* 1998;6:57-65.
- 29 Martin SL, Tsui AO, Maitra K, Marinshaw R. Domestic violence in northern India. *Am J Epidemiol.* 1999;150:417-26. [Medline:10453818](#)
- 30 Harwell TS, Moore KR, Spence MR. Physical violence, intimate partner violence, and emotional abuse among adult American Indian men and women in Montana. *Prev Med.* 2003;37:297-303. [Medline:14507485](#)
- 31 Koenig MA, Ahmed S, Hossain MB, Khorshed Alam Mozumder AB. Women's status and domestic violence in rural Bangladesh: individual- and community-level effects. *Demography.* 2003;40:269-88. [Medline:12846132](#)
- 32 Sorenson SB, Safilas AF. Violence and women's health. The role of epidemiology. *Ann Epidemiol.* 1994;4:140-5. [Medline:8205281](#)
- 33 Strube MJ. The decision to leave an abusive relationship: empirical evidence and theoretical issues. *Psychol Bull.* 1988;104:236-50. [Medline:3054996](#)
- 34 Counts DA, Brown J, Campbell JC, editors. *Sanctions and sanctuary: cultural perspectives on the beating of wives.* Boulder, CO: Westview Press; 1992.