

Domestic Violence, Substance Abuse and Reproductive Health

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Abstract

Domestic violence and substance abuse is on the increase all over the world. The poor and the rich are also involved in this dangerous habit. It has impact not only on reproductive health but also has impact on family, society, increase in health care expense and increased criminal activity. Health care providers are more concerned with treating the victims and less concerned on its prevention. Pregnant women bear a greater brunt and there is adverse pregnancy outcome. Low birth weight, preterm labor, increased in miscarriage and raised perinatal mortality are some of the adverse effects. Children of such parents are more likely to inherit this bad trait. Children living in abusive homes where drugs and alcohol abuse occur simultaneously are often deprived of more than just the basics of food and shelter.

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Introduction

As obstetricians and gynecologists, we do see cases of preterm labor, IUGR, low birth weight babies, abortions or mis-carriage. We do treat such cases but how often we inquire about substance abuse, tobacco use or domestic violence in such cases? Such inquiries are made in antenatal records in western countries. Unfortunately, in most emerging nations such inquiries are not made as a routine in antenatal record form. Women have been the victims of violence irrespective of geography, race, religion, education, social status or culture. Just because, Eve was created from the rib of Adam,

men seem to be considering wife as a property rather than a companion. Muscle strength and social power rules over the dependent, defenseless women. Women's body is violated and her mind tortured. Domestic violence is defined as, "Any act on the part of the husband, partner or family which causes physical, mental, social or psychological trauma to the woman and prevents her from developing her personality." Reason for the increase in domestic violence are; urbanization, industrialization, growth of urban slums, co-education and co-working in offices and factories, modern movies, television, obscene and pornographic literature and decreasing religious restrictions. Domestic violence till recently was considered as 'private issue'. Very few legal cases were filed to save family prestige. Even neighbors remained silent. Now there is increasing awareness about domestic violence. Women groups and other organizations are focusing attention on this nasty practice. Social scientists, psychiatrists and other voluntary organizations are more active as compared to ob.gyn faculty. Many countries have made laws to make domestic violence as cognizable offence. UNO declared 1975-1985 as a 'Decade of the women'. In spite of this the evil persists. According to UNFPA state of the world Population. 2005 Report, gender based violence kills and disables as many women between ages 15 and 44 as cancer, and its toll on women health surpasses that of traffic accidents and malaria combined⁽¹⁾. Unfortunately, violence by husband to his wife is accepted as natural part of culture in some countries. In USA, a woman is beaten every 15 seconds⁽²⁾. Violence between intimate partners tends to escalate in frequency and severity over time. Prevalence of domestic violence and substance abuse in AOFOG region is shown in Table 1.

Domestic violence & Substance abuse in AOFOG region		
Country	Domestic violence	Substance abuse
Australia	25%	3%
Bangladesh	65%	6 million
Indonesia	316,742 cases	17.80%
India	18-45%	Data not available
Japan	5.90%	2.76 million
South Korea		More alcoholics than any country
Nepal	48%	91,534 users
Philippines	20%	1.8 million

Table :1

Historical

Violence against woman is committed from 'womb to tomb'. Selective female feticide exists in many countries in spite of laws. Unwanted female infants are smothered to death by submerging their face in a vessel of milk. Female child is considered as burden in some countries. The birth of a female child is greeted with resentful silence; while a birth of a male child is greeted with joy⁽³⁾. The dowry system in some countries is responsible for female feticide. Bias for a male child exists in China, India, Korea, Pakistan and many other countries. There is no male bias in Japan, Singapore, Hