

Research Article

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INVESTIGATION OF THE EFFECT OF DOMESTIC VIOLENCE ON WOMEN'S PERCEPTION OF FAMILY FUNCTIONS AİLE İÇİ ŞİDDETİN KADINLARIN AİLE İŞLEVLERİ ALGISINA OLAN ETKİSİNİN İNCELENMESİ

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ABSTRACT

The goal of this study was to see how violence affected women's perceptions of family activities. Women who volunteered to participate in the study stayed at shelters linked with the Ministry of Family, Labour, and Social Services of Izmir between October 2016 and September 2017. A socio-demographic data form and then a Family Assessment Device were applied to the participants, and a relational screening model was used in the study. 96 women who were and were not victims of violence were interviewed, and a socio-demographic data form and then a Family Assessment Device were applied to the participants, and a relational screening model was used in the study. It was seen that the majority of the women participating in the study were between the ages of 25-39 at the rate of 58%, the majority of them were married at the rate of 68.8% and they did not work at the rate of 75%. 91.5% of the women who experienced violence stated that they were exposed to violence from their spouses or partners. It was discovered that being a victim of violence had a detrimental impact on the view of family functions, and that there was a statistically significant link between women's experiences of violence and all of the Family Assessment Device sub scores. Furthermore, all types of violence were assessed separately, and it was discovered that all types of violence had a statistically significant link with all sub scores of the Family Assessment Device. Violence has a negative impact on women's perceptions of family functions, as well as the family as a whole. The struggle against violence on women, as a phenomenon that has a negative impact on the entire society, starting with the individual and family, necessitates societal unity and determination in addition to international, national, and state-run social policies.

Keywords: Perception of Family Functions, Domestic Violence Against Women, Women's Shelter, Social Work, Social Services

ÖZET

Bu araştırmada, şiddetin kadınların aile işlevleri algıları üzerinde etkisinin incelenmesi amaçlanmıştır. Araştırma, İzmir Aile, Çalışma ve Sosyal Hizmetler Bakanlığı'na bağlı kadın sığınma evlerinde Ekim 2016 ile Eylül 2017 tarihleri arasında kalan ve çalışmaya katılmaya gönüllü kadınlar ile yapılmıştır. Araştırma kapsamında şiddet mağduru olan ve olmayan 96 kadın ile görüşülmüş ve katılımcılara sosyo-demografik veri formu ve ardından aile değerlendirme ölçeği uygulanmış ve çalışmada ilişkisel tarama modeli kullanılmıştır. Araştırmaya katılan kadınların çoğunluğunun % 58 ile 25-39 yaş aralığında olduğu, % 68, 8 ile çoğunluğunun evli olduğu ve % 75 oranında çalışmadıkları görülmüştür. Şiddet mağduru kadınların % 91,5'i ile neredeyse tamamına yakını partnerleri tarafından şiddete maruz bırakılmışlardır. Şiddet mağduru olmanın aile işlevleri algısını olumsuz etkilediği görülmüş ve kadınların şiddet yaşantısı durumları ile Aile Değerlendirme Ölçeği alt puanlarının tamamı arasında istatistiksel olarak anlamlı bir ilişki bulunmuştur. Ayrıca tüm şiddet türleri ayrı ayrı değerlendirilmiş, yine aynı şekilde tüm şiddet türleri ile Aile Değerlendirme Ölçeği alt puanlarının tamamı arasında istatistiksel olarak anlamlı bir ilişki bulunduğu belirlenmiştir. Şiddet kadınların aile işlevleri algısını olumsuz etkileyerek beraberinde aileye de etki etmektedir. Birey ve aileden başlayarak tüm toplumu olumsuz etkileyen bir olgu olarak, kadına yönelik şiddetle mücadele, uluslararası düzenlemeleri, ulusal düzenlemeleri ve devlet eli ile yürütülen sosyal politikaların yanında toplumsal dayanışmayı ve kararlılığı gerektirmektedir.

Anahtar kelimeler; Aile İşlevleri Algısı, Kadına Yönelik Aile İçi Şiddet, Kadın Konukevi, Sosyal Hizmet, Sosyal Hizmetler.

INVESTIGATION OF THE EFFECT OF DOMESTIC VIOLENCE ON WOMEN'S PERCEPTION OF FAMILY FUNCTIONS

INTRODUCTION

Human lineage and human culture continued to exist within the family institution, which started with the marriage contract and was considered indispensable by all societies throughout human history (ASAGEM, 2011:25). In the Current Turkish Dictionary of the Turkish Language Institution, the family was defined as the smallest union in the society formed by the relations between the husband, wife, children and siblings based on marriage and blood relation, all of the people of the same lineage or who have kinship relations between them, all of the relatives and relatives living together (TDK, 2018).

Murdock defines the family as "a social group characterized by common housing, economic cooperation and reproduction" (Murdock 1949:1). Although there are many definitions about the family, it is seen that each of them considers the family as one of the main elements of social life and many definitions include the functions of the family. Murdock argued that the nuclear family, a universal social group, has four basic functions that apply to each society,

- a. Regulation of sexual relations,
- b. Reproductive function,
- c. Sharing economic duties and responsibilities and
- d. Education and socialization of children (Murdock 1949:10).

