

Sexual Domestic Violence Impact upon Reproductive Health during COVID-19 Pandemic among Women at Baghdad City

اثر العنف الجنسي الاسري على الصحة الانجابية اثناء جائحة فيروس كورونا بين النساء المراجعات لمراكز الرعاية الصحية الأولية في مدينة بغداد

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الخلاصة:

خلفية البحث: ينتشر العنف الجنسي على نطاق واسع، ويؤثر على النساء من جميع الثقافات على مستوى العالم، ويتكاثر في صمت، ويجد الشرعية من خلال المعايير الثقافية. أصحابها هم شركاء وأزواج وعائلة وأصدقاء. قد يكون العنف المنزلي أو الجنسي أو نوعاً آخر من العنف في المنزل أو العمل أو المكان العام، وهو انتهاك خطير لحقوق المرأة كبشر. إنه سبب مهم للمشاكل الإنجابية الجسدية والنفسية.

الاهداف: لتقييم العنف الجنسي الاسري على الصحة الانجابية للمرأة اثناء جائحة الفيروس كورونا. **المنهجية:** تم إجراء دراسة تحليلية وصفية على النساء اللواتي يتعرضن للعنف الجنسي الاسري وتحديد آثار العنف الجنسي الاسري على النساء خلال فترة جائحة كورونا. تم اختيار عينة عمدية (150) سيدة معرضة للعنف الجنسي من قبل أحد افراد اسرتها بواسطة الاستمارة الاستبيان للفترة من 26 / كانون الثاني / 2020 إلى 28 / شباط / 2020، تم جمع المعلومات من خلال مليء استمارة الاستبيان وتم تحديد الصدق والثبات من خلال الدراسة الاستطلاعية واستخدمت الوسائل الاحصائية الوصفية والاستدلالية في تحليل البيانات.

النتائج: أظهرت نتيجة الدراسة أن أعلى نسبة (79.4%) من افراد عينة الدراسة تتراوح أعمارهم بين (20 إلى 34) سنة معظمهم من ربات البيوت و ثلاث ارباع عينة الدراسة ذات مستوى تعليمي واطى، ونصف عينة الدراسة ذات الوضع الاجتماعي والاقتصادي المنخفض، وان عدد الولادات لهن تتراوح من (2-5) طفل وأكثر.

الاستنتاج: أشارت النتائج إلى أن ثلثي عينة الدراسة يعانون من تأثير العنف الجنسي الاسري عليهم في سن الإنجاب. **التوصيات:** توصي الدراسة بفحص النساء عن أي نوع من أنواع العنف المنزلي خلال سن الإنجاب. ادخال مواضيع العنف الاسري في مناهج التربية والتعليم، باستخدام وسائل التواصل الاجتماعي، وتوافر الخدمات الصحية، ودعم تعزيز التعاون بين الوكالات الاجتماعية والعدالة والشرطة من خلال إنفاذ القوانين والبحوث لتعزيز حقوق المرأة وحمايتها.

الكلمات المفتاحية: تأثير، العنف الجنسي الاسري، الصحة الانجابية، كورونا فيروس.

ABSTRACT:

Background: Sexual violence is widespread, affects women of all cultures globally, breeds in silence, and finds legitimacy through cultural norms. Proprietors are partners, husbands, family, and friends. It may be domestic violence (DV), sexual (SV), a serious violation of women's rights as human beings. It is an important cause of physical, psychological and sexual reproductive health problems.

Aims of the study: the aim is assessing domestic sexual violence on women's reproductive health during the coronavirus pandemic.

Methodology: A descriptive analytical study was conducted on women exposed to physical domestic violence. Non Probabilistic Intentional sample of (150) of women exposed to violence by a member of her family through the questionnaire for the period from 26th Jun to 28th Feb, 2020. The information was collected by filling out the questionnaire, and the validity and reliability were determined through the exploratory study, and descriptive and inferential statistical methods were used in analyzing the data.

Results: The result of the study showed that the highest percentage (79.4%) of the study sample members ranged in was at age group (20 to 34) years, most of whom were housewives, three- quarters of the study sample had a low educational level, and half of the study sample had a low socioeconomic status, and that the number of births ranging from (2-5) children and more.

Conclusion: The results indicated that two-thirds of the study sample suffers from impact sexual domestic violence on them during childbearing age.

Recommendations: The study recommends that women be screened for any type of domestic violence during childbearing age. Incorporating domestic violence topics into education curricula, using social media, the availability of health services, and supporting the strengthening of cooperation between social agencies, justice and the police through law enforcement and research to promote and protect women's rights.

Keywords: Impact, Sexual Domestic Violence, Reproductive Health and Corona Virus Pandemic.

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INTRODUCTION

Domestic violence is defined as physical, sexual, emotional, financial, or psychic harm or threats directed towards another person. It encompasses any act that isolates, frightens, terrorizes, coerces, threatens, harms, injures, or wounds another person, or even negatively

controls them ⁽¹⁾. During the covid-19 epidemic, there have been reports of growing domestic violence rates all around the world. Because ordinary people are forced to stay at home around the world, women and girls are more vulnerable to intimate partner abuse, domestic violence, and other forms of gender-based violence. In addition, the COVID-19 related economic and social pressures have resulted in a lengthy quarantine. Corona and the necessity for spouses to stay at home aggravate conventional conflicts and bring out unsolved issues, heightening sensitivity to marital weaknesses and defects ⁽²⁾.

Violence against women (VAW) in both the developed and developing nations, violence against women (VAW) is recognized as a major public health issue. It has serious effects for women's physical, emotional, sexual, and reproductive health, in addition to violating human rights. Violence against women is a form of human rights violation as well as a public health issue. Household violence is the most common form of violence faced by women, with studies estimating that 30 percent of women globally have experienced physical and sexual assault by their partners. Domestic abuse can affect not only the victims' physical and psychological well-being, but also their sexual well-being ⁽³⁾, to assess sexual domestic violence among women during the COVID-19 pandemic and assess the impact of sexual domestic violence on women's reproductive health during the COVID-19 pandemic.

AIMS OF THE STUDY

The aim is assessing domestic sexual violence on women's reproductive health during the coronavirus pandemic.

METHODOLOGY

- Study Design

A descriptive-analytical research design was carried out through interview with women at reproductive age who suffering from sexual domestic violence. It was conducted in the primary health care centers at Baghdad city in order to determine the effects of family violence during the Coronavirus pandemic from the period 26th Jan to 28th Feb 2021.

- Study Setting

The non-probability sample consisted of one hundred and fifty (150) women who were victims of sexual domestic violence who entered primary health care centers in Baghdad City. Data were collected through the use of questionnaires and individuals interviewing technique. All study samples were interviewed by the investigator, the interviews were carried out in private setting (empty rooms) in the absence of their husband or their relative especially their mothers-in-law. A pilot study was conducted on (15) women who attended the primary health centers. And These samples were excluded from the study of the original sample The validity of the questionnaire was determined through the use of a panel of (15 experts) from different related specialties and agencies interested and experience to investigate the content of the questionnaire for its clarity, relevance and adequacy. The data was collected after obtaining the agreement from women to participant in this study. Data are analyzed through the use of (SPSS) ver. (23.0).

RESULTS:

Table (1): Distribution of the total sample according to the socio-demographical characteristics (N = 150).

L.	Socio-demographic variables	Groups	No.	%
1	age groups $\bar{x} = 28.9 \pm 5.7$	20-24	39	26
		25-29	57	38.1

		30-34	23	15.3
		35-39	26	17.3
		40-44	5	3.3
2	level of education	Illiterate	7	4.7
		Read & write	15	10
		Primary school graduate	58	38.7
		Intermediate school graduate	34	22.6
		Secondary school graduate	3	2
		Institution graduate	18	12
		University graduate and above	15	10
3	occupation	Housewife	133	88.6
		Government employed	13	8.7
		Self employed	4	2.7
4	Monthly Income	Enough	16	10.7
		Almost enough	51	34
		Not enough	83	55.3
5	Family Types	Nuclear family	69	46
		Extended family	54	36
		Sharing family	27	18
6	Domestic violence has increased in light of the corona pandemic	Yes	112	74.7
		No	38	25.3

F: Frequency, %: Percentage, MS: Mean for total score, RS: Relative sufficiency, Ass: Assessment, NR: No response, Cut of point = 2 *Low= 66.67 - 77.78, **Moderate= 77.78 - 88.89, ***High= 88.89 – 100

