



Original communication

Intimate partner violence against women in Spain: A medico-legal and criminological study



Antía Regueira-Diéguez^a, Natalia Pérez-Rivas^b, José Ignacio Muñoz-Barús^{a, c},
Fernando Vázquez-Portomeñe^b, María Sol Rodríguez-Calvo^{a, c, *}

^a Department of Pathology and Forensic Sciences, University of Santiago de Compostela, Spain

^b Institute of Criminology, University of Santiago de Compostela, Spain

^c Institute of Forensic Sciences, University of Santiago de Compostela, Spain

ARTICLE INFO

Article history:

Received 31 July 2014

Received in revised form

17 February 2015

Accepted 29 May 2015

Available online 11 June 2015

Keywords:

Intimate partner violence

Women

Abuse

Injury

Forensic medicine

Criminology

ABSTRACT

Intimate partner violence (IPV) is a significant worldwide problem whose magnitude and risk factors vary across different settings and cultures. Nowadays, it is a priority to improve the knowledge on this issue in order to formulate better evidence-based policy responses. This study aims to contribute to a better understanding of non-fatal IPV against women in Spain. A retrospective analysis of IPV cases with a final judicial decision was carried out. The period under study extended from January 2005 to December 2012, with a total of 582 files included in the investigation. Most IPV victims were young adult women of Spanish origin, either married or single, with children, unemployed and with a low family income level. The majority of alleged perpetrators were young adults, employed, with a middle-low income level, a history of alcohol consumption/abuse, but no criminal records. Most victims had previous history of IPV, were engaged in a long-term relationship with their abuser and lived with him at the time of assault. The combination of psychological and physical abuse was the most frequent form of violence. The most common mechanisms of assault consisted in minor acts of physical violence, which resulted in mild injuries, most of them in the upper limbs and face. Nearly half of women sought medical care, but physician's injury report was only made in about a quarter of these cases, even though it is mandatory for health professionals. The majority of criminal proceedings were initiated by the victim's report and ended in conviction, most of them being considered occasional mistreatment. This study confirms the heterogeneity of the phenomenon of intimate partner violence. The importance of adopting standard IPV concepts and promoting the recognition and assessment of this form of violence amongst health care professionals, criminal investigators and forensic personnel is emphasized.

© 2015 Elsevier Ltd and Faculty of Forensic and Legal Medicine. All rights reserved.

1. Introduction

Intimate partner violence (IPV) is one of the most common types of violence against women that occurs in all societies. It has been recognized as a global human rights and public health concern.¹ IPV is the systematic psychological, physical, or sexual abuse by a current or former partner in the context of coercive control, often escalating in severity and sometimes culminating in murder.²

Existing data indicate that IPV is a significant and widespread problem, affecting approximately one-third of women worldwide, with incidence and mortality rates increasing annually.^{3,4} In Spain, the relevance of the issue is reflected in the reform of the Spanish Penal Code, in 2003 (Law 11/2003), and in the approval of the Organic Act on Integrated Protection Measures against Gender Violence, in 2004 (Law 1/2004), which describe four types of acts that constitute punishable crime: occasional mistreatment, habitual mistreatment, coercion and threats. This new policy not only established harsher penalties for offenders, but also promoted training programs for health professionals and judges. Prevention and intervention strategies to combat this problem are now a priority in Spain.⁵ Several population-based surveys were carried out by the Women's Institute showing that 12.4% (1999), 11.1% (2002), 9.6% (2006) and 10.9% (2011) of surveyed women were abused

* Corresponding author. Institute of Forensic Sciences, Department of Pathology and Forensic Sciences, University of Santiago de Compostela, C/ San Francisco s/n, 15782 Santiago de Compostela, Spain. Tel.: +34 881 812 216; fax: +34 881 812 459.
E-mail address: msol.rodriguez@usc.es (M.S. Rodríguez-Calvo).

(physically, psychologically or/and sexually) by their male partner at some point in their lives.⁶ Nevertheless, studies conducted in the medical setting found lifetime prevalence of any type of IPV from 20 to 48.6%.^{7–9}

In addition to prevalence, information about the indicators of abuse is essential for prevention and treatment. The ecologic model of IPV considers that there is not just one causal factor but it is a result of a complex set of circumstances that interplay at different levels and can boost the violence or protect from it. This model explains that a suitable approach to the phenomena should focus on individual (victim and perpetrator), family/relationship, community and societal levels.^{2,10} It is important to recognize that risk factors may differ across cultures and that in some cases protective features in one setting may be ineffective or actually increase risk in another.¹¹ Identifying risk and protective factors for IPV that behave consistently across settings will maximize chances of intervention success and minimize those of inadvertently doing harm. Studies in various countries have identified low income, younger age, and low educational level, among others, as characteristics of women most at risk.^{12–19} In recent years, an increasing number of studies revealed a higher frequency of IPV among immigrant women, this fact being explained by their major social vulnerability.^{19–21} In addition to socioeconomic status, different studies have addressed the role of perpetrators' alcohol consumption,²² and being exposed to violence during childhood, as risk factors for IPV.²³ Furthermore, social support has consistently been described as a protective factor for IPV and its consequences.^{16,19,24} In Spain, recent studies carried out in health settings found association with marital status, number of children, women age, educational level and immigrant status.^{25,26}

