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## Short Communication

# Mental health in girls and boys exposed to intimate partner violence



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## ABSTRACT

**Objectives:** Children of abused women have a greater risk of mental health problems. This study assesses the association between women's exposure to intimate partner violence (IPV) and the mental health of their children in the population of the Madrid Region.

**Study design:** Cross-sectional.

**Methods:** Data were drawn from the '2014 Survey on Intimate Partner Violence against Women in the Madrid Region'. Women meeting the definition of IPV answered the Strengths and Difficulties Questionnaire (SDQ) on the mental health of one of their children aged 4–16 years. The comparison group was made up of mother-child dyads that had not been exposed to IPV. We used multivariate analysis to assess whether the children of abused women had a greater probability of having higher SDQ subscale and total scores. **Results:** A total of 209 mother-child dyads were analyzed, 64 exposed (50% boys) and 145 unexposed to IPV (51% boys). Exposure to IPV was associated with a high SDQ score (greater risk of mental health problems), with a prevalence ratio of 3.6 (95% CI 1.2–10.3) in girls and 2.4 (95% CI 1.1–5.1) in boys. Among girls, moreover, exposure to IPV was significantly associated with behavioral and inattention/hyperactivity problems. In conclusion, exposure to IPV was associated with an increased frequency of mental health problems among children in general, and girls in particular.

**Conclusions:** This study reinforces the recommendations to conduct studies with data disaggregated by sex and to address the impact of IPV in mothers and children jointly.

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Children exposed to maternal intimate partner violence (IPV) have an increased rate of mental health problems, including internalized and externalized disorders, symptoms of post-traumatic stress, and peer problems.<sup>1–4</sup>

According to the 2015 Spanish macrosurvey on violence against women, 64% of mothers who experience gender violence report that their minor children have witnessed violent acts.<sup>5</sup> However, it is not necessary to be present at the

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moment of violence to suffer its effects: living in an insecure family atmosphere, charged with hostility, fear, and violence of the father against the mother, has consequences on children's health.<sup>2</sup>

Despite the growing interest in Spain in the consequences of IPV on children, little field work has been done on the subject. Existing studies analyze the problem in the children of women attended by gender violence centers or services or mental health centers.<sup>6</sup> These studies, though necessary, represent the children of mothers who have experienced a very severe degree of gender violence. It is thus necessary to study the consequences of IPV on children in general population samples in which every degree of violence is represented.

While the literature fully supports the association between women's exposure to IPV and mental health problems among their children, less is known on the specific effects in boys and girls because many studies omit to break down the results by sex.

Accordingly, our study's main aims were to ascertain whether there was an association between exposure to IPV and mental health problems in children in the general population and to assess whether exposure to IPV might be differentially associated with mental health problems in boys and girls.

The study data were drawn from the 2014 '3rd Survey on Intimate Partner Violence against Women in the Madrid Region'.<sup>7</sup> The Madrid region is eminently urban and has over 6 million inhabitants. Based on a computer-assisted telephone interview technique, this survey is conducted every 5 years on a representative sample of women aged 18–70 years, who have a current partner or have had contact with an ex-partner in the 12 months preceding the survey. The response rate in 2014 was 60.5%, and 7.6% of the 2992 interviewed women that fulfilled the case definition of IPV in the preceding 12 months. The definition was drawn from a validated 26-item questionnaire, with questions based on the National Survey on Violence against Women in France and on the USA Conflict Tactics Scale.<sup>7</sup> A child was deemed to be exposed to IPV if the mother met the case definition of IPV.

Women who met the IPV case definition and had children aged 4–16 years, answered the Spanish version of the Strengths and Difficulties Questionnaire (SDQ)<sup>8</sup> on one of their children selected at random. In the SDQ total score (range 0–40), obtained by summing up the first four subscales, a value  $\geq 14$  is considered as borderline/abnormal, indicative of possible mental health problems. On the subscales, the

following values were considered normal: <4 in emotional problems; <3 in behavioral problems; <6 in hyperactivity/inattention problems; and <3 in peer problems.<sup>8</sup>

From IPV-free women, we selected an unexposed group of double the size, maintaining the same proportion of boys and girls with the same proportion by age strata (4–7, 8–11, and 12–16 years) as the exposed group, 51% boys, and asked the mothers to complete the SDQ. The average age of minors in years [mean (SD)] was 9.4 (3.5) in the exposed group and 9.4 (3.7) in the unexposed group ( $P$ -value = 0.943).

We constructed a multivariate model for mental health problems according to the SDQ total and (four) subscale scores and calculated the prevalence ratio (PR) between those exposed and unexposed to IPV and their respective 95% confidence intervals, using Poisson regression with a robust estimator of variance. Adjustment variables were mother's educational level (university or non-university) and country of birth (Spain or abroad), and children's age, expressed as a continuous variable.

A  $P$ -value < 0.05 was considered statistically significant. The analysis was stratified by sex and performed using the STATA statistical software package, version 10 was used.

The final sample was made up of 209 minors, 64 with abused mothers (exposed group) and 145 with IPV-free mothers (unexposed group). The percentage of children with foreign mothers was far higher in the exposed than in the unexposed group (54.7% versus 16.5%,  $P < 0.001$ ). University educational level was more common among the mothers of the unexposed group but the difference did not reach statistical significance.

After adjusting for possible confounding variables, the probability of having mental health problems was 3.6-fold higher (95% CI 1.2–10.3;  $P = 0.018$ ) in exposed versus unexposed girls and 2.4-fold higher (95% CI 1.1–5.1;  $P = 0.027$ ) in exposed versus unexposed boys (Table 1).

As against the comparison group, exposed girls had an almost three-fold higher frequency of behavioral problems ( $P = 0.003$ ), a 2.5-fold higher frequency of emotional problems ( $P = 0.051$ ), and a 2.2-fold higher frequency of inattention/hyperactivity problems ( $P = 0.030$ ); exposed boys had a 2.2-fold higher frequency of peer problems ( $P = 0.051$ ).

The results of this study show that the children of mothers exposed to IPV have a higher likelihood of having mental health problems than do other minor children, in line with the bulk of the literature on the subject.<sup>2–4</sup>

Girls appear to be more vulnerable to the consequences of IPV: the magnitude of association with the total SDQ score is

**Table 1 – Prevalence ratio of mental health problems in boys and girls and exposure to IPV.**

Variables of mental health	Boys		Girls	
	PR <sup>a</sup> 95% CI	P-value	PR <sup>a</sup> 95% CI	P-value
High total SDQ score	2.4 (1.1–5.1)	0.027	3.6 (1.2–10.3)	0.018
Emotional problems	1.5 (0.6–3.5)	0.409	2.5 (1.0–6.0)	0.051
Behavioral problems	1.4 (0.7–2.8)	0.284	2.9 (1.4–6.0)	0.003
Inattention/hyperactivity problems	1.0 (0.5–2.1)	0.948	2.2 (1.1–4.7)	0.030
Peer problems	2.2 (1.0–5.0)	0.051	1.2 (0.5–3.1)	0.654

IPV = intimate partner violence; PR = prevalence ratios in the exposed group vs. the unexposed group; CI = confidence interval.

<sup>a</sup> Adjusted for educational level and mother's country of birth; boys' and girls' age.

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