Table (1) shows that the highest percentage of the women's age (38.1%) of the study sample is in the age group (25-29 years) with the mean \pm SD (28.9 \pm 5.7) year. while the lowest percentage was (3.3%) of the sample the study is in the category (40-44) years. Concerning the educational level the highest percentage (38.7%) were primary school graduated, while the lower percentage (2%) of study sample were secondary school graduated. Regarding occupation (88.6%) were housewife, the lower percentage (2.7%) of women's was self-employed. Regarding income the highest percentage (55.3%) were not enough, while the lower percentage (10.7%) was enough. Regarding type of family: The highest percentage (46%) was nuclear families, while the lower percentage (18%) was shared families. Regarding the increase of violence in light of coronavirus: Three quarters of the study sample (74.7%) had increased violence against them in light of the pandemic, while (25.3%) of the study sample did not increase violence against them.

Table (2): Distribution of the study sample according to reproductive characteristics

L.	Reproductive variables	Groups	No.	%
1	Duration of marriage/Years $\bar{x} = 7.24 \pm 3.32$	0-4	24	16
		5-9	100	66.7
		10-14	18	12
		15- & above	8	5.3
2	Gravidity	0-1	16	10.7
		2-3	23	15.3
		4-5	68	45.3
		6 & more	43	28.7
3	Parity	0-1	29	19.3

		2-3	57	38
		4-5	52	34.7
		6 & more	12	8
4	No. of abortion	None	78	52.4
		1	41	27
		2	26	17.3
		3 & more	5	3.3
5	No. of stillbirth	None	128	85.3
		1	22	14.7
6	No. of alive child	None	9	6.1
		1	20	13.3
		2	19	12.7
		3	44	29.3
		4	35	23.3
		5 & more	23	15.3

Table (2) shows that the highest percentage (66.7%) of study sample are of a group whose duration of marriage is between (5-9) years, while (5.3%) of study sample are of a group whose duration of marriage was more than fifteen years. The mean \pm SD (7.24 \pm 3.32) years, regarding the gravidity: The highest percentage (28.7%) of study sample were from (2-3) pregnancies, while (10.7%) of them were from (0-1) pregnancy. Regarding the parity: The highest percentage (38%) of study sample were from (2-3) deliveries, while the lowest percentage (8%) of them had more than six deliveries. Regarding the number of abortion: The highest percentage (52.%) of the study sample did not have any history of abortion, while (3.3%) of them had at least three abortion, regarding the number of stillbirth: More than three quarters of the study sample (85.3%) did not have stillbirth, while (14.7%) had one stillbirth. Regarding the number of alive child: The highest percentage (29.3%) of study sample had three alive child, while (6.1%) of them did not have a live child.

Table (3): Distribution of the study sample according to sexual domestic violence (N =150).

L.	Sexual domestic violence	Responses	No.	%	MS	RS%	Ass.
1	Hurting or using force during sexual relation	Always	81	54	2.25	*75	L
		Sometime	25	16.7			
		Never	44	29.3			
2	Abstain from sex as punishment	Always	22	14.7	1.47	49	NR
		Sometime	27	18			
		Never	101	67.3			
3	Forcing for sex	Always	74	49.3	2.15	*72	L
		Sometime	24	16			
		Never	52	34.7			
4	Using sexual name that seems indecent and painful during sexual relation	Always	35	23.5	1.65	55	NR
		Sometime	27	18			
		Never	88	58.7			
5	Minimizing the importance of wife's feelings about sex	Always	29	19.3	1.50	50	NR
		Sometime	17	11.3			
		Never	104	69.3			
6	Inconsistency in the sexual relationship	Always	59	39.3	2.05	*67	L
		Sometime	39	26			
		Never	52	34.7			

7	Unwanted pregnancy as a result of violence	Always	52	34.7	2.02	*67	L
		Sometime	49	32.7			
		Never	49	32.7			
8	Infection with a sexually transmitted disease, for example, AIDS - herpes	Always	64	42.7	2.04	*68	L
		Sometime	28	18.7			
		Never	58	38.7			
9	Fewer sexual relations than before as a result of violence	Always	50	33.3	2.03	*68	L
		Sometime	45	30			
		Never	55	36.7			
10	Feeling of pain during sex	Always	29	19.3	1.77	59	NR
		Sometime	57	38			
		Never	64	42.7			

Table (3) shows that the highest percentage (75%), (72%), (67%), (67%), (68%) and (68%) respectively of relative sufficiency at low level of the sexual domestic violence which refers to (Hurting or using force during sexual relation) and (Forcing for sex), (Inconsistency in the sexual relationship), (Unwanted pregnancy as a result of violence), (Infection with a sexually transmitted disease, for example, AIDS – herpes) and (Fewer sexual relations than before as a result of violence).

