Personality Psychopathology Among Female Victims of Domestic Violence Referred to the Forensic Medical Center, Ahvaz, Iran

Arefeh Mobasher, Marzieh Assareh, Zahra Karamollahi, Atefeh Mobasher

Objective: To assess personality psychopathology amongst a sample of women who suffered domestic violence by their husbands in Ahvaz, Iran. Methods: In this cross-sectional study, which was carried out in the second half of 2011, all females who presented to the Forensic Medical Center of Ahvaz, Iran were eligible to enter into the study. The inclusion criteria were reporting domestic violence from husband by the woman and documentation of this violence by the physician of the center. To assess personality psychopathology, the Millon Clinical Multiaxial Inventory (MCMI-II) was used. Results: Twenty-seven subjects (67.5%) had at least one psychiatric disorder. The most common one was depressive disorder (12 cases, 30%) followed by histrionic personality disorder (10 cases, 25%) and obsessive-compulsive personality disorder (9 cases, 22.5%). There was no statistically significant difference regarding frequency of psychiatric disorders detected between different occupational or age groups. Conclusion: Depressive disorder, histrionic personality disorder, and obsessive-compulsive personality disorder were respectively the most common psychiatric disorders detected in female victims of domestic violence in Ahvaz, Iran. This information could be useful for medical staff dealing with such patient population including forensic center personnel, psychiatrists, psychologists, and general practitioners irrespective if age and occupation of the victims.

INTRODUCTION

Domestic violence in the form of violence of men against women is a public health concern in Iran. Previous reports from Iran have noted considerable prevalence of domestic violence. For example, in a recent study lifetime prevalence and past-year prevalence of domestic violence were measured to be 38.7% and 6.6%, respectively among a sample of 1,000 Iranian women [1]. In another study conducted in northeastern Iran, 20% of the studied women experienced at least one type of physical violence by their intimate partner [2].

Personality disorder is a common and chronic disorder among psychiatric disorders. It is estimated that 6 percent of the general population is afflicted by this disorder. Its symptoms can appear within a few decades and its prognosis is generally considered unfavorable [3]. Personality disorder may be a predisposing factor for other psychiatric disorders such as substance abuse, suicide, affective disorders, eating disorders, and anxiety disorders. Patients with personality disorders are more likely to refuse any psychological assistance while deny having any problems, and comprise more than any other probable psychiatric patients. The disorder begins in adolescence stage and does not change over time, resulting in individual’s dissatisfaction and impairing his functions [3, 4].

So far, no studies have been conducted regarding personality disorders/psychiatric disorders among women who have been the victims of domestic violence in Iran. Given the high prevalence of domestic violence in Iran, and a growing need for analysis of the origins and consequences of such social anomalies, and also regarding the diagnosis and timely and early treatment of prevalent disorders, which are rooted in the domestic violence and as such, this research can be an effective deterrent element in an early detection, and aid in promotion of mental health for the affected families and ultimately the community in general.

Corresponding Author: Marzieh Assareh, Assistant Professor of Child & Adolescent Psychiatry, Department of Psychiatry, Bahonar Hospital, Alborz University of Medical Sciences, E-mail: Dr.assareh@abzums.ac.ir
The objective of this study was to assess personality psychopathology among women who were referred to the Forensic Medical Center of the city of Ahwaz, Iran as a result of domestic violence within the second half of the year 2011. With determination of the frequency of variety of personality disorders, the needed information regarding women suffering from personality disorder can be presented to the medical health centers for the purposes of attention to prevention and early treatment issues.

Materials and Methods

In this cross-sectional study which was carried out within the second half of 2011, all married women who suffered domestic violence by their husbands who presented to the forensic medical center of Ahvaz, Iran were eligible to enter into the study. The violence imposed by the husbands was documented by a physician in the forensic center. First the women were informed about the study protocol and were assured that the information will be kept confidential. If they agreed to participate, then personality disorder was assessed by the Millon Clinical Multiaxial Inventory (MCMI-III) [5]. In addition, a checklist was completed including demographic data (age, occupation, and educational level).

The Millon Clinical Multiaxial Inventory (MCMI-III):

This is a self-report multiaxial tool to assess Axis I and II psychopathology. It includes 175 true/false items and yields information about personality disorders as well as clinical syndromes. It includes 24 scales, of which 14 scales assess personality disorders according to Axis II of the Diagnostic and Statistical Manual of Mental Disorder, Fourth Edition (DSM-IV) and 10 scales assess clinical syndromes according to Axis I. In addition to personality disorders, this inventory assesses disorders such as anxiety disorder, somatoform disorder, bipolar disorder, depressive disorder, drug dependence, and post-traumatic stress disorder. This inventory has been applied in former studies to determine personality disorder in various settings. This questionnaire has been translated into Persian and its validity has been reported to be acceptable (i.e., reliability of various scales reported to range from 88% to 97%) [6].

Statistical analyses:

Descriptive indices including frequency, percentage, mean, and standard deviation were used to express data. To make comparison, the chi-squared test was used. Significance level was set at 0.05.

3. Results:

Totally, 40 subjects with mean (±SD) age of 28.8 (±3.9) years were studied. Regarding educational level, one was illiterate, 14 were at junior school level, 18 had high school diploma, 5 had university bachelor’s degree, and one woman had university master’s degree. In terms of occupation, most women were housekeepers (30 cases), followed by school teacher (6 subjects), university student (2 cases), hair stylist (one case), and university professor (1 case).

Thirteen subjects (32.5%) had no personality disorder. Twenty cases (50%) had one type of personality disorder and 7 cases (17.5%) had more than one specific type of personality disorder. Table 1 presents the frequency (percentage) of personality/psychiatric disorders. As shown, depressive disorder was the most common disorder detected.