Generally, the family that performs its functions is considered "healthy" and the family that does not perform its functions is considered "unhealthy". The healthy and unhealthy family depends on socio-economic characteristics, services, support and opportunities in the society, inherited characteristics and personality structures of family members, factors such as dynamic structure in family relations. In a healthy family, individuals approach each other with interest and love, spend time together, feel loyal to each other, are happy with each other's existence, are successful in solving their conflicts, accept each other as they are, appreciate each other, have common tastes, express their ideas and feelings comfortably, do not have difficulties in this regard and have the ability to joke about the events in the family and approach events humorously. In unhealthy families, with the interference of communication barriers, family members feel intense anger and resentment towards each other, they have difficulty in showing love and interest to each other, they are insecure and incomprehensible towards each other, they have difficulty in solving conflicts between them, there is a lack of empathy between them, resentment between family members who postpone problems lasts for days, family members talk to each other in insulting or abusive sentences, children experience behavioural disorders or mental problems in family members, family members do not approach each other with compassion and do not show mercy, situations such as violence or abuse occur in the family (Canel, 2012:91).

In this study, the evaluation of family functions was discussed with the McMaster Family Functions model.

The McMaster family functions model is based on system theory. The system is a concept that means the existence of regular relationships between the parts. Important assumptions of system theory, which is the basis of the McMaster Family Functions Model, are as follows:

- a. All members of the family are related to each other,
- b. It cannot be understood when a part of the family is isolated from the rest of the family system,
- c. The functionality of the family cannot be fully understood only as one of the family members or subgroups in the family,
- d. Family structure and institution are important factors that strongly affect and determine the behaviours of family members,
- e. Operational models of the family system strongly shape the behaviours of family members (Miller et al. 2000: 168-189).

In the McMaster Family Functions Model, functionality is evaluated in terms of different dimensions to determine the effectiveness of a family. These dimensions are six: problem solving, communication, roles, ability to react emotionally, showing the necessary attention and behaviour control. (Miller et al. 2000: 168-189).

Problem-solving dimension is defined as the ability of the family to solve their material and spiritual problems at the

INVESTIGATION OF THE EFFECT OF DOMESTIC VIOLENCE ON WOMEN'S PERCEPTION OF FAMILY FUNCTIONS

level that ensures effective family functioning and covers the period from the emergence of the problem to its resolution. Solving problems that threaten family integrity and functionality is challenging for families. However, not all problems are within this scope. Some families can maintain their functionality without solving problems that threaten their integrity and functionality (Miller et al. 2000: 168-189; Bulut 1990:7).

Roles are repetitive patterns of behaviour that individuals perform for the sustainability of family functions and meet the material and spiritual needs of the family. These are routine family tasks, such as cooking or taking out garbage (Miller et al. 2000: 168-189; Bulut 1990:7). There are many different reasons why any individual in the family refuses or does not fulfil the responsibilities required by their roles adequately. Resistance to renewal by role perceptions created by gender stereotypes in the face of changing living conditions can lead to role conflicts within the household, especially between spouses.

The McMaster Family Functions Model attaches particular importance to verbal communication in communication. (Miller et al. 2000: 168-189). In strong and healthy families capable of healthy communication, individuals communicate with each other more openly, more clearly, more frequently and directly. They can share their feelings, thoughts, dreams, fears, hopes, pains, joys, experiences and needs with each other, and they can create a healthy family environment by exchanging ideas and using each other's knowledge and experiences to understand each other, support each other (Canel 2012:102).

Emotional responsiveness is defined as the ability of the family to respond emotionally to certain stimuli in appropriate quality and quantity. (Miller et al. 2000: 168-189; Bulut 1990:7). Family members are expected to be able to express all kinds of emotions easily in a functional family.

The dimension of interest is defined as the degree of interest, love and appreciation shown by family members to each other. Attention is not only the degree of family togetherness, but also the degree of attitude among family members (Miller et al. 2000: 168-189). Healthy families are expected to be moderately interested in each other. Much care is considered to be the determinant of the family being too dependent on each other and less care is considered to show little love and interest to each other (Bulut 1990:8).

Behaviour control dimension is defined as the model that manages family behaviour in three types of situations. These three situations are physical danger, physiological needs that must be met and interpersonal socialization behaviour (Miller et al. 2000: 168-189). Healthy families are expected to control and discipline their behaviours in these three situations.

DOMESTIC VIOLENCE AGAINST WOMEN

We all come into the world as baby boys or girls without our own choice. Being born a boy or a girl is a reason for our biological existence, just like being mortal. (Ünalı 2014:9). Another important factor in defining women and men is the definitions of women and men in different cultures called gender-social gender, which, unlike biological gender, is formed as a result of social structuring and can be changed. Gender discrimination shapes the lives of women and men and causes inequalities (Akın and Demirel 2003:73). Violence against women is gender-based, that is, violence against women because they are women and affects women disproportionately (KSGM 2014:34).

Violence, as is often perceived, does not mean only physical acts such as hitting, kicking, injuring, intention to kill or killing. Psychological, economic, sexual violence are other forms of violence that are less visible but are frequently used.

Physical violence is the use of physical methods to punish, such as slapping, punching, kicking, pushing, biting, bending your arm, squeezing your throat, wounding with a sharp or piercing instrument, torturing, burning with fire or boiling water, which damage the body integrity of someone else and make them suffer (Özgentürk et al. 2012). Sexual violence is one of the types of severe violence against women. Examples of sexual violence include humiliation of female gender, sexual harassment, body control, virginity control, child marriage, incest, coercion to sexually humiliating acts, sexual assault, coercion of women into forms

INVESTIGATION OF THE EFFECT OF DOMESTIC VIOLENCE ON WOMEN'S PERCEPTION OF FAMILY FUNCTIONS

of relationships that they do not want, making them watch sexual intercourse with third parties, coercion to sexual intercourse with third parties (Karşıyaka Municipality, 2016).

