

Determining The Effect of Education and The Quality of Education on The Attitude to Domestic Violence

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Abstract

Objective: The aim of this study was to determine whether education made any difference to the attitude of an individual to domestic violence and whether or not the quality of the education affected this attitude.

Methods: The study was applied as a survey to 364 individuals participating on a voluntary basis in Malatya, Turkey between January-February 2014. The participants were students from the Faculty of Law and the Faculty of Medicine and an age-matched group of tradespeople who had not received a university education.

Results: To the question of 'Can women be beaten?', a response of 'yes' was given by 40.3% of males and 11.9% of females. To the question of 'In a woman's murder, can the woman be to blame?', the response of 'yes' was given by male tradespeople (51.8%) at the rate of 2.39 times more than by male medical students (16.9%). The positive response to the same question given by male law students (40.4%) at a rate 1.99 times more than that of the medical students. To the question of 'Can a woman refuse her husband's sexual request?', the response of 'she can not refuse' was given by male tradespeople (38.2%) at a rate 3.04 times greater than by male medical students (16.09%) and 4.2 times greater than by male law students (12.8%).

Conclusion: It was understood that a university education had a positive effect on the development of the attitude to domestic violence.

Keywords: Domestic violence, education, honour killing, attitude

I. INTRODUCTION

Domestic violence and its consequences is one of the most important human rights violations, creating health and legal problems throughout the world.^(1,2) The type of violence which mostly occurs between spouses or family members and has significant negative effects on economic, physical, personal and sexual development is defined as Domestic Violence.^(3, 4, 5) According to a study conducted in several et al, it was reported that 15%-71% of women had been exposed at some time to physical or sexual violence from their spouse or partner.⁽²⁾ This situation is seen to be widespread and increasing in Turkey.^(6,7)

According to research, women comprise the vast majority of those exposed to domestic violence.^(4,9,10) Various factors have been held responsible for violence against women, including low socio-economic status, exposure to violence while young, higher income of women than men, the woman's perception that violence can only be physical, unemployment, lack of health insurance, unplanned pregnancy, a high number of children in the family, watching violent TV series and movies, living with the spouse's family, alcohol consumption of the husband, genetic predisposition, schizophrenia, and some mental disorders such as paranoia.^(11,12,13,14,22,24) The United States Centers Control and Prevention (CDC) has defined several theories for the prevention of domestic violence and identification of risk factors. Models have been developed such as biological, psychological, cultural, educational and gender equality concepts. These studies have aimed to reduce and prevent domestic violence.⁽²³⁾

One of the most influential factors in domestic violence is the individual's attitude. The positive or negative emotional and mental state reached as a result of life and experience, which has dynamic and guiding influence on related objects and situations, is defined as Attitude.^(5,15) Attitudes are not innate and can be gained culturally through socialization during the education and learning process. In male dominated societies, individuals who have been exposed to or witnessed violence from childhood are thought to have acquired the attitude of showing a tendency to violence in later life.^(22, 23)

It is believed that educational level and the quality of education have important effects on the formation of attitudes toward domestic violence. In this study, an investigation was made into education and the quality of

education on the determination of attitudes towards “Domestic Violence”, which has become a severe health and social problem with legal implications.

II. MATERIALS AND METHODS

This study to evaluate attitudes included students currently studying at a university and age-matched tradespeople who were not university educated. Students were selected from the faculty of medicine from digital sciences and from the faculty of law from social sciences university and age-matched tradespeople (this group was selected as it was more easily contacted). The study was applied as a volunteer-based survey. From the power analysis calculated as $\alpha=0.05$ and $1-\beta$ (power) =0.80, it was determined that at least 98 subjects were necessary for each group. The survey was conducted on a total number of 346 individuals, comprising 163 faculty of medicine students (83 males and 80 females), 100 faculty of law students (47 males and 53 females) and 83 tradespeople (56 males and 27 females) (Table 1).

The data obtained from the survey were analyzed with SPSS program version 17.0. Quantitative data were presented as mean and standard deviation, number and percentage. Pearson’s Chi-square test and Odds ratio were used in the statistical evaluation. A value of $p < 0.05$ was accepted as statistically significant.

III. RESULTS

The mean age of respondents was 22.1 years with the mean age of medical students determined as 19.9 years, mean age of law students 21.8 years and the mean age of tradespeople 23.6 years (Table 1).