Table (4): Distribution of the study sample according to impacts of sexual domestic violence on women's reproductive health (N=150).

List	Domains	GMS	GRS	%
1	Physical impacts	1.937	64.5	16
2	Psychosocial impacts	2.093	70	18
3	Sexual impacts	1.982	66	17
4	Menstruation impacts	1.903	63	16
5	Pregnancy and labor impacts	1.847	61	16
6	Postpartum impacts	1.958	65	17
Overall Evaluation		1.953	65	100

Table (4) Shows that the percentage of the impacts of domestic violence as a whole is (65%) and that the highest percentage of the impacts of violence is the impact of psychological violence on women (18%), while the lowest percentage the impact of physical, menstruation, pregnancy and childbirth in the same percentage (16%).

Table (5): Association between sexual domestic violence and socio-demographic characteristics and reproductive health among study sample (N = 150).

Variables	d f	Crit.	X ²	P	Sig.
women's age	8	15.507	8.080	0.426	NS
Women's education	12	21.026	17.130	0.145	NS
Women's occupation	4	9.488	8.054	0.090	NS
Monthly income	4	9.488	75.541	0.000	S
Family Types	4	9.488	5.005	0.287	NS
Domestic violence has increased in light of the Corona pandemic	2	5.991	15.121	0.001	S
Duration of marriage /Years	6	12.592	12.146	0.059	NS
Gravidity	6	12.592	22.909	0.001	S
Parity	6	12.592	11.471	0.075	NS
No. of abortion	4	9.488	12.540	0.051	NS
No. of stillbirth	2	5.991	4.398	0.111	NS

No. of alive child	10	18.307	13.687	0.188	NS
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Table (5) Shows that there are statistically significant relationship between sexual impacts and the socio-demographic variables and reproductive variables which are included (monthly income, Domestic violence has increased in light of the Corona pandemic and gravidity).

DISCUSSION

The present study revealed that the most of the study sample (79.4%) were childbearing age with in (20-34) years. This results in line with study conducted by Gebrewahd (2020) who reported that 682 women more than (84%) of respondent who suffered domestic violence were below 30 years. The smallest age was 21 years, this mean that domestic violence occur within this age group ⁽⁴⁾ as shown in table 1.

Educationally, three-quarter of the study sample who suffered from sexual domestic violence had graduated from intermediate school graduate or less, which considers that have a low level of educational. This study agreement with Omar (2020) who stated that were three quarters of the sample (74.6%) from middle school or less and a minority from institutes and universities ⁽⁵⁾.

Regarding employee most (88.6%) of the study sample were housewife, while (8.7%) of them were government employed and (2.7%) of them were self-employed. This study was consistent with study conducted by Yaya, et al., (2019) who stated that (81%) they do not have jobs and (19%) they have jobs ⁽⁶⁾.

Regarding the monthly income, more than half (55.3%) of the study sample had low monthly income while (34.2%) of the study sample had moderate monthly income and (10.7%) their monthly income was good. This result is consistent with the study conducted by Gebrewahd (2020) who stated that (52%) of the study sample, had a low monthly income, while (31.2%) of them had moderate monthly income and (15.8%) of them had a good monthly income ⁽⁴⁾.

Regarding the family type, (46%) of the study sample were nuclear families, while (54%) of them and were lived in the extended and sharing family. This finding is in agreement with the study was done by Hina Hussain et al., (2020) who stated that (48.8%) of study sample were nuclear families, while (51.3%) were joint families. Among 160 married women in Pakistan suffered from domestic violence ⁽⁷⁾.

Domestic violence has increased in light of the corona pandemic : The finding of the study concerning domestic violence has increased in light of the corona pandemic (74.7%) three-quarters of the sample experienced increased violence , while (25.3%) of study sample did not increase violence against them. This finding is in agreement with study was done by Boserup, et al., (2020) in the wake of the COVID-19 pandemic trends regarding domestic violence. Reports during the COVID-19 outbreak in China's Hubei province indicate that domestic violence tripled during February 2020 compared to February 2019. Also, according to the United Nations entity UN Women, domestic violence reports in France have increased 30%. Domestic violence calls in Argentina have increased 25%. The organization also reports a 30% increase in helpline calls in Cyprus and 33% increase in Singapore ⁽⁸⁾.