Psychological violence is also called emotional violence. Making women worthless, name-calling, insults, swearing, humiliating, intimidating, threatening, controlling and creating a sense of helplessness in the eyes of others are examples of psychological violence (Karşıyaka Municipality, 2016).

Since the income entering the household in patriarchal societies is perceived as a common budget, economic violence is not as visible as other types of violence, but it is as important as other types of violence. Examples of economic violence include exploitation of women's labour, unpaid family work, preventing women from working or causing them to leave their jobs, taking away women's income and not giving money for home expenditures (Karşıyaka Municipality, 2016).

PLACES OF REFUGE FOR WOMEN

The most important of the intervention services offered to women exposed to violence or at risk in the fight against violence against women is the services offered in women's shelters (KSGM 2008). Women's shelters are boarding social services institutions where women can stay temporarily by providing protection from violence, solving and strengthening their psycho-social and economic problems and meeting their needs together with their children, if any. As of December 2016, 101 women's shelters affiliated to the Ministry of Family, Labour and Social Services have a capacity of 2647; 32 women's shelters affiliated to local governments have a capacity of 741; 4 women's shelters affiliated to NGOs have a capacity of 45 and a total of 137 women's shelters have a capacity of 3433 (KSGM 2016:24).

Women who want to be admitted to a shelter in our country should apply to the Provincial Directorate of Family and Social Services, the Violence Prevention and Monitoring Centre (VPMC), the relevant referral units or law enforcement units of public institutions and organizations performing similar duties. In addition, notifications of third parties who are aware of violence are also considered as denunciations. Direct applications of women to shelters are not accepted. The age of admission to the shelters is eighteen. Girls under the age of eighteen can only benefit from the shelter with their mother. Women with male children over twelve years of age and women with children with disabilities, provided that there is no risk of life safety, are rented and sheltered by renting an independent house if deemed appropriate by the VPMC based on the social examination report indicating that it is required. The length of stay in the shelter is six months from the date of admission to the woman's first admission unit (<http://www.resmigazete.gov.tr/eskiler/2013/01/20130105-5.htm>, Accessed: 10.06.2018).

It is clear that violence will damage the respect and perspective of the family. Within the scope of the research, how violence against women in the family is reflected in the way women perceive family functions was investigated.

In this study, it was aimed to reveal the effects of violence experienced by women in the family on their perceptions of family functions

METHODOLOGY OF THE RESEARCH

Relational screening model, one of the screening models, was used as the research model for the purpose of the research. Within the scope of the study, interviews were conducted with women staying in women's shelters affiliated to the Provincial Directorate of the Ministry of Family, Labour and Social Services in Izmir province, "Socio-Demographic Data Form" prepared by the researcher was completed in face-to-face interviews with women and "Family Assessment Device" was applied to the same women. By evaluating the data obtained, the ways in which women who have been subjected to violence and who have not been subjected to violence perceive the functions of the family institution were compared.

POPULATION AND SAMPLE OF RESEARCH

The population of the study consists of women staying in women's shelters in Izmir province.

INVESTIGATION OF THE EFFECT OF DOMESTIC VIOLENCE ON WOMEN'S PERCEPTION OF FAMILY FUNCTIONS

The sample of the study consists of women staying in women's shelters affiliated to the Provincial Directorate of the Ministry of Family, Labour and Social Services in Izmir and volunteering to participate in the study. 96 women participated in the study. 59 of these women are victims of violence and 37 are women who have not been exposed to violence.

Within the scope of the study, interviews were conducted with two female shelters in Izmir and serving under AÇSHB (Ministry of Family, Labour and Social Services) in a first admission unit and the data collection process was completed. In the process of placing women in shelters in Turkey, it is essential to give priority to women with a history of violence. Women with violent experiences and especially life safety risks are placed in the first reception unit without wasting time and then in the shelters planned to stay longer. Only women with shelter problems are directed by evaluating the conditions and taking into account the legal periods they can stay in the shelter within the possibilities of their shelters, whether they have previously benefited from the shelter for shelter purposes, and if the shelter problems are economical, the relevant units are contacted and enabled to benefit from appropriate social service models. Therefore, in the research process, it took time to reach women who did not have a history of violence in the shelters where the study was conducted. In order for the distribution to be balanced in the comparisons, it was necessary to wait for a long time in order to work with women without a history of violence, and interviews were held only with women who benefited from the shelter service due to the housing problem until a sufficient number was reached.

DATA COLLECTION TOOLS

In the research conducted within this approach; "Socio-Demographic Data Form" prepared by the researcher in order to obtain the demographic information of the families and "Family Assessment Device" (FAD) (Bulut 1990) were used to determine the family functions. The research data were collected between 01.10.2016-01.09.2017 through interviews with women staying in women's shelters affiliated to Izmir Provincial Directorate of Ministry of Family, Labour and Social Services.

