E-ISSN: 2229-7677 • Website: www.ijsat.org • Email: editor@ijsat.org

Revealing the Socio Demographic and Domestic Violence Circumstances Faced By the Wives of Individuals Suffering from Alcoholic Dependence Syndrome - Descriptive Analysis

Vijayalakshmi Arumugam¹, Venkatesh Mathan Kumar Vasudevan²,
Shankar Shanmugam Rajendran³, Anbalagan Marudhan⁴,
Srividhya Balasubramanyan⁵, Senthilkumar Azhagirisamy⁶,

Maheswari Narayanasamy⁷

^{1, 6, 7} Post graduate, Department of Mental Health Nursing, College of Nursing, Madras Medical College, Chennai-03.

²Professor of Psychiatry, Institute Of Mental Health, Madras Medical College, Chennai-03

³Principal, College of nursing, Madras medical college, chennai-03

⁴Associate Professor, College of Nursing, Madras Medical College, and Chennai-03(Affiliated to the Tamil Nadu Dr.MGR Medical University, Chennai)

⁵Nursing Tutor, College of Nursing, Madras Medical College, and Chennai-03(Affiliated to the Tamil Nadu Dr.MGR Medical University, Chennai)

Corresponding Author: Shankar Shanmugam Rajendran

Abstract

Domestic violence is a significant public health issue that often accompanies substance abuse, particularly in cases of alcohol dependence. This study aims to explore the socio-demographic characteristics of wives affected by domestic violence in households with alcoholic dependence syndrome. By examining the intersection of alcohol dependence and domestic violence, we aim to highlight the experiences and challenges faced by these women. In the present study, using a non-probability Consecutive sampling technique, the researcher adopted a non-experimental descriptive research design with 33 samples. The tools include Socio-Demographic Data and the Domestic Violence Severity Assessment Tool (DVSAT). The study reveals concerning domestic



E-ISSN: 2229-7677 • Website: www.ijsat.org • Email: editor@ijsat.org

violence risks among wives of individuals with alcohol dependence, with 69.7% facing moderate and 30.3% experiencing high risks. Respondents predominantly fall within the 26-35 and 46-55 age groups, with 48.5% identifying as a particular religion. Economic hardship is evident, with 60.6% earning \leq Rs 500. Additionally, 54.5% report high stress levels, while 69.7% benefit from good social support, highlighting the complex interplay of demographic factors influencing domestic violence risk. The Domestic Violence Severity Assessment Tool (DVSAT) effectively evaluates the severity of domestic violence experiences. Its strong scoring metrics and reliability enhance its utility in clinical and research settings, facilitating informed interventions and support for victims.

Keywords: Domestic violence, Risk factors, Wives of Patients with Alcoholic Dependence Syndrome.

INTRODUCTION

Domestic violence is a grave social issue that transcends boundaries and affects individuals across different socioeconomic backgrounds. Within the context of Alcoholic Dependence Syndrome (ADS), the dynamics of relationships can deteriorate significantly, leading to various forms of abuse. Wives of individuals suffering from ADS often experience heightened susceptibility to domestic violence, which manifests in physical, emotional, and psychological harm. The chaotic environment resulting from alcohol dependence, coupled with the stressors of daily life, creates fertile ground for conflict and coercive behaviours, making it crucial to understand the level of domestic violence in such scenarios

BACKGROUND OF STUDY

According to a WHO report from 2021, approximately 1 in 3 women (35%) globally have experienced either physical and/or sexual intimate partner violence or non-partner sexual violence in their lifetime. According to the World Health Organization (WHO), as of 2019, approximately 283 million individuals aged 18 years and older worldwide had an alcohol use disorder, accounting for 5.1% of the global adult population.

According to the National Family Health Survey (NFHS-5) conducted in 2019-2020, nearly 30% of women aged 15-49 reported experiencing physical or sexual violence by an intimate partner at some point in their lives. The NFHS-5 indicates that about 14% of women in India have faced emotional violence from an intimate partner.

