

## Research Article

# Evaluation of Cases Admitted to Emergency Service Due to Domestic Violence Against Women: A Retrospective Study

Kadına Yönelik Aile İçi Şiddet Nedeniyle Acil Servise Başvuran Vakaların Değerlendirilmesi: Retrospektif Bir Çalışma

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### Abstract

**Aim:** One of the most important public health problems in our country is domestic violence against women. One of the first places that people who are exposed to violence apply to is the emergency services. This study aimed to retrospectively evaluate female cases who applied to a training and research hospital due to domestic violence.

**Material and Method:** The data of 25 women who were exposed to violence between January 1, 2018 and December 31, 2020 at Aksaray University Training and Research Hospital were analyzed retrospectively. Descriptive statistics were used in the presentation of the data.

**Results:** Of the women exposed to violence, 48.0% were in the 21-30 age group, and 90.0% experienced domestic violence from their spouses. Of the perpetrators, 30.0% were primary school graduates and 44.0% were in the 21-30 age group. One-fifth of women (20.0%) had suicidal ideation and 12.0% attempted suicide. After being exposed to violence, all of them applied to an official institution. Of women, 40.0% were threatened with death, 52.0% applied to the emergency department between 08.00-16.00, and the highest number of applications was in March (24.0%) and April (16.0%).

**Conclusion:** Majority of the women have been exposed to physical violence and some of them have experienced mental distress such as suicidal ideation and attempt. It has been suggested to determine the health service that the woman needs physically and mentally and to provide her physical and mental treatment.

**Keywords:** Abused woman; domestic violence; emergency room; retrospective study.

### Öz

**Amaç** Ülkemizde en önemli toplum sağlığı sorunlarından biri kadına yönelik aile içi şiddettir. Şiddete maruz kalan kişilerin ilk başvurduğu yerlerden biri de acil servislerdir. Bu çalışmada aile içi şiddet nedeniyle bir eğitim ve araştırma hastanesine başvuran kadın olguların retrospektif olarak değerlendirilmesi amaçlanmıştır.

**Gereç ve Yöntem:** Aksaray Üniversitesi Eğitim ve Araştırma Hastanesi'nde 1 Ocak 2018 ile 31 Aralık 2020 tarihleri arasında şiddete maruz kalan 25 kadının verileri retrospektif olarak analiz edilmiştir. Verilerin sunumunda tanımlayıcı istatistikler kullanılmıştır.

**Bulgular:** Şiddete maruz kalan kadınların %48,0'i 21-30 yaş grubunda olup, %90,0'ını eşlerinden aile içi şiddet görmüştür. Şiddet uygulayanların %30,0'u ilkökul mezunu ve %44,0'ü 21-30 yaş grubundadır. Kadınların beşte biri (%20,0) intihar düşüncesi taşımaktadır ve %12,0'si intihar girişiminde bulunmuştur. Şiddete maruz kaldıktan sonra hepsi resmi bir kuruma başvurmuştur. Kadınların %40,0'i ölümle tehdit edildi, %52,0'si acil servise 08.00-16.00 saatleri arasında başvurdu ve en fazla başvuru Mart (%24,0) ve Nisan (%16,0) aylarında oldu.

**Sonuç:** Kadınların büyük çoğunluğu fiziksel şiddete maruz kalmış ve bir kısmı intihar düşüncesi ve girişimi gibi ruhsal sıkıntılar yaşamıştır. Kadının fiziksel ve ruhsal olarak ihtiyaç duyduğu sağlık hizmetinin belirlenmesi ve fiziksel ve ruhsal tedavisinin sağlanması önerilmiştir.

**Anahtar Kelimeler:** Şiddete uğramış kadın; aile içi şiddet; acil servis; retrospektif çalışma.

## INTRODUCTION

One of the most important public health problems in our country, as well as all over the world, is domestic violence against women. Domestic violence against women is a human rights violation and a global crisis. World Health Organization (2021) data shows that approximately 1 in 3 (30%) of women worldwide have experienced either physical and/or sexual intimate partner violence or non-partner sexual violence in their lifetime (1). Most of this violence is intimate partner violence. According to the data of the Organization for Economic Co-operation and Development (2019), Turkey ranks second after Argentina in terms of violence against women. In other words, 38.0% of women in Turkey are subjected to physical or sexual violence by their partners (2).