According to table 2 regarding gravidity the highest percentage (60.6%) of the study sample range between two and five pregnancies. This finding is in agreement with study done by Aolymat (2020) a cross-sectional study was conducted in Jordan the sample consisted of 200 women stated that The mean and standard deviation number of pregnancies of the study sample was 2.9 ± 1.9 pregnancy ⁽⁹⁾.

Reproductive characteristics: Regarding duration of marriage the highest percentage (66.7%) of the study sample their duration of marriage were ranged between (5-9) years, while the lowest percentage (5.3%) their duration of marriage was fifteen years and above.

This finding is in agreement with the study was done Avanigadda (2021) who stated that more than two-thirds of the study sample were married between one and nine years facing one type of domestic violence ⁽¹⁰⁾.

Regarding parity the result of the study showed that (80.7%) of the study sample have children between two to more than five children. This finding is in agreement with the study was conducted by Omid, et, al. (2020) who stated that (81.1%) have children between two to more than five children among 424 Afghan women suffered from domestic violence ⁽¹¹⁾.

Regarding abortion, half (52.4%) of the study sample did not have any previous history of abortion. This finding is in agreement with the study done by Defilipo, et al., (2020) who stated that three-quarters of the study sample was no history of abortion, while the rest have a history of abortion among 771 women who participated in the study ⁽¹²⁾.

Regarding the number of stillbirths, (85.3%) of study sample did not have a history of stillbirth, while (14.7%) had one stillbirth. This finding is in agreement with the study was done by Omid, et al., (2020) who stated that (92.5%) of the study sample did not have a history of stillbirth ⁽¹¹⁾.

Regarding number of a live child more than three quarters (78.6%) of the study sample have from one to four live children. This result is consistent with study was conducted by Gebrewahd (2020) who stated that (89.6%) of the study sample have live children one to four live children. Every additional child above the average of two children was associated with a higher risk of unwanted pregnancy which was significantly related to intimate partner violence ⁽⁴⁾.

Table (3) shows sexual violence the result of this study revealed that the highest RS refers to the items number (1, 3, 6, 7, 8, and 9) respectively as shown in table (1-3).which considered a low level. The grand mean score of sexual domestic violence was (1.886) with relative sufficiency (60%), while the percentage of the total research is (23%).

A study was conducted by Hameed and Abd Al Hassan (2020) who stated that prevalence of the lifetime sexual IPV was 19.8%. Approximately (15.2%) reported that they had been forced to have sex during their life by husband. In comparison, (13.6%) of them reported that they were forced to do unwanted sexual acts that they caused indignity. Prevalence of the past-year sexual IPV was 10.1% and about (7.7%) were frequently subjected to having sex by force in the past year and (47.8%) of these victims had subjected to such act many times (>5 times) ⁽¹³⁾.

A study was conducted by Shahali, et al., (2020) who stated that sexual violence direct (physical) and indirect (psychological) has consequences against women. Sexual violence, itself, has many physical and emotional consequences Physical consequences include trauma, somatic problems, serious injuries, pregnancy, sexually transmitted infections, social isolation behavior, and sexual victimization. While psychological or mental consequences include the attempted suicide, depression, post-traumatic stress disorder (PTSD), stress, anxiety, sleep disorders, eating disorders, substance abuse, self-harm, panic attacks, quality of life, and self-esteem. And also it has negative impacts on society (e.g., influencing productivity and employment) ⁽¹⁴⁾.

CONCLUSIONS

The result of the study indicates that two-thirds of the study sample suffers from impact sexual domestic violence on them during childbearing age.

RECOMMENDATIONS:

1. The study recommended that women be screened for any type of domestic violence of childbearing age.

2. Integrate domestic violence topics into education curricula, use social media, and support strengthening cooperation between social agencies, justice and the police through law enforcement to promote and protect women's rights.
- **Ethical Clearance:** All experimental protocol was approved under the College of Nursing, University of Baghdad, Iraq and all experiments were carried out in accordance with approved guidelines.

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