Table 1. Distribution of the groups according to gender and age

Gender	Medicine Number %	Law Number %	Tradesperson Number %	Total Number %
Male	83 (24.0)	47 (13.6)	56 (16.2)	186 (53.8)
Female	80 (23.1)	53 (15.3)	27 (7.8)	160 (46.2)
Total	163 (47.1)	100 (28.9)	83 (24.0)	346 (100)
	Medicine	Law	Tradesperson	Total
Age*	19.9	21.8	23.6	22.1

*SD ± 2.42

In the evaluation by gender, as shown in Table 2, a statistically significant difference was found in the responses of males to the questions on the attitudes towards domestic violence against women. Although no statistically significant difference was determined between the genders in the response to “Have you ever observed your parents fight?”, the response of “Yes” of both genders was found to be at an extremely high rate. To the question of ‘when you hear of a woman’s murder in written, visual or social media, do you think the woman could be at fault?’ 33.3% (n=62) of males and 6.2% (n=10) of females responded ‘yes’.

Table 2. Attitudes of the respondents towards domestic violence against women, according to gender

Questions	Male % (n=186)	Female % (n=160)	p
Women can be beaten	40.3(75)	11.9(19)	0.0001
Unfaithful women should be killed	15.6(29)	3.8(6)	0.0001
Unfaithful women should be beaten	10.2(19)	4.4(7)	0.04
The woman may be to blame for her murder	33.3(62)	6.2(10)	0.0001
Have you witnessed your parents fight?	63.2(117)	66.9(107)	

When questions were asked to ascertain attitudes towards a woman’s social life, a statistically significant difference was found in the responses given by males (Table 3).

Table 3. Responses to questions on attitudes towards a woman’s social life, according to gender

Questions	Male % (n=186)	Female % (n=160)	p
A woman needs permission for social activities	43.2(80)	21.9(35)	0.0001
A wife cannot deny her husband’s sexual request	22.2(41)	5.0(8)	0.0001

Table 4 shows the attitudes of each group towards domestic violence according to gender. When the responses to the question, ‘when you hear of a woman’s murder in written, visual or social media, do you think the woman could be at fault?’ were evaluated according to gender between the groups, 16.9% of male medical students (n=14), 40.4 % of male law students (n=19), and 51.8 % of male tradesmen (n=29) stated that the woman could be culpable and these rates were found to be statistically significant. When this significant difference among the male respondents of the three groups was evaluated, the statement that the woman was to

blame was accepted by the law students 1.99 times more than by the medical students (OR: 1.99, 95% CI: 1.3-3.06). The ratio of finding the woman culpable was 2.39 times higher by tradespeople than by medical students

Questions	Medicine			Law			Tradesperson		
	Male(%) (n=83)	Female(%) (n=80)	Total(%) (n=163)	Male(%) (n=47)	Female (%) (n=53)	Total(%) (n=100)	Male(%) (n=56)	Female(%) (n=27)	Total(%) (n=83)
Women can be beaten	36.1 (30)	12.5(10)	24.5(40)	38.3 (18)	11.3(6)	24.0(24)	48.2 (27)	11.1(3)	36.1(30)
Unfaithful women should be killed	16.9(14)	2.5(2)	9.8(16)	10.6(5)	3.8(2)	7.0(7)	17.9(10)	7.4(2)	14.5(12)
Unfaithful women should be beaten	7.2(6)	2.5(2)	4.9(8)	17.0(8)	3.8(2)	10.0(10)	8.9(5)	11.1(3)	9.8(8)
The woman may be to blame for her murder *	16.9(14)	5.0(4)	11.0(18)	40.4**(19)	3.8(2)	21.0(21)	51.8*** (29)	14.8(4)	39.8(33)
Have you witnessed your parents fight?	57.8(48)	62.5(50)	60.1(98)	70.2(33)	75.5(40)	73.0(73)	65.5(36)	63.0(17)	29.0(53)

(OR: 2.39, 95% CI: 1.6-3.5). No statistically significant difference was determined between the responses of the law students and the tradespeople to the same question. When the responses to other questions of the questionnaire were evaluated, no statistically significant difference was found between the groups.

Table 4. The attitudes of each group towards domestic violence against women, according to gender
*p=0.0001** (Law-Medicine Males) OR: 1.99 (95% CI: 1.3-3.06) *** (Tradesperson-Medicine Males) OR: 2.39 (95% CI: 1.6-3.5)

Table 5 shows the attitudes of each group towards interfering in a woman’s social and sexual life according to gender. When the question of “denying sexual demand” was asked, 16.9% of the medical students (n=14), 12.8 % of the law students (n=6), and 38.2 % of male tradespeople (n=21) stated that a woman cannot deny her husband’s sexual demands and these ratios were found to be statistically significant (p=0.003). When the difference found between the males of each group was analysed, the positive response of male tradespeople (38.2%) was seen to be 4.2 times more than that of male law students (12.8%) (OR:4.2, 95% CI:1.53-11.64). The comparison of male tradespeople and male medical students determined a positive response to “sexual demands of the husband cannot be denied” of 3.04 times more than that of medical students (16.09%) (OR: 3.04, 95% CI: 1.38-6.71). No significant difference was determined between the responses of the male law students and the male medical students. No significant difference was determined between the groups in respect of responses to other questions about social and sexual life intervention.