A study conducted by the National Drug Dependence Treatment Centre (NDDTC) in collaboration with the Ministry of Social Justice and Empowerment reported in 2019 that Tamil Nadu has one of the highest rates of alcohol consumption in India, with an estimated 20% of the adult male population being



E-ISSN: 2229-7677 • Website: www.ijsat.org • Email: editor@ijsat.org

dependent on alcohol. Estimates suggest that nearly 5-10% of state mortality can be attributed to alcohol-related conditions, including liver cirrhosis, accidents, and other health issues.

NEED FOR THE STUDY

Conducting a study on Alcoholic Dependence Syndrome (ADS) and domestic violence is essential for several reasons. First, it is crucial to gather comprehensive and current statistics on the prevalence of ADS and domestic violence to inform policymakers and stakeholders about the magnitude of these issues. Understanding how these issues affect different demographics, such as age, gender, and socioeconomic status, can help tailor interventions effectively.

STATEMENT OF THE PROBLEM

"A study to assess the Socio-demographic data and domestic violence among wives of Patients with Alcoholic Dependence Syndrome in Chennai".

OBJECTIVES

- ❖ Assess the level of socio-demographic data among wives of alcoholic dependence syndrome patients.
- ❖ Identify the level of domestic violence and risk factors among wives of alcoholic dependence syndrome patients.
- ❖ Find out the association between the level of domestic violence and risk factors among the wives of patients with alcoholic dependence syndrome with their selected demographic variables.

OPERATIONAL DEFINITIONS:

Socio-Demographic Data:

In this study, it refers to the Socio-demographic characteristics of wives of alcoholic dependence syndrome patients. Generally, characteristics such as age, gender, ethnicity, education level, income, type of client, years of experience, location, etc. are considered as socio-demographics.

❖ Domestic Violence;

In this study, it refers to "intimate partner violence", which can be defined as a pattern of behaviour in any relationship that is used to gain or maintain power and control over an intimate partner. Abuse is physical, sexual, emotional, economic or psychological actions or threats of actions that influence another person.

Alcohol Dependence Syndrome;

This study refers to the fundamental changes in the brain's reward and stress systems that manifest as withdrawal symptoms when alcohol consumption is stopped or substantially reduced among patients.



E-ISSN: 2229-7677 • Website: www.ijsat.org • Email: editor@ijsat.org

Risk Factor

Risk factors are characteristics at the biological, psychological, family, community, or cultural level that precede and are associated with a higher likelihood of negative outcomes among wives of patients with alcoholic dependence syndrome.

ASSUMPTIONS

❖ The study assumed that Wives of Patients with Alcoholic Dependence Syndrome have higher levels of domestic violence and risk factors

HYPOTHESIS

- ❖ There will be a significant level of domestic violence and risk factors score among Wives of Patients with Alcoholic Dependence Syndrome.
- ❖ There will be a significant association between domestic violence and risk factors among Wives of Patients with Alcoholic Dependence Syndrome with their selected demographic variables.

1.8. DELIMITATION:

- ❖ The study was limited to Wives of Alcoholic dependence syndrome patients only
- Conducted only for four weeks
- Delimited within the IMH, Chennai only.

RESEARCH METHODOLOGY

Research Approach: Quantitative research approach

Research Design: Non-experimental Descriptive research design.

Setting of the study: The study was conducted on Wives of Patients with Alcoholic Dependence Syndrome at the Institute of Mental Health, Chennai. **Duration of the study:** study was conducted for 4 weeks.

Study Population: Wives of Patients with Alcoholic Dependence Syndrome in the Institute of Mental Health, Chennai.

Target Population: Wives of Patients with Alcoholic Dependence Syndrome attended in Institute of Mental Health, Chennai.

Accessible Population: The study was conducted among Wives of Patients with Alcoholic Dependence Syndrome in the Institute of Mental Health, Chennai meeting the inclusion criteria and also available at the time of study.