The Family Assessment Device (McMaster Family Assessment Device) is a measurement tool developed by Brown University in the USA in cooperation with Butler Hospital within the framework of the Family Research Program, which determines the subjects in which the family can and cannot perform its functions. In 1983, Epstein and Bishop conducted a validity and reliability study and obtained it by applying the previously developed McMaster Model of Family Functioning (MMFF) on families clinically. The scale was introduced to our language by Bulut (1989) by conducting validity and reliability studies in Turkey. This scale was designed to distinguish the structural and organizational characteristics of the family and the interaction between family members as "healthy" and "unhealthy". (Bulut 1990)

The FAD consists of seven subscales, six subscales discussed in the McMaster Family Functions Model and a subscale added in the FAD. While addressing problem solving, communication, roles, emotional responsiveness, showing the necessary attention, behaviour control, problem areas in family functions one by one, the general functions added afterwards generally evaluate whether the family is healthy. The number of questions, 53 according to the McMaster Family Functions Model, was increased to 60 questions in a way that does not affect the correlation between dimensions in order to increase the validity of the three sub-dimensions (communication, problem solving and roles). Some of the items describe healthy functions and some describe unhealthy functions. Each item consists of a sentence containing positive and negative statements about family life. At the beginning of the scale, there is a directive on how to answer the questions as a separate page. According to this directive, family members are asked to read the articles and mark the appropriate options considering the last two months. Questions 2, 12, 24, 38, 50 and 60 in the scale include statements related to the problem solving dimension, questions 3, 14, 18, 22, 29, 35, 43, 52, and 59 include statements related to the communication dimension, questions 4, 8, 10, 15, 23, 30, 34, 40, 45, 53 and 58 include statements related to the role dimension, questions 9, 19, 28, 39, 49 and 59 include statements related to the emotional response dimension, questions 5, 13, 25, 33, 37, 42 and 54 include statements related to the showing the necessary interest dimension, questions 27, 32, 44, 47, 48 and 55 include

INVESTIGATION OF THE EFFECT OF DOMESTIC VIOLENCE ON WOMEN'S PERCEPTION OF FAMILY FUNCTIONS

statements related to the behaviour control dimension, questions 1, 6, 11, 16, 21, 26, 31, 36, 41, 46, 51 and 56 include statements related to the general functions dimension. (Bulut 1990:9)

The FAD scale gives the family functionality score of all family members over 12 years of age when applied individually and averaged by all members. When applied to a single family member, it reveals the individual's perception of family functionality. In the evaluation of the scale, 2.00 is considered to be a distinguishing number. It is noted that the average score above 2.00 is an indicator of an unhealthy trend in family functions. However, in this case, it is noteworthy that the health area is wider because the lowest score is 1.00. (Bulut1990:10)

The validity study of the Family Assessment Device was conducted by Epstein and Bishop in 1983. The scale was applied to only one person from 218 normal, 98 psychiatric patient families, and the mean scores of their families in each subscale were lower than the mean scores of the patient families, that is, healthier. The same people performed regression analysis by simultaneously applying the Philadelphia Geriatric Morale Scale and Locke Wallace Marriage Satisfaction Scale together with 178 retired couples aged 60 years to determine the validity of ADS compliance and found a significant relationship between ADS and Locke Wallace Marriage Satisfaction Scale ($R = 0.53$). In addition, the relationship between the scores obtained from ADS and the scores obtained by both men and women from the Philadelphia Geriatric Morale Scale was found to be 0.47 (Bulut1990:12-13). The second validity and reliability study were conducted in 1985. In order to determine whether the scale was affected by social likability orientations, 164 family members in 72 families were given the ADS together with the Marlowa-Crowne Social Likeability Orientations Impact Scale, and the correlations of this scale with each of the six dimensions were low. This result showed that FAD was affected by social appreciation. (Miller, Bishop, Epstein, Keitner, 1985:345-356. Bulut, 1990:13) For the reliability study on score invariance, the scale was applied to a group of 45 people twice with an interval of fifteen days, and the correlations between the two applications varied between 0.66 (Problem Solving) and 0.76 (Emotional Response Ability). This revealed that the scale was reliable in terms of score invariance. For FAD compliance validity, the scale was applied to the same group together with FACES II and Family Unit Inventory, the measurement tool of the Circumplex Family Functions Model developed by Olson, and a high correlation was found between FUI and FAD. Correlations with FACIS II are not significant. The researchers state that this result may also be due to the difference in the scoring of the Circumplex Family Model. In the examination of the validity of FAD according to external criteria, FAD scores of family members were compared with the clinical evaluations of an experienced family therapist regarding the family. The FAD mean scores of the individuals in the subscales evaluated by the therapist as unhealthy were also found to be unhealthy, except for the "Behaviour Control" subscale. (Bulut 1990:13-14)

For the construct validity of the scale in Turkey, a scale was applied to 25 women or men in the divorce process and to each of the 25 couples maintaining the normal marriage. A significant distinctive difference was found between the divorced and non-divorced groups. In addition, it is seen that the mean scores of the subjects in the families with and without mental illness are significant. (Bulut 1990:16)

ANALYSIS OF DATA

The demographic characteristics of women stated in the Socio-Demographic Data Form are indicated by their number and percentage distributions. In the analysis of the sub-problems of the research, the data obtained using the Mann-Whitney U test, one of the nonparametric tests, were interpreted to determine whether the difference between the data of two independent groups was significant. Kruskal-Wallis H test was used to test whether the difference between the data of more than two groups was significant.