Table 5. The attitudes of each group towards intervention in the social life of women, according to gender

Questions	Medicine			Law			Tradesperson		
	Male(%) (n=83)	Female(%) (n=80)	Total(%) (n=163)	Male(%) (n=47)	Female(%) (n=53)	Total(%) (n=100)	Male(%) (n=56)	Female(%) (n=27)	Total(%) (n=83)
A woman needs permission for social activities	37.3(31)	16.3(13)	27.0(44)	42.6 (20)	22.6(12)	32.0(32)	52.7(29)	37.0(10)	47.0(39)
A wife cannot deny her husband’s sexual request*	16.9(14)	4.0(4)	11.0(18)	12.8**(6)	1.9(1)	7.0(7)	38.2*** (21)	11.1(3)	30.0(24)

*p= 0.003** (Law-Male) OR:4.2 (95% CI:1.53-11.64) ** (Medicine-Male) OR:3.04 95% CI:1.38-6.71)

IV. DISCUSSION

Violence is a method applied by people who cannot find any other solution to their problems. The continuity and spread of domestic violence in society arises from the idea that violence is accepted as a tool which helps people to control women and solve their problems.^(2,9) According to Bandura's Social Learning Theory, children and teenagers witnessing violence will normalize this behaviour and continue to apply it later in life.^(8,16,17,26) Domestic violence against women is considered in many societies to be a private issue and many cases are not reported because of security and social pressure.⁽¹⁰⁾ In many cultures domestic violence against women is encouraged and described as "honour and tradition".^(11, 18) Therefore, the statistics available in Turkey constitute only the tip of the iceberg, as is the case in many other countries. Previous studies related to domestic violence have obtained different statistical results.^(2,4) In these studies, the demographic and socio-cultural status of those suffering the violence has been investigated and the types of violence applied to women have been considered.^(24,25,26) To the best of our knowledge, there has been no previous study which has examined the effect of education and the quality of education on attitudes to domestic violence. In this respect, the current study can be considered to be of importance.

According to the data obtained, that there was a high response of 'yes' across all the groups to the question, 'have you ever witnessed your parents fight?' shows that fights between spouses are often experienced in the general population. Attempting to solve family problems by violence can be considered to have a significant role in the formation of an individual's attitudes to domestic violence, as attitudes are acquired from educational, cultural and societal experience.

When the groups were evaluated as a whole, it was determined that males demonstrated an attitude giving more approval to domestic violence than females. From a scan of literature, similar to the current study, it was seen that generally violence was perpetrated by males and males showed a greater tendency to violence.^(2, 9, 20, 23,25)

This situation not only shows that males have adopted cultural and traditional patterns, but also suggests that many societies are under the pressure of a dominant patriarchal attitude. This explains the high rate of positive responses to the statement, 'In the murder of a woman, the woman could be to blame'. The respondents thought that women were not fulfilling their traditional role, function and responsibilities. This view places the woman as a victim and prevents resolution of the the problem.^(5,22,24)

The result that the medical students showed a more positive attitude than the other groups in response to the question 'In the murder of a woman, could the woman be to blame?' could be due to the success and influence of the "Health Advocate" mission, as one of the aims of medical faculties.⁽²¹⁾ That there was a high response of 'yes' to the same question from the males in all the groups was consistent with the findings of several studies and confirms that there is sexist prejudice in Turkish society.^(3,11,23)

Similarly, high rates were seen in the males of all the groups in the responses given to questions about interfering in a woman's social life. To the question of 'Can a woman refuse her husband's sexual requests?', a significantly higher rate of response of 'she cannot refuse' was given by the males in the tradespeople group compared with the other groups and this can be considered to be the result of an economically strengthened male trying to exert more control over a woman. There is a need for more detailed research on this subject.

In conclusion, the results of this study showed that a university education was determined to have a positive effect on the attitude to domestic violence. In the comparison of the quality of education, medical education was determined to have had an effect on creating a more positive attitude compared to legal education. Consideration of lesson content in university education in respect of domestic violence would be useful. It could be considered that this would contribute to the development of a positive attitude to this subject.

Conflict of Interests

The authors declare that there is no conflict of interests regarding the publication of this paper.

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