E-ISSN: 2229-7677 • Website: www.ijsat.org • Email: editor@ijsat.org

Sample: The sample for the study was Wives of Patients with Alcoholic Dependence Syndrome in the Institute of Mental Health, Chennai who were available during the period of study and who were willing to participate.

Sample Size: In this study sample size consists of 33 Wives of Patients with Alcoholic Dependence Syndrome in the Institute of Mental Health, Chennai.

Sampling Technique: A non-probability Consecutive sampling technique was selected based on the research objectives.

CRITERIA FOR SAMPLE SELECTION:

Inclusion criteria:

- * Wives of alcoholic dependence syndrome patients
- * who are all affected wives by alcoholic patient
- ❖ Wives of alcoholic dependence syndrome patients, Aged above 18 years of age,
- ❖ Willing to participate in this study
- ❖ Able to read /understand -Tamil/English

Exclusion Criteria:

❖ Wives of alcoholic dependence syndrome patients with any cognitive impairment.

Currently participating in other studies.

DEVELOPMENT AND DESCRIPTION OF TOOL

- Section-A: -Socio-demographic variables
- Section B: -Domestic Violence Safety Assessment Tool (DVSAT)

Section – A:

It deals with Socio-demographic variables such as age, Gender, marital status, educational status, Employment status, Monthly income, stressful events, Social support, Religious belief, Family history, duration of treatment, and Area of living.

Section - B:

The level of Domestic violence score

Domestic Violence Safety Assessment Tool (DVSAT). It consists of 25 questions.

1 or more 'yes' answers = at threat

12 or more 'yes' answers = at serious threat



E-ISSN: 2229-7677 • Website: www.ijsat.org • Email: editor@ijsat.org

SCORE RANGE	INTERPRETATION
0-8	Low risk
9-16	Moderate risk
17-25	Higher risk

VALIDITY OF THE TOOL:

The validity of the tool was assessed using content validity. Experts from Nursing and Psychiatrists determined content validity. They suggested certain modifications to the tool. After the modifications, they agreed on this tool for assessment.

RELIABILITY OF THE TOOL:

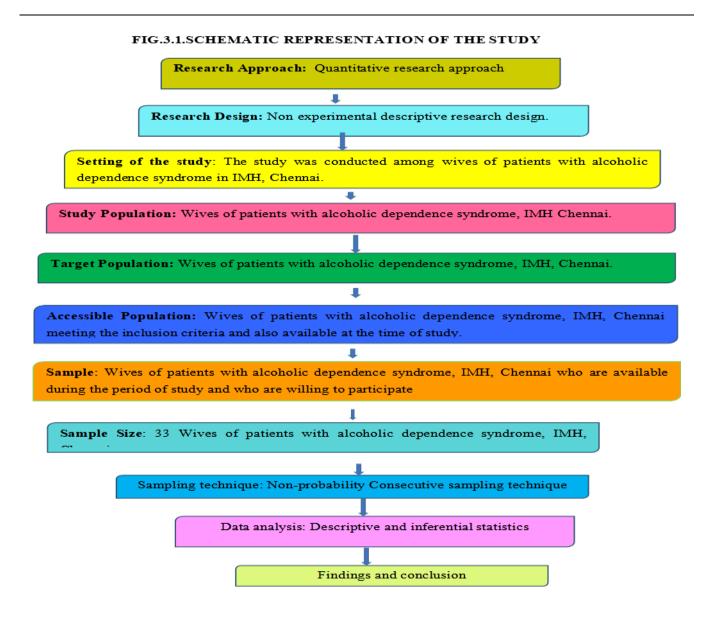
The reliability of the tool was assessed by using the Cronbach alpha method. These correlation coefficients were 0.8 very high and it is a good tool for assessing Wives of Patients with Alcoholic Dependence Syndrome disorders.