The responses of women to the seven FAD sub-dimensions were scored and calculated, and the mean and standard deviations were calculated separately for each sub-dimension. The way women perceive family functions was scaled as healthy and unhealthy and their data were analysed by entering into the SPSS program. In the responses given, if the mean sub-dimension

INVESTIGATION OF THE EFFECT OF DOMESTIC VIOLENCE ON WOMEN'S PERCEPTION OF FAMILY FUNCTIONS

was less than 2 and 2, it was scaled that the woman perceived that sub-family function as healthy, and if it was greater than 2, she perceived it as unhealthy. The significance level was accepted as 0.05.

At the meeting of the Ethics Committee of Manisa Celal Bayar University dated 22.06.2016 and numbered 233, it was decided that the research was ethically appropriate.

FINDINGS

In the study, findings regarding the socio-demographic characteristics of the participants, findings regarding exposure to violence, the scores of the participants from the FAD, and the relationship between the scores obtained from the FAD and the exposure to violence were obtained. These findings are presented in tables below.

Table 1. Socio-Demographic Characteristics of The Participants (n=96)

Features	Number	%
Age		
<i>18-25 years old</i>	22	22,9
<i>26-39 years old</i>	56	58,3
<i>40-49 years old</i>	15	15,6
<i>50 and above</i>	3	3,1
Education Status		
<i>Never educated</i>	6	6,3
<i>Literate</i>	5	5,2
<i>Primary School</i>	23	24
<i>School Secondary School</i>	22	22,9
<i>High School</i>	33	34,4
<i>University - College</i>	7	7,3
Marital Status		
<i>Formally Married</i>	66	68,8
<i>Divorced - separated</i>	16	16,7
<i>Informal relationship</i>	8	8,3
<i>Single</i>	6	6,3
Period of Marriage		
<i>0-2 years</i>	19	21,1
<i>3-5 years</i>	15	16,7
<i>5-10 years</i>	19	21,1
<i>10 years and above</i>	37	41,1

INVESTIGATION OF THE EFFECT OF DOMESTIC VIOLENCE ON WOMEN'S PERCEPTION OF FAMILY FUNCTIONS

Number of Children		
<i>No Children</i>	18	18,8
<i>She has 1 child</i>	37	38,5
<i>She has 2 children.</i>	27	28,1
<i>She has 3 children.</i>	6	6,3
<i>She has 4 children.</i>	8	8,3
Working Status		
<i>Not working</i>	72	75
<i>Has a Regular Income Job</i>	12	12,5
<i>Day Labour</i>	8	8,3
<i>Free Family Worker</i>	4	4,2
Length of Stay in Women's Shelter		
<i>Less than 1 Week</i>	25	26
<i>1 Week to 1 Month</i>	33	34,4
<i>1 Month to 3 Months</i>	17	17,7
<i>3 Months to 6 Months</i>	11	11,5
<i>6 Months and Over</i>	10	10,4

As can be seen in Table 1, the majority of the participants in the study are individuals between the ages of 25-39 with 58.3%. The majority of the participants in the study are at least high school graduate women with 41.7%. In addition, it is seen that 6 participants are not even literate. The majority of the participants of the study are officially married individuals with 68.8%. The duration of marriage or association of 41.1% of the women participating in the study is 10 years or more. Within the scope of the table, the duration of marriages/unions of women who are already divorced or separated before the divorce/separation is taken as a basis. In addition, it is seen that 6 participants are not married. Six unmarried women were not included in the table. Findings from the table suggest that many women continue their marriage under conditions of violence and oppression for a long time. The vast majority of the participants of the study have only one child with 38.5%. On the other hand, it is seen that there are 8 women who have four or more children. The majority of the participants of the study are women who do not work in any job with 75.0%. 4.2% of the participants who stated that they worked stated that they were unpaid family workers. When women who do not have any income due to being unpaid family workers are added to women who do not work, it is concluded that 79.2% of them do not have economic freedom. The fact that women who do not work are concentrated in the shelter constitutes the idea that women who do not have economic power mostly end up in a deadlock after the violence they experience and turn to the shelter process. The proportion of participants who stated that they had a regular income among all participants was found to be 12.5%. It is seen that 96 women who participated in the study mostly stay in the women's shelter between 1 week or 1 month.

INVESTIGATION OF THE EFFECT OF DOMESTIC VIOLENCE ON WOMEN'S PERCEPTION OF FAMILY FUNCTIONS

Table 2: Distribution According to the Status of Violence of Women

Violence	Number	Percentage
<i>History of violence</i>	59	61,5
<i>No history of violence</i>	37	38,5
<i>Total</i>	96	100,0

As can be seen in Table 2, 59 of the 96 participants of the study had experience of violence and 37 of them did not have experience of violence.

Within the scope of the study, 37 women who stayed in the shelter and had no history of violence participated in the study. When the table is examined, it is seen that women with a history of violence constitute 61.5% of the total number of women interviewed within the scope of the study and 38.5% of women without a history of violence.

Table 3: Type of Violence experienced by Women with a History of Violence (n=59)

Type of violence	Number	Percentage
<i>Physical violence</i>	53	89,8
<i>Sexual violence</i>	23	39,0
<i>Psychological violence</i>	54	91,5
<i>Economic violence</i>	37	62,7

When Table 3 is evaluated, it is seen that 53 of the 59 women who participated in the study and had a history of violence stated that they experienced physical violence, 23 stated that they experienced sexual violence, 54 stated that they experienced psychological violence and 37 stated that they experienced economic violence. The data obtained show that the violence experienced by women is not limited to a single type of violence.