Violence negatively affects women's physical, mental, sexual and reproductive health and increases the risk of sexually transmitted diseases (1). The impact of violence lasts a lifetime. Approximately one quarter of women who are subjected to violence suffer from mental health deterioration. Mental health disorders and suicidal thoughts and attempts are also increasing (3). The quality of life and mental health of women exposed to violence deteriorate. In addition, violence committed by a person with whom one has a close relationship further impairs the quality of life (4). The likelihood of unwanted pregnancy, the number of abortions and the number of terminated pregnancies increases among women who experience sexual violence. Additionally, the risk of sexually transmitted infections increases by 77% with sexual violence and 44% with emotional violence in women exposed to violence (5). Therefore, due to these negative health problems, the rate of women's use of health services is also increasing.

The health sector has an important role as an entry point to provide comprehensive health care to women experiencing violence and to direct women to other support services they may need (1). Health workers also have responsibilities in diagnosing violence against women, providing appropriate care to women victims of violence, and preventing violence (6). For this reason, defining the demographic information of those who are exposed to violence and those who perpetrate it, the characteristics of violence and the path followed after violence will guide both the prevention studies to be carried out and the policies to be created.

### *Aim*

This study aimed to retrospectively evaluate female cases who applied to a training and research hospital due to domestic violence.

## MATERIALS AND METHODS

### *Design*

This study is a retrospective descriptive type of registry research.

### *Population and Sample*

The population of this study is women who applied to the emergency department of Aksaray University Training and Research Hospital due to domestic violence between 01 January 2018 and 31 December 2020. The sample consisted of the files of 25 women who were recorded to have been subjected to violence between the specified dates.

### *Instruments*

In the study, the judicial records of women who applied to the emergency department due to domestic violence at Aksaray University Training and Research Hospital retrospectively and were found to have been subjected to violence, the standard forms filled out by doctors or nurses working in the emergency department by talking to the patients, and all data in the hospital records were evaluated. The data of 25 women who were reported and exposed to violence between 01 January 2018 and 31 December 2020 were evaluated. In the study, the data covering the last 5 years was intended to be examined, but the records of the last 3 years of data could only be accessed in the system.

An attempt was made to obtain demographic information about both the woman exposed to violence and the person who committed violence from the records. Additionally, information regarding violence was collected. This information includes the age of the woman victim of violence, marital status, educational status, number of children, whether she has suicidal thoughts and suicide attempts, kinship status with the person who commits violence, the person who commits violence and the age of this person, educational status and substance use status, type and number of violence, the situation, time and month of applying to the official institution after violence, the situation of children witnessing violence and the situation of being threatened with death.

### *Ethical Consideration*

Before starting this research, written permission was obtained from the Human Research Ethics Committee of a university (Date: February 22, 2021, Decision No: 01/16) and the Chief Physician of the relevant Training and Research Hospital. Since it was a retrospective study, informed consent could not be obtained. The research was conducted in accordance with the principles of the Declaration of Helsinki.

### Data Collection

The data of the study was collected by two researchers by examining previously recorded files. Data was collected between March and June 2021. The data was extracted and transferred to the data analysis program.

### Data Analysis

Statistical Package for Social Sciences for Windows SPSS 24.0 software was used to evaluate the data. Descriptive statistics such as numbers and percentages were used in the presentation of the data.

## RESULTS

Table 1 shows the demographic characteristics of women exposed to domestic violence and perpetrators by years. Of women exposed to violence, 70.0% are married, 40.0% are primary school graduates, 48.0% are in the 21-30 age group, and 36.0% are in the 31-40 age group. The majority of women (90.0%) have experienced domestic violence from their spouses. Of people who commit violence, 30.0% are primary school graduates and 44.0% are in the 21-30 age group. Of women, 32.0% have two children and 24.0% have one child. Of women who were victims of violence, 20.0% had suicidal thoughts and 12.0% attempted suicide. Of the violent spouse, 32.0% is a relative of the woman, 60.0% smokes, and 36.0% uses alcohol.

Table 2 shows the characteristics related to violence. Of women, 80.0% have been exposed to physical violence and 80.0% have been exposed to violence more than once. After being exposed to violence, all of them applied to an official institution. Of their children, 68.0% have witnessed violence against women and 40.0% have been threatened with death. Fifty-two percent of women applied to the emergency room between 08.00 and 16.00. While there were no applications in May, September and December, the highest number of applications were in March (24.0%) and April (16.0%).