3.14. ETHICAL CONSIDERATION:

The study was conducted after obtaining ethical clearance from the ethical committee and the Director of the Institute of Mental Health , kilpauk .



E-ISSN: 2229-7677 • Website: www.ijsat.org • Email: editor@ijsat.org



DATA ANALYSIS AND INTERPRETATION

By utilizing tools such as Chi-square tests, researchers can assess associations between variables and determine the significance of their findings.

RESULTS:

SECTION:1 frequency and percentage distribution of demographic variables among wives of alcoholic dependence syndrome patients.

TABLE-.1. demographic variables of the wives of alcoholic dependence syndrome patients

Socio-Demogra	aphic Variables	Frequency	Percentage (%)
1. Age	a. 18 to 25	5	15.15%
Groups	b. 26 to 35	10	30.3%



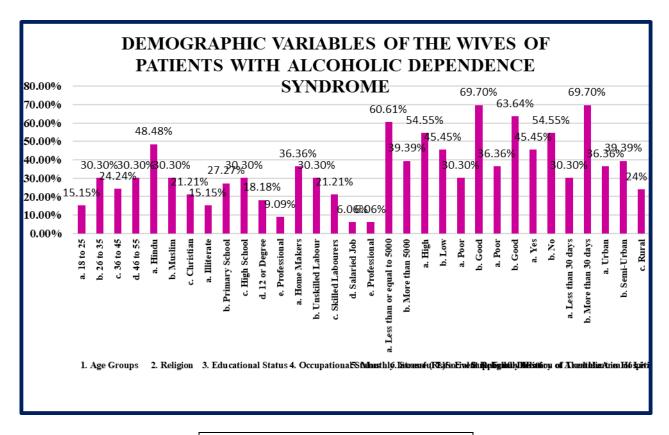
E-ISSN: 2229-7677 • Website: www.ijsat.org • Email: editor@ijsat.org

I	- 264- 45	ا ٥	1 24 249/
	c. 36 to 45	8	24.24%
	d. 46 to 55	10	30.3%
a D 11 1	a. Hindu	16	48.48%
2. Religion	b. Muslim	10	30.3%
	c. Christian	7	21.21%
	a. Illiterate	5	15.15%
3.	b. Primary School	9	27.27%
Education	c. High School	10	30.3%
al Status	d. 12 or Degree	6	18.18%
	e. Professional	3	9.09%
	a. Home Makers	12	36.36%
4.	b. Unskilled Labour	10	30.3%
Occupatio	c. Skilled Labourers	7	21.21%
nal Status	d. Salaried Job	2	6.06%
	e. Professional	2	6.06%
5. Monthly	a. Less than or equal to	20	(0.610/
Income	5000	20	60.61%
(Rs)	b. More than 5000	13	39.39%
6. Stressful Life Event	a. High	18	54.55%
	b. Low	15	45.45%
7. Social Support	a. Poor	10	30.3%
	b. Good	23	69.7%
8. Religious Belief	a. Poor	12	36.36%
	b. Good	21	63.64%
9. Family History of Alcoholic	a. Yes	15	45.45%
	b. No	18	54.55%
10. Duration			
of Treatment in Hospital	a. Less than 30 days	10	30.3%
	b. More than 30 days	23	69.7 %
11. Area of Living	-		36.36%
Living	a. Urban	12	30.30 / 0
Living	a. Urban b. Semi-Urban	13	39.39%



E-ISSN: 2229-7677 • Website: www.ijsat.org • Email: editor@ijsat.org

Objective-1 -To assess Socio-demographic data among Wives of Patients with Alcoholic Dependence Syndrome.