Table 4: From Whom Do Women Suffer Violence

Violence from whom	Number	Percentage
<i>Spouse-Partner</i>	54	91,5
<i>Other family member</i>	5	8,5
<i>Total</i>	59	100,0

As can be seen in Table 4, 91.5% of the 59 women who experienced violence stated that they were exposed to violence from their spouses or partners.

INVESTIGATION OF THE EFFECT OF DOMESTIC VIOLENCE ON WOMEN'S PERCEPTION OF FAMILY FUNCTIONS

Table 5: The Relationship Between Women's Violence Experience and Family Assessment Device Scores

<i>Functions</i>	<i>Violence</i>	<i>Number</i>	<i>Rank Average</i>	<i>Chi-square</i>	<i>P</i>
<i>Problem solving</i>	<i>Violence</i> <i>No violence</i>	59 37	64,43 23,09	7,103	,000
<i>Communication</i>	<i>Violence</i> <i>No violence</i>	59 37	64,78 22,54	7,240	,000
<i>Roles</i>	<i>Violence</i> <i>No violence</i>	59 37	63,31 24,89	6,583	,000
<i>Ability to Respond Emotionally</i>	<i>Violence</i> <i>No violence</i>	59 37	63,17 25,11	6,531	,000
<i>Showing the Necessary Interest</i>	<i>Violence</i> <i>No violence</i>	59 37	60,27 29,73	5,242	,000
<i>Behaviour Control</i>	<i>Violence</i> <i>No violence</i>	59 37	61,81 27,28	5,921	,000
<i>General Functions</i>	<i>Violence</i> <i>No violence</i>	59 37	65,26 21,77	7,454	,000

INVESTIGATION OF THE EFFECT OF DOMESTIC VIOLENCE ON WOMEN'S PERCEPTION OF FAMILY FUNCTIONS

Table 6: The Relationship Between The Physical, Sexual, Psychological And Economic Violence Experiences Of Women And The Family Assessment Device Sub-Scores

	Physical violence		Sexual violence		Psychological violence		Economic violence	
	Chi-square	p	Chi-square	p	Chi-square	p	Chi-square	p
<i>Problem solving</i>	6,622	,000	4,140	,000	7,376	,000	5,191	,000
<i>Communication</i>	6,252	,000	4,779	,000	6,589	,000	5,778	,000
<i>Roles</i>	5,823	,000	4,284	,000	5,978	,000	4,665	,000
<i>Ability to Respond Emotionally</i>	6,145	,000	3,636	,000	6,012	,000	4,566	,000
<i>Showing the Necessary Interest</i>	4,521	,000	2,569	,010	4,417	,000	2,648	,008
<i>Behaviour Control</i>	5,263	,000	2,632	,008	5,531	,000	4,386	,000
<i>General Functions</i>	6,930	,000	4,598	,000	7,169	,000	4,993	,000

As can be seen in Table 6, there is a statistically significant relationship between the physical, sexual, psychological and economic violence experiences of women and almost all of the sub-scores of the Family Assessment Device ($p < 0.001$).

DISCUSSION

Looking at the ages of the women interviewed within the scope of the study, it is seen that 58.3% of the participants are individuals between the ages of 25-39 years, this majority is followed by women 22.9% between the ages of 18-25 years, 15.6% between the ages of 40-49 and 3.1% between the ages of 50 and over, and the women staying in the shelter are concentrated at ages that can be defined as young. The number of women staying in the shelter in the age group of 50 and over is quite low compared to other age groups. Urhan (2013) found the mean age of the participants as 31.9 (SD = 9.49, December 14-67) in his study, which aimed to examine the frequency of post-traumatic stress and depressive symptoms in women who were exposed to domestic violence (spouse/partner, parent, brother, etc.) and the relationship between demographic and personal factors, relationship characteristics, trauma factors and post-traumatic social support and resource loss in women's shelters affiliated with ASPIM and some municipalities in Istanbul, Izmir and Eskişehir provinces. The findings of these researches support the age group data of the women participating in our study, which focuses on the age group of 25-39 years.

The majority of the women participating in the study are officially married individuals with 68.8%. This rate is followed by divorced or separated women with 16.7%, unofficial women with 8.3% and single women with 6.3%, respectively. Urhan (2013) found that 71.7% of the participants were married or living together in a study aiming to examine the frequency of post-traumatic stress and depressive symptoms in women who were exposed to domestic violence (spouse/partner, parent, brother, etc.) and the relationship between demographic and personal factors, relationship characteristics, trauma factors and post-traumatic social support and resource loss and applied them in women's shelters affiliated to ASPIM and some municipalities in Istanbul, Izmir and Eskişehir provinces. The proportion of women who stated that they divorced or separated in the study was 14.7%. In Urhan's research, the data obtained on the marital status of women show rates close to the data of our research.

The vast majority of the participants of the study have only one child with 38.5%. It was determined that 28.1% of the women had 2 children and 6.3% had 3 children. On the other hand, it is seen that there are 8 women (8.3%) with four or more children. In the 2017 data of the Address-Based Population Registration System, the average household size in Turkey was found to be 3.4 (<http://www.tuik.gov.tr/PreHaberBultenleri.do?id=27597>). TurkStat 2016 birth statistics show that the total

INVESTIGATION OF THE EFFECT OF DOMESTIC VIOLENCE ON WOMEN'S PERCEPTION OF FAMILY FUNCTIONS

birth rate is 2.10 children. It should not be forgotten that the child of a woman who is a victim of violence is also a victim of abuse, at least because of witnessing violence, and the issue of child treatment should not be ignored while planning services for women.