**Table 1:** Demographic Characteristics of Women Exposed to Domestic Violence and Perpetrators by Years

	2018		2019		2020		Total	
	n	%	n	%	n	%	n	%
<b>Marital status</b>								
Married	7	70.0	5	71.4	7	87.5	19	76.0
Single	1	10.0	1	14.3	1	12.5	3	12.0
Divorced	2	20.0	-	-	-	-	2	8.0
Widow	-	-	1	14.3	-	-	1	4.0
<b>Educational status</b>								
Illiterate	-	-	-	-	1	12.5	1	4.0
Literate	2	20.0	-	-	1	12.5	3	12.0
Primary school	4	40.0	3	42.9	3	37.5	10	40.0
Secondary school	2	20.0	1	14.2	1	12.5	4	16.0
High school	2	20.0	3	42.9	2	25.0	7	28.0
<b>Age</b>								
≤ 20 years	-	-	1	14.3	-	-	1	4.00
21-30 years	4	40.0	3	42.9	5	62.5	12	48.0
31-40 years	4	40.0	3	42.9	2	25.0	9	36.0
41-50 years	2	20.0	-	-	-	-	2	8.0
≥ 51 years	-	-	-	-	1	12.5	1	4.0
<b>Educational status of the perpetrator</b>								
Illiterate	1	10.0	-	-	-	-	1	4.0
Literate	3	30.0	2	28.6	1	12.5	6	24.0
Primary school	1	10.0	3	42.9	5	62.5	9	36.0
Secondary school	3	30.0	2	28.6	-	-	5	20.0
High school	2	20.0	-	-	2	25.0	4	16.0
<b>Age of perpetrator</b>								
21-30 years	4	40.0	4	57.1	3	37.5	11	44.0
31-40 years	3	30.0	1	14.3	3	37.5	7	28.0
41-50 years	3	30.0	1	14.3	1	12.5	5	20.0
<b>Perpetrator</b>								
Victim's spouse	9	90.0	7	100	7	87.5	23	92.0
Spouse's relative	1	10.0	-	-	1	12.5	2	8.0
<b>Number of children</b>								
None	2	20.0	-	-	-	-	2	8.0
1	2	20.0	2	28.6	2	25.0	6	24.0
2	2	20.0	3	42.9	3	37.5	8	32.0
3	3	30.0	2	28.6	2	25.0	7	28.0
≥ 4	1	10.0	-	-	1	12.5	2	8.0
<b>Suicidal ideation</b>								
Yes	3	30.0	2	28.6	-	-	5	20.0
No	7	70.0	5	71.4	8	100	20	80.0
<b>Suicide attempt</b>								
Yes	2	20.0	1	14.3	-	-	3	12.0
No	8	80.0	6	85.7	8	100	22	88.0
<b>Relationship status with spouse</b>								
Yes	4	40.0	2	28.6	2	25.0	8	32.0
No	6	60.0	5	71.4	6	75.0	17	68.0
<b>Habits of the spouse</b>								
Cigarette	6	60.0	3	42.9	6	75.0	15	60.0
Alcohol	3	30.0	4	57.1	2	25.0	9	36.0
Drug	1	10.0	-	-	-	-	1	4.0

**Table 2:** Characteristics Related to Violence

	2018		2019		2020		Total	
Type of violence	n	%	n	%	n	%	n	%
Physical violence	8	80.0	7	100	5	62.5	20	80.0
Psychological violence	-	-	-	-	1	12.5	1	4.0
Physical and psychological violence	-	-	-	-	2	25.0	2	8.0
Sexual violence	1	10.0	-	-	-	-	1	4.0
Physical and sexual violence	1	10.0	-	-	-	-	1	4.0
<b>Number violence</b>								
First time	2	20.0	2	28.6	1	12.5	5	20.0
More than one	8	80.0	5	71.4	7	87.5	20	80.0
<b>Applying to an official institution after violence</b>								
Yes	10	100	7	100	8	100	25	100
No	-	-	-	-	-	-	-	-
<b>Have their children witnessed violence?</b>								
Yes	7	70.0	4	57.1	6	75.0	17	68.0
No	3	30.0	3	42.9	2	25.0	8	32.0
<b>Being threatened with death</b>								
Yes	6	60.0	3	42.9	1	12.5	10	40.0
No	4	40.0	4	57.1	7	87.5	15	60.0
<b>Time of application</b>								
08.00-16.00	8	80.0	2	28.6	3	37.5	13	52.0
16.00-24.00	1	10.0	4	57.1	4	50.0	9	36.0
24.00-08.00	1	10.0	1	14.3	1	12.5	3	12.0
<b>Month of application</b>								
January	-	-	-	-	2	25.0	2	8.0
February	-	-	-	-	2	25.0	2	8.0
March	4	40.0	-	-	2	25.0	6	24.0
April	2	20.0	2	28.6	-	-	4	16.0
May	-	-	-	-	-	-	-	-
June	-	-	2	28.6	-	-	2	8.0
July	2	20.0	1	14.3	-	-	3	12.0
August	-	-	1	14.3	-	-	1	4.0
September	-	-	-	-	-	-	-	-
October	1	10.0	1	14.3	-	-	2	8.0
November	1	10.0	-	-	2	25.0	3	12.0
December	-	-	-	-	-	-	-	-

Figure 1 shows the applications for violence by years. While there was a decrease in the number of violence in 2019, it increased again in 2020.