Objective 2 -To assess the level of domestic violence and risk factors among wives of Alcoholic dependence syndrome patients

SECTION/TABLE 2: level of domestic violence and risk factors score

DOMESTIC VIOLENC E AND RISK FACTOR S SCORE	SCORE RAN GE	NUMBER OF PARTICIPAN TS	PERCENTAGE (%)
LOW RISK	0 - 8	0	0.00%
MODERATE RISK	9-16	23	69.70%
HIGH RISK	17-25	10	30.30%

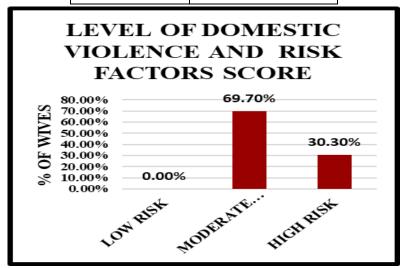


E-ISSN: 2229-7677 • Website: www.ijsat.org • Email: editor@ijsat.org

The above table shows the level of Domestic violence and risk factors among Wives of Alcoholic dependence syndrome, patients. In general, none of them had low risks, 69.70% had moderate risks and 30.30% had higher risks of domestic violence.

SCORING INTERPRETATION

SCORE RANGE	INTERPRETATION
1-12	Threat
12-25	Serious threat



Objective-3 -To find out the association between the level of Domestic violence and Risk factors score among Wives of Alcoholic dependence syndrome patients with their selected demographic variables.

SECTION/TABLE 3. association between the level of domestic violence among wives of alcoholic dependence syndrome patients with their selected socio-demographic variables.

Socio-Demog Variable	graphic	Mode rate (N)	High (N	(N)	% Mod e rate	% High	Chisquare q	df	p- v al u e
18 to 25		2	3	5	40.00%	60.00%)		
1. Age	26 to 35	5	5	10	50.00%	50.00%			
Groups	36 to 45	4	4	8	50.00%	50.00%	4.3	3	0.23
Стопры	46 to 55	5	5	10	50.00%	50.00%			



E-ISSN: 2229-7677 • Website: www.ijsat.org • Email: editor@ijsat.org

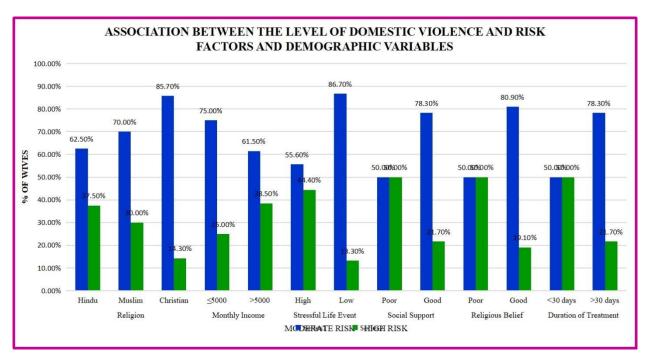
									_	
	Hindu	10	6	16	62.50%	37.50%			0.01	
2. Re	eligion	Muslim	7	3	10	70.00%	30.00%	8.95	2	1
	Christian	6	1	7	85.70%	14.30%			*	
		Illiterate	2	3	5	40.00%	60.00%			
2		Primary School	5	4	9	55.60%	44.40%			
3. Ed	ducatio	High School	5	5	10	50.00%	50.00%	6.62	4	0.15
	tatus	12 or Degree	4	2	6	66.70%	33.30%			4
		Profession al	2	1	3	66.70%	33.30%			
		Home Makers	8	4	12	66.70%	33.30%			
4.		Unskilled Labour	6	4	10	60.00%	40.00%	7.85		0.09
Oo on	ccupati nal	Skilled Labour ers	4	3	7	57.10%	42.90%		4	
Su	tatus	Salaried Job	2	0	2	100.00	0.00%			
		Profession al	2	0	2	100.00	0.00%			
5 M	Ionthly	≤5000	15	5	20	75.00%	25.00%			0.04
	come	>5000	8	5	13	61.50%	38.50%	6.03	2	9
6 Ct	tressful	High	10	8	18	55.60%	44.40%			0.00
Li		Low	13	2	15	86.70%	13.30%	10.4	1	1 * *
7	Cocial	Poor	5	5	10	50.00%	50.00%			0.01
7. Su	Social upport	Good	18	5	23	78.30%	21.70%	6.14	1	3 *
0		Poor	6	6	12	50.00%	50.00%			0.00
	eligiou Belief	Good	17	4	21	80.90%	19.10%	7.14	1	8 *
Hi of	Family istory clcoholi	Yes	10	5	15	66.70%	33.30%	3	1	0.08