When their educational status is examined, it is seen that 6.3% of the women are not even literate, 5.2% are literate, 24.0% are primary school graduates, 22.9% are secondary school graduates, 34.4% are high school graduates and 7.3% are college or university graduates.

The majority of the participants of the study are individuals who do not work in any job with 75.0%. 12.5% of the women stated that they had a job with regular income, 8.3% of them stated that they worked in daily jobs, and 4.2% of them stated that they were unpaid family workers. When women who do not have any income due to being unpaid family workers are added to women who do not work, it is concluded that 79.2% of them do not have economic freedom.

Looking at the data on how long the women included in the study stayed in the shelter, 26.0% of them were staying in the shelter for less than 1 week, 34.4% were staying between 1 week and 1 month, 17.7% were staying between 1 month and 3 months, 11.5% were staying between 3 months and 6 months and 10.4% were staying in the shelter for more than 6 months.

It is seen that 59 of the 96 participants of the study had experienced violence and 37 of them did not. 89.8% of the participants who stated that they had a history of violence stated that they were exposed to physical violence, 39.0% to sexual violence, 91.5% to psychological violence and 62.7% to economic violence.

91.5% of 59 participants stated that they were subjected to violence from their spouses or partners. 8.5% of women with a history of violence stated that they were exposed to violence from other family members. As a result of a face-to-face study conducted by the EU Agency for Fundamental Rights (FRA) in 28 EU member states in 2014, it was determined that two out of every five women (43%) were subjected to psychological violence from their current or former spouse/partner and 42% of women subjected to violence from their spouses or partners continued to be subjected to violence while pregnant. (http://fra.europa.eu/sites/default/files/fra-2014-vaw-survey-main-results-apr14_en.pdf, Accessed on 19.08.2018). The fact that the vast majority of the perpetrators of violence against women are women's own spouses shows that the marriage union is not established in a healthy way. Therefore, the availability of pre-marital education and counseling and family counseling services during the marriage process will be an important preventive and protective service in terms of family health and protection from violence.

There is a statistically significant relationship between women's experiences of violence and all of the sub-scores of the Family Assessment Device ($p < 0.05$). Women who are subjected to violence experience self-harm, loss of self-confidence, depression, post-traumatic stress disorder as well as various psychological problems. Although women experience the psychological consequences of violence in the first degree, the extensive effects of the trauma they experience extend to both their families and children, their social circles, if any, their workplace and job performances (Fraim 2012).

There is a statistically significant relationship between the physical violence experiences of women and all of the sub-scores of the Family Assessment Device ($p < 0.001$). Physical violence is the type of violence that has severe consequences that can reach death for women and is the most reacted by the society. It was determined that 25-40% of the injuries in women occurred due to domestic violence. 7.1% of women who are beaten accept this situation quietly. 80% of women who are exposed to violence think that nothing can be done about violence (Uysal 2006).

There is a statistically significant relationship between the sexual violence experiences of women and all of the sub-scores of the Family Assessment Device ($p < 0.05$). In sexual violence, there is an attack on the body and sexual identity. Sexual assault is usually accompanied by physical and psychological violence (Atan 2006).

There is a statistically significant relationship between the psychological violence experiences of women and all of the sub-scores of the Family Assessment Device ($p < 0.05$). As a result of exposure to psychological violence, a reduced human profile occurs in the family, in the society, inside and outside the work life and the determination to fight decreases (Keskin 2012).

There is a statistically significant relationship between the economic violence status of women and all of the sub-scores of the Family Assessment Device ($p < 0.05$). Economic violence is an important obstacle for women to develop themselves and hold on to life as individuals in social life. Economic violence, which is a violation of rights, impoverished women and sets a barrier to democratization. In order to eliminate all these, improvements need to be made both individually and socially (Bilican Gökçaya, 2011:129-145).

INVESTIGATION OF THE EFFECT OF DOMESTIC VIOLENCE ON WOMEN'S PERCEPTION OF FAMILY FUNCTIONS

CONCLUSION

As a result of this research, it is seen that not only women who are victims of violence but also women who have accommodation problems due to social and economic deprivation stay in women's shelters. For this reason, specialization of women's shelters according to different needs will provide better services to women. In addition, it has been observed that women who are victims of violence are exposed to more than one type of violence and this violence affects women's perception of family functions in an unhealthy way.

Violence against women, which is the most common form of violence as a human rights violation, is one of the most important problems in the whole world regardless of race, religion, geography and economic development. Despite the steps and developments taken at national and international levels, the problem of violence against women remains an obstacle to women's fundamental rights and freedoms.

When considered within the framework of the General System Approach, the problem of violence against women, which is a multifaceted problem, affects not only the woman who has been subjected to violence, but also her family, children, close environment and society negatively. As emphasized in this research, it is clear that violence disrupts the functions of the family and damages basic family requirements such as problem solving, communication, fulfilment of roles, emotional sharing, and mutual trust. Legal measures to be taken only after violence has occurred and women have suffered victimization will not constitute adequate measures to combat violence against women. A long process and path that requires the realization of measures and social enlightenment to prevent the emergence of violence should be planned and implemented. It will not be possible to prevent violence against women unless legal regulations remain only on paper and protective and preventive models are developed. In this context, it is important to review and work over and over all the factors that cause gender inequality and violence against women.