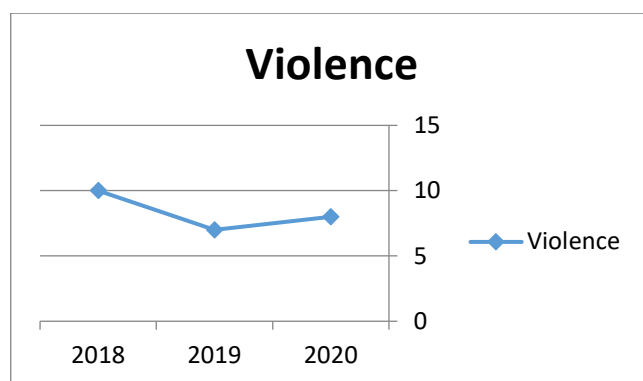
**Figure 1:** Applications of violence by years

Figure 2 shows the types of violence experienced by years. While physical violence and sexual violence were also seen in 2018, there were no cases of sexual violence in subsequent years. In the applications in 2019, there were only physical violence applications. In 2020, physical violence was accompanied by psychological violence.

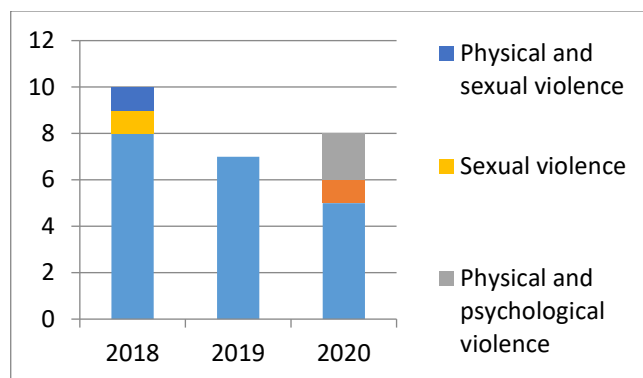
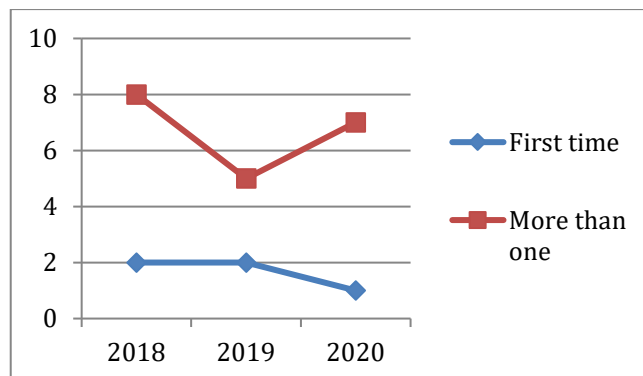
**Figure 2:** Type of violence experienced by years

Figure 3 shows the number of violence experienced over the years. From 2018 to 2020, there was a decrease in the number of people experiencing violence for the first time. While the number of people subjected to multiple violence decreased in 2019, it increased again in 2020.

**Figure 3:** Number of violence experienced by years

## DISCUSSION

In this study, it was determined that the majority of women who applied to the emergency department due to domestic violence were in the 21-30 and 31-40 age groups. In a similar study examining women who applied to the emergency department due to domestic violence, the average age of the women was  $35.70 \pm 12.53$  years (7). In the field research conducted by Ediz and Altan (8), the majority of women subjected to violence were in the 30-40 and 41-50 age groups. In a study examining women victims of violence who applied to the Violence Prevention and Monitoring Center (VPMC) in a province, the average age of the women was  $35.65 \pm 11.98$  years (9). In a study conducted abroad in Erbil, the average age of women who were victims of domestic violence was  $33.16 \pm 9.28$  years (10). When we look at the studies, it can be said that, similar to this study, mostly women in the middle age group demand services.

In this study, 40.0% of women who applied to the emergency department due to domestic violence were primary school and 28.0% were high school graduates. Similarly, in the study conducted by Canpolat and Demir (7) with women who applied to the emergency room due to domestic violence, 35.8% of the women were primary school graduates and 22.6% were high school graduates. In a field research conducted on women exposed to violence, 36.0% of women were primary school and 24.1% were secondary school graduates (8). In another study, 33.9% of women applying to the VPMC were primary school and 23.3% were high school graduates (9). In the study conducted with women exposed to violence in Erbil, it was reported that 40.0% of women were secondary school and 30.5% were high school graduates (10). In line with the findings, we can say that women from all education levels are exposed to domestic violence, but the rates of exposure to violence are higher among primary and high school graduates.