E-ISSN: 2229-7677 • Website: www.ijsat.org • Email: editor@ijsat.org

10.	<30 days	5	5	10	50.00%	50.00%			
Duration									0.03
of	> 20 days	18	5	23	78.30%	21.70%	4.58	1	2
Treatme	>30 days	10	3	23	78.30%	21.70%			*
nt									
11.	Urban	6	6	12	50.00%	50.00%			
Area of	Semi-	8	5	13	61.50%	38.50%	5.22	2	0.07
Living	Urban	0]	13	01.30%	36.30%	3.22		4
	Rural	5	3	8	62.50%	37.50%			

The above table represents the association between the level of domestic violence and risk factors score with their selected demographic variables. Religion, monthly income, social support, stressful events, religious belief, and duration of treatment show higher significant than other variables.





E-ISSN: 2229-7677 • Website: www.ijsat.org • Email: editor@ijsat.org

DISCUSSION

1. BASED ON OBJECTIVES-FINDINGS OF THE STUDY

Objective-1

The largest age groups among respondents are 26 to 35 and 46 to 55, each comprising 30.3%.

- ❖ A majority identify as a particular religion (48.48%), with notable minorities being Muslims (30.3%) and Christians (21.21%).
- ❖ A significant portion (42.42%) has only primary education or is illiterate, while 30.3% have completed high school.
- ❖ Homemakers represent the largest occupational group (36.36%), followed by unskilled labourers (30.3%).
- ❖ A significant majority (60.61%) earn less than or equal to Rs 500, indicating widespread economic hardship.
- ❖ Over half (54.55%) report experiencing high levels of stressful life events.
- ❖ A significant majority (69.7%) feel they have good social support.
- ❖ Additionally, 63.64% view their religious beliefs as supportive.
- ❖ A slight majority (54.55%) report no family history of alcoholism.
- ❖ A considerable majority (69.7%) have been hospitalized for more than 30 days.

The distribution of living areas is skewed toward semi-urban (39.39%), with urban (36.36%).

Objective 2

patients. In general, none of them had low risks, 69.70% had moderate risks and 30.30% had higher risks of domestic violence.

Objective-3

The association between the level of domestic violence and risk factors score with their selected demographic variables. Religion, monthly income, social support, stressful events, religious belief, and duration of treatment show higher significance than other variables. **LIMITATIONS OF THE STUDY**

- ❖ Small sample sizes may limit the generalizability of findings.
- Self-reported data can lead to bias or inaccuracies.
- Cross-sectional studies do not establish causation.
- ❖ Potential for response bias due to sensitivity of domestic violence topics.
- ❖ Limited access to diverse populations may affect results.
- ❖ Ethical considerations can restrict methods of data collection.
- ❖ Longitudinal studies may suffer from participant attrition over time.
- ❖ Lack of standardized measures can complicate comparisons across studies.
- * Results may not account for cultural differences influencing domestic violence.
- * Retrospective studies rely on the accuracy of historical data.

CONCLUSION:

The study illuminates the intricate dynamics between domestic violence and the spouses of individuals with alcohol dependence syndrome, revealing that various socio-demographic factors, mental health issues, and contextual elements significantly contribute to the prevalence of violence in this population.