Many studies have shown the magnitude of the impact of IPV on women's health and economic well-being, demonstrating that this violence has short- and long-term consequences. In fact, women who experience IPV are at increased risk of injury and death, as well as a range of physical, mental and social problems.^{27–29}

In 2005, the World Health Organization (WHO) Multi-country Study on Women's Health and Domestic Violence Against Women reported that up to 50% of women had suffered physical injuries as a result of IPV.³⁰ Injuries range from minor scratches and bruises to major injuries including lacerations, fractures, dislocations, gunshot wounds, knife wounds, and head injuries.³¹ Injuries associated with IPV are significant from both a health care and a criminal justice perspective, playing a significant role at multiple decision-making points throughout the criminal justice process. The physician's decision to report, law enforcement's decision to file a complaint, the prosecutor's decision to file charges, and the judge or jury's decision to convict are influenced by the presence or absence of physical injury.^{32,33} According to the Spanish Criminal Procedure Code (article 262), report of injuries due to violence is mandatory for health care professionals.

The aim of the present study was to contribute to a better understanding on non-fatal IPV against women in Spain, from a medico-legal and criminological perspective, by examining prosecutor's files of alleged cases of IPV. Specific aims were: to describe the socio-demographic characteristics of alleged victims and perpetrators, their relationship and circumstances of abuse; to analyze the prevalence of different types of abuse as well as the types, locations, and mechanisms of injury sustained by women who survived IPV; to study the criminological profile of alleged perpetrators and the attitude of the victims related to the prosecution of these crimes.

2. Material and methods

The present study is a retrospective analysis of cases classified as gender violence from the prosecutor's office of Santiago de

Compostela (Galicia, NW Spain). According to the Organic Act on Integrated Protection Measures against Gender Violence (article 1), this term encompasses female victims of aggression perpetrated by a current or former male intimate partner. Only cases of IPV against women with a final judicial decision were selected. The period under study extended from January 2005 to December 2012. A total of 582 files were included in the investigation.

The study has been performed under the agreement of the University of Santiago and the Galician Prosecutor's office, in accordance with ethical standards. Accordingly, all personnel involved in the current study had to sign a confidentiality agreement in order to guarantee anonymity of data and privacy rights of the people involved.

A questionnaire was developed and applied for data collection. The variables considered were:

- Socio-demographic features of both alleged victims and alleged perpetrators, such as: age, marital status, offspring, nationality, employment status, monthly family income, alcohol or drug abuse.
- Characteristics of the relationship between the victim and the alleged abuser, and history of violence prior to the current episode.
- Characteristics of the present event, such as the type of abuse, place, time and circumstances.
- Injury features such as mechanism, type and location.
- Judicial aspects, such as the process initiation form, the alleged perpetrator's criminal records and the court judgment.

All relevant records (police statement, medical and social reports) together with prosecutor and judicial decisions were analyzed for data collection. Medical information was obtained from reports written by treating doctors and/or forensic practitioner and/or copies of hospital notes, depending on the case. Almost all women assisted by a physician had a written medical report, which in many cases, victims submit with the complaint. This is different to the injury report that physicians have to send to the judge. Most women were also examined by a forensic physician and in some cases, further medical information was requested by the prosecutor or the judge. Appropriate information was gathered and included in a digital database (Excel:Mac, 2011, Microsoft®). A descriptive statistical analysis was carried out with the statistical package PASW Statistics 18.

3. Results and discussion

IPV is a political and social priority in Spain, where public awareness about this problem has increased during the last years. This study included female intimate partner violence cases from 2005 (when specific legislation on violence against women came into force) to 2012. Cases were selected through the judicial system, including only those with a judicial outcome. Prosecutor's files included many relevant documents with medical, social and juridical information, allowing a comprehensive understanding of the reality of IPV. Over the 8-year period, the distribution of 582 cases showed a slight tendency to increase between 2005 and 2011 (50, 60, 55, 83, 82, 94, 105 cases/year), declining in 2012 (53 cases).

3.1. Characteristics of alleged victims

Although intimate partner violence occurs across all segments of society,¹² some factors have been associated with an increased likelihood of victimization. Among them, individual features such as age, marital status and nationality have been linked with IPV.³ In this study, socio-demographic characteristics of alleged victims are

Download English Version:

<https://daneshyari.com/en/article/101867>

Download Persian Version:

<https://daneshyari.com/article/101867>

[Daneshyari.com](https://daneshyari.com)