In this study, the majority of people who committed violence were primary school graduates (36.0%) and literate (24.0%). In a similar study, 35.8% of spouses were primary school and 22.6% were high school graduates (7). In another study, the majority of the husbands of women who were subjected to physical violence were illiterate, and the husbands of women who were not exposed to physical violence had higher education level (11). In some studies, no relationship was found between the violent behavior against women and the education level of their husbands (12,13). As a result, although the majority of people in this study are people with low education levels, we can say that the people who commit violence come from all levels of education.

In this study, one in five women had suicidal thoughts and approximately one in ten women attempted suicide. In a

study conducted in Iraq, 57.1% of women who were victims of violence had thoughts of death, 35.2% had a suicide plan, and 17.1% attempted suicide (10). In a case-control study conducted in Iran, women who attempted suicide were more controlled and forced by their spouses. They were subjected to physical violence and threatened with physical violence (14). Women exposed to domestic violence experience more mental illness than women who are not exposed to violence (15). As a result, we can say that women exposed to domestic violence may experience mental problems such as suicide and therefore they should be referred to psychiatric outpatient clinics for a good psychiatric evaluation and treatment.

In this study, the majority of women were exposed to physical violence and violent behavior more than once. In a similar study, the majority of women who applied to the emergency room due to domestic violence were also exposed to physical violence and violent behavior more than once (7). In a study conducted in Iraq, the majority of women were raped within marriage, with physical violence taking the second place. In the same study, the majority of women were exposed to violent behavior constantly, once a week or once a month (10). In line with the study findings, we can say that women who use emergency services are more exposed to domestic physical violence.

In this study, 68.0% of the children witnessed violence. In another study, 30.2% of children witnessed violence (7). It is a very risky situation for children to witness violence within the family. Their mental health deteriorates, and behavioral and emotional problems occur in these children (15). In addition, children who witnessed domestic violence in childhood tend to both commit violence and are exposed to more violence in dating relationships when they grow up (16). For this reason, it is important to provide psychological guidance and counseling services to the children of women exposed to domestic violence and to support them psychologically until they become adults.

In this study, approximately half of the women visited the emergency department during daylight hours and in the spring. Similarly, in a study, women who exposed to domestic violence mostly applied to the emergency room during daytime and spring (7). In a study conducted abroad, cases of sexual violence in the city of Rotterdam occurred most in the spring (17). More studies and record reviews are needed to comment on this issue.

### *Limitations*

This study has some limitations. Since this study was a retrospective record review study, analyzes could only be made on recorded data. This situation poses an obstacle to

in-depth analysis of the problem. Since the data is not collected directly from individuals, the reliability of the data cannot be tested. In the study, the data covering the last 5 years was intended to be examined, but the records of the last 3 years of data could only be accessed in the system. Finally, the research results can only be generalized for the sample studied.

## CONCLUSION

As a result, approximately half of the women exposed to violence were in the 21-30 age group and the majority exposed to domestic violence from their spouses. People who committed violence were mostly primary school graduates and in the 21-30 age group. One in five women had suicidal thoughts and 12.0% attempted suicide. Women were most exposed to physical violence. After being exposed to violence, all of them applied to an official institution. A significant portion of the women were threatened with death. More than half of women applied to the emergency department during daylight hours, and the highest number of applications occurred in March and April, that is, in the spring.

In line with these results, we can say that healthcare professionals have important responsibilities in the protection and treatment of women victims of violence. Unfortunately, considering that the violence experienced remains within the home and is not reflected in institutions, it has been suggested to reach a much larger audience by organizing home visits. It has been suggested to determine the health care the woman needs physically and psychologically, to provide physical and psychological treatment, to request psychiatric consultation for further psychological evaluation and treatment, to protect the woman from possible violence, and to ensure that she benefits from her legal rights.

## Declarations

**Ethics Committee Approval:** Ethics committee approval was obtained from the Human Research Ethics Committee of a university (Date: February 22, 2021, Decision No: 01/16)). This study was conducted according to the principles of the Declaration of Helsinki.

**Authorship Contributions:** Concept: AY, HM, EBY. Design: AY., Data Collection or Processing: AY, HM., Analysis or Interpretation: AY, HM, And Literature Search: EBY, Writing: EBY, and AY. All authors approved the final version of the manuscript.

**Conflict of Interest:** No conflict of interest was declared by the authors.

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