Table 1: Frequency distribution of personality disorders among 27 victims of domestic violence presented to the Forensic Medical Center of Ahvaz, Iran.

<table>
<thead>
<tr>
<th>Personality disorder type</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anxiety</td>
<td>1</td>
<td>2.9%</td>
</tr>
<tr>
<td>Histrionic</td>
<td>10</td>
<td>29.4%</td>
</tr>
<tr>
<td>Dependent</td>
<td>2</td>
<td>5.8%</td>
</tr>
<tr>
<td>Obsessive-compulsive</td>
<td>9</td>
<td>26.4%</td>
</tr>
<tr>
<td>Depressive</td>
<td>12</td>
<td>35.2%</td>
</tr>
<tr>
<td>Total</td>
<td>34</td>
<td>100%</td>
</tr>
</tbody>
</table>

Table 2 presents comparison of personality/psychiatry disorder frequency in terms of occupation (being student or employed vs. being housekeeper) and age (age groups of less than 25 years, 25-35 years, and more than 35 years). The analyses demonstrated there was no statistically significant difference regarding frequency of psychiatric disorders between different occupational or age groups.

4. Discussion:

According to the obtained results, a considerable number of subjects (67.5%) had at least one type of personality/psychiatry disorder. Depressive disorder was the most common one observed followed by histrionic personality disorder and obsessive-compulsive personality disorder.
In a research conducted by Winberg Nodal et al. [7] on 86 couples who had been referred to the medical examiner as a result of having suffered from abuse and harassment by their spouses, a personality disorder evaluation was directed using the MCMI-II. The test results of this study suggested a large number of participants, an estimate of about 70%, were reported to suffer from obsessive-compulsive personality disorder. This rate is higher than ours as we observed just 22.5% had obsessive-compulsive personality disorder. In another study of personality pathology conducted on 177 male participants who had committed acts of family violence using the MCMI III, it was revealed that 54% of the participants suffered from personality disorder [8]. They reported that, They reported that the most common personality disorder was obsessive-compulsive personality disorder (57.8%), followed dependent personality disorder (34.2%) and paranoid personality disorder (25%), though it should be re-emphasized that this study was done on male subjects.

Characteristics associated with depressive disorder comprise subtle patterns and persistent depressed mood, nostalgia, unpleasantness, perceived inadequacies, worthlessness, low self-esteem, self-criticism, constant self-incrimination, worrisome thoughts, negativity, criticism, pessimism, and feelings of guilt. Although epidemiological data about the depressive disorder is still not well understood, given the prevalence of depressive disorder in the general population, it appears that depressive disorder is common among female victims of domestic violence as well. According to a meta-analysis, major depressive disorder has a prevalence of 4.1% in Iran and is 1.5 times more common in females [9]. In another study on 25,180 Iranian subjects recruited through cluster sampling depressive disorder was found in about 3% of the sample [10]. Another view into the lives of these couples can be inferred that the affliction of a spouse with this disorder can be stressful for couples, and any reaction to such stress can materialize in the form of verbal aggression. Subsequently, it may follow with increased personality disorders or other psychiatric disorders such as depression accompanied by anxiety, etc.

As is noted in this study, some characteristics of depressive disorder and histrionic personality disorder are most evident when patients are faced with spousal violence. However, in scientific references, the main cause of this disorder is not exactly clear but possibly genetics or natural causes are mentioned. Other factors such as local social cultural traits, or other conditions or circumstances cannot be overlooked. The people of Khuzestan province are the only regional people in the country who live in a multicultural environment with different dialects. Inherent cultural differences in cross-cultural marriages could also be considered as a stress factor in the increased personality condition in individuals.

Another factor that will never be forgotten by the people of Khuzestan is the negative influence of years of imposed war in this region, stress and subsequent consequences that are still evident in some families who are still struggling with its aftereffects. Climatic conditions of the province are another important factor. Intense heat during warm seasons when families are forced to remain in a closed environment, and lack of any suitable facilities for recreational purposes in the province which today the mental health care professionals pay special attention to, are all considered as stress causing factors and increased personality conditions in individuals.

Regarding personality disorders, we did not find a reliable data in terms of histrionic personality disorder prevalence in Iranian population neither in forensic centers of the country. Statistics from other societies show that histrionic personality disorder occurs approximately in 2 to 3 percent in general population [11] with equality between males and females. In this personality disorder, most patients show evidences of physical abuse which is consistent with the information presented in our research. The prominent induced characteristics of patients suffering from histrionic personality disorder include being pathetic attention-seeking, anger as a result of not being at the center of attention, seductive behaviors, fluctuating and superficial emotions, physical appearance to draw attention with extreme speech, grandstanding, and being dramatic. Difficulty in controlling evident excitement and emotions can be associated with elements that trigger spousal anger and resulting violence toward her.

The prevalence of obsessive-compulsive disorder in Iran is 1.8% (0.7% in males and 2.8% in females) [12]. This personality disorder was the third most common disorder detected in this study. There is controversy about maladjustment and possibility of abuse regarding this type of personality disorder. Individuals are less likely to get marry. If they marry the likelihood of marital maladjustment may be higher [13].

5. Conclusion:

Depressive disorder, histrionic personality disorder, and obsessive-compulsive personality disorder were respectively the three most common psychiatric disorders detected in female victims of domestic violence in
Ahvaz, Iran. We recommend that this information be kept in mind by any medical personnel dealing with such patients including but not limited to forensic medical center personnel psychologists, psychiatrists, and general practitioners. Age and occupation of the victims were not found to have significant effect on these disorders.

REFERENCES