It is clear that it is necessary to combat domestic violence and violence against women in order to protect and improve the health of the family and society. One of the most important steps to be taken to prevent violence will be to change the silent attitude of women towards violence. For this purpose, women should be enlighten regarding the Law No. 6284 on the Protection of the Family and the Prevention of Violence Against Women and the authorities they can apply to when they encounter violence as well as about women's rights. Also, promotional campaigns and trainings should be organized for this purpose. With the family trainings to be organized, the damages caused by violence to individuals and the disadvantages of children growing up in violent environments should be emphasized at the individual and social level, and personal social work and counselling activities related to anger control should be carried out. Women's having a registered and regular income in employment will be effective in finding solutions and developing coping methods when they encounter violence.

INVESTIGATION OF THE EFFECT OF DOMESTIC VIOLENCE
ON WOMEN'S PERCEPTION OF FAMILY FUNCTIONS

REFERENCES

- Akın, A. ve Demirel, S.; (2003), Toplumsal Cinsiyet Kavramı ve Sağlığa Etkileri, C.Ü Tıp Fakültesi Dergisi, 2003 Özel Eki , Cilt: 25, Sayı:4, s. 73-82
- ASAGEM (2011). Türkiye'de Ailelerin Eğitim İhtiyaçları, Ankara
- Atan, Ş.Ü. (2006). Aile İçi Şiddetin Kadın Sağlığına Etkileri, Aile İçi Şiddet Aile Okulu Eğitim Kitabı, İzmir
- Bilican Gökkaya V. (2011). Kadına Yönelik Ekonomik Şiddet: Sivas İli (Cumhuriyet Üniversitesi) Örneği. Journal Of World Of Turks, Cilt:3, Sayı:3
- Bulut, I (1990). Aile Değerlendirme Ölçeği (ADÖ) El Kitabı, Ankara
- Canel, A.N (2012). Evlilikte İletişim ve Yaşam Becerileri. T.C: Aile ve Sosyal Politikalar Bakanlığı Aile ve Toplum Hizmetleri Genel Müdürlüğü Yayınları, Ankara
- Fraim, N. L (2012). Kadına Karşı Fiziksel Şiddetin Biyopsikososyal Sonuçları. Uluslararası Katılımlı Kadına ve Çocuğa Karşı Şiddet Sempozyumu, 27-28 Nisan, Ankara.
- Karşıyaka Belediyesi (2016). Karşıyaka Belediyesi Kadın Çalıştayı (2015) Sonuç Raporu, İzmir. (<http://docplayer.biz.tr/25654099-Karsiyaka-belediyesi-kadina-yonelik-siddet-calistayi-sonuc-raporu.html>)
- Keskin Ö (2012). Kadına Yönelik Psikolojik Şiddetin Boyutlarının Belirlenmesi ve Değişken Durumlara Göre Değerlendirilmesi: Rize İl Örneği. Uluslararası Katılımlı Kadına ve Çocuğa Karşı Şiddet Sempozyumu, 27-28 Nisan, Ankara.
- KSGM (2008). Toplumsal Cinsiyet Eşitliği Ulusal Eylem Planı, 2008-2013, Ankara
- KSGM (2014). Kadına Karşı Şiddetle Mücadele Alanında Çalışan Personele Yönelik El Kitabı. Ankara
- Miller, I.W, Ryan C.E, Keitner G.I, Bishop D. Sand Epstein N.B (2000). The McMaster Approach to Families: Theory, Assessment, Treatment and Research. Journal of Family Therapy, Vol: 22, Iss: 2 s. 168-189 <http://onlinelibrary.wiley.com/doi/10.1111/1467-6427.00145/pdf>, Erişim Tarihi: 02.01.2018
- Murdock, G.P (1949). Social Structure. The Macmillan Company, New York
- Özgentürk İ, Kargın V, Baltacı H (2012). Aile İçi Şiddet ve Şiddetin Nesilden Nesle İletilmesi. Polis Bilimleri Dergisi, Cilt 14 (4), <http://www.acarindex.com/dosyalar/makale/acarindex-1423910967.pdf> Erişim Tarihi: 27.07.2018
- Özgüven İ.E (2001). Ailede İletişim ve Yaşam. PDREM Yayınları, Ankara
- TDK (2018). (http://www.tdk.org.tr/index.php?option=com_gts&arama=gts&guid=TDK.GTS.5b8ae454400e59.29557200), Erişim Tarihi: 22 Mayıs 2018)
- Urhan, (2013) Ev İçi Şiddet Mağduru Kadınlarda Travma Sonrası Stres Bozukluğu ve Depresyon Belirtilerinin Sıklığı ve Bu Sorunlarla İlişkili Risk Faktörleri. Haliç Üniversitesi Sosyal Bilimleri Enstitüsü Yüksek Lisans Tezi, İstanbul
- Uysal, M. (2006). Medya ve şiddet. Toplumsal bir sorun olarak şiddet sempozyumu, 20.
- Ünal Z (2014). Toplumsal Cinsiyet Eşitliği ve Kadına Yönelik Şiddetle Mücadele. Kadına Yönelik Şiddetle Mücadele ve Toplumsal Cinsiyet Eğitim Seti, UNFPA, Ankara