Violence against women and depression in rural Ethiopia

Deyessa Negussie¹, Yemane Berhane¹, Alem Atalay², Merry Elsberg³, Gunnar Kulgren⁴

- 1 Department of Community Health, Faculty of Medicine, P.O. Box 9086, Addis Ababa, Ethiopia
- 2 Department of Psychiatry, Faculty of Medicine, P.O. Box 9086, Addis Ababa, Ethiopia
- 3 Programs for Appropriate Technology in Health (PATH), Washington, D.C, USA
- 4 Psychiatry and Department of Clinical Science, Umeå University, Sweden

Introduction

Major depression is the most widely recognized major health problem around the world. Depression is more common in women particularly acute among adult women, who in most countries suffer depression at nearly twice the rate seen in men. Though it is well known that depression is twice as common in women as in men, the origins of this dramatic difference remain complex and obscure.

Some of the possible explanations that may play for the preponderance of depression on women than their counterpart men, include; influence of gonadal hormones in women, higher rate of anxiety disorder in females, a number of psychosocial stressors in female population are some of the well known factors contributing to the difference in prevalence of depression among women and men population. Childhood sexual abuse is also another possible explanatory factor to show difference in depression among women and men. However, postulated hypothesis for female preponderance in depression due to artifacts of higher help seeking behavior in women than in men and recall difference by gender are proved to be a refute hypothesis.

Violence against women has been associated with a number of adverse mental health consequences. Many women consider the psychological consequences of violence against women to be more serious than its physical effects. Though knowledge has improved on factors likely to contribute to the gender gap in depression, there is still no adequate research work to show how violence against women across different socio-cultures contribute to the increase in rates of depression among women.

Looking for the presence of difference in rates of depression between women experiencing and not experiencing violence, could answer the hypothesis that states violence against women could contribute for difference in depression rates among men and women. Therefore, the purpose of this paper is to assess whether violence against women independently correlates with depressive episode.

Materials and Methods

The study used community based cross sectional study, conducted among women of child bearing age in Butajira district, central Ethiopia from January 2002 to December 2002. Women fulfilling an inclusion criterion of "age between 15 and 49 years, who ever were living with a partner and found in the list of women's name of the demography and surveillance system of the program" were included as a study population. This study included a total of 2661 randomly selected women of childbearing age and who ever were living with a partner.

A pre-tested and validated Amharic version of Composite International Diagnostic Interview (CIDI) version 2.1 was used to identify of depressive episode F32, ICD-10, in the last year, and a standardized questionnaire of life events and health, which was used in multi-country study of violence against women, was taken to measure life events experienced by women. We examined between specific features of experience of violence by intimate partner of women and depressive episode in the last 12 month using both univariate and multivariate analysis methods. We used, in the logistic regression a series of stepwise multiple regression to examine the relative importance of the various features of violence against women and socio-cultural characteristics in predicting depressive episode. The study has got approval of ethical clearance from ethical and publication committees of the Medical Faculty, Addis Ababa University and Ethiopian Science and Technology Commission, from Ethiopian side, and from Umeå University, Sweden.

Results

More than three quarter of the respondents were between 25 and 35 years age group with a mean age and standard deviation of 32.4 ± 8.1 years, and 1994 (88.2 %) were currently married. Out of the 2261 women ever lived with intimate partner, 1101 (48.7 %) had experienced physical violence, 1324 (58.6 %) had experienced sexual violence by their intimate partner. Out of 2203 women who responded whether they experienced sexual violence before 15 years, 190 (8.3 %) women had experienced sexual violence during childhood.

The likelihood of experiencing depressive episode in the last 12 months was higher among women who experienced physical violence by their intimate partner than women who never experienced. After adjusting for experience of sexual violence during childhood, sexual and emotional violence by intimate partner in their life time and socio-demographic characteristics of women, the odds of experiencing depressive episode in the last 12 months among women who experienced physical violence by intimate partner markedly resisted to change (OR=2.12, 95 % CI, 1.33, 3.38).

Women who experienced childhood sexual abuse were more likely to experience depressive episode in the last 12 months than women who never experienced. Similarly, the odds of experiencing depressive episode in the last 12 months among women who experienced emotional violence by intimate partner was higher than among women who never experienced.

Discussion

This exploratory study examined the relationship between reported experience of violence against women and 12 months experience of depressive episode as well as examined other socio-cultural factors known to be risk factors for depressive episode. Our finding of a prior history of experiencing physical by an intimate partner was strongly associated with depressive episode, even after adjusting other possible factors. Our finding is supported by prior studies that showed being in an unstable relationship or marital disharmony with their intimate partner was found to be related to experience of depressive episode. Higher rate of experiencing violence by women population than men could be a base to difference in the prevalence of depressive episode among women than the men population. Our finding of association between violence against women and depressive episode could contribute to the explanation of gender difference in depressive episode between women and men. Thus we recommend researchers to explore for future work on the transduction of violence against women into depressive episode.