REFERENCES



E-ISSN: 2229-7677 • Website: www.ijsat.org • Email: editor@ijsat.org

- 1. American Psychiatric Association. Diagnostic and Statistical Manual of Mental Disorders. 5th ed. Arlington: American Psychiatric Publishing; 2013.
- 2. Burns N, Grove SK. The Practice of Nursing Research: Appraisal, Synthesis, and Generation of Evidence. 8th ed. St. Louis: Elsevier; 2021.
- 3. Chrzanowski J, & Martin T. Mental Health Nursing: A Practice Guide for Nurses. 1st ed. London: Sage Publications; 2023.
- 4. Creswell JW, Creswell JD. Research Design: Qualitative, Quantitative, and Mixed Methods Approaches. 5th ed. Thousand Oaks: Sage Publications; 2018.
- 5. Fain J. Reading, Understanding, and Applying Nursing Research. 4th ed. Burlington: Jones & Bartlett Learning; 2020.
- 6. Galanter M, Kleber HD, editors. The American Psychiatric Publishing Textbook of Substance Abuse Treatment. 5th ed. Arlington: American Psychiatric Publishing; 2019.
- 7. Grove SK, Gray JR, Burns N. Understanding Nursing Research: Building an Evidence-Based Practice. 7th ed. St. Louis: Elsevier; 2023.
- 8. Jaffe JH, et al. Pharmacology and Treatment of Substance Use Disorders. 2nd ed. New York: Oxford University Press; 2021.
- 9. Kaplan HI, Sadock BJ. Synopsis of Psychiatry: Behavioral Sciences/Clinical Psychiatry. 11th ed. Philadelphia: Wolters Kluwer; 2021.
- 10. Khantzian EJ, ed. The Addictive Personality: Understanding the Addictive Process and Compulsive Behavior. 3rd ed. New York: Wiley; 2015.
- 11. LoBiondo-Wood G, Haber J. Nursing Research in Canada: Methods, Critical Appraisal, and Utilization. 5th ed. Toronto: Elsevier; 2022.

JOURNAL REFERENCE

- 12. Abraham J, Chandrasekaran R, & Chitralekha V (1997). A prospective study of treatment outcome in alcohol dependence from a de-addiction centre in India. Indian Journal of Psychiatry, 39(1), 18–23. [PubMed: 21584038]
- 13. Avery AR, Tsang S, Seto EY, & Duncan GE (2020). Stress, anxiety, and change in alcohol use during the COVID-19 pandemic: findings among adult twin pairs. Frontiers in psychiatry, 11, 571084. 10.3389/fpsyt.2020.571084 [PubMed: 33088277]
- 14. Barbosa C, Cowell AJ, & Dowd WN (2021). Alcohol consumption in response to the COVID-19 pandemic in the United States. Journal of Addiction Medicine, 15(4), 341. [PubMed: 33105169]
- 15. Carver CS (1997). You want to measure coping but your protocol is too long: Consider the brief cope. International Journal of Behavioural Medicine, 4(1), 92–100.
- 16. Chavan B, Sidana A, & Kaushal T (2010). Impact of a smoke-free law on tobacco consumption in Chandigarh: A community-based study. Indian Journal of Medical Sciences, 64(3), 125. [PubMed: 22569325]
- 17. consumption among middle-aged and elderly men: a community study from Western India. *Alcohol and Alcoholism*, 38(4), 327-331.
- 18. Khadse VJ, Dhillon HS, Sasidharan S. Psychological hardiness, personality factors and coping styles in male patients of alcohol dependence syndrome. Medical Journal Armed Forces India. 2024 Mar 1;80(2):172-7.



E-ISSN: 2229-7677 • Website: www.ijsat.org • Email: editor@ijsat.org

19. So R, Kariyama K, Oyamada S, Matsushita S, Nishimura H, Tezuka Y, Sunami T, Furukawa TA, Kawaguchi M, Kobashi H, Nishina S. Prevalence of hazardous drinking and suspected alcohol dependence in Japanese primary care settings. General Hospital Psychiatry. 2024 Jul 1; 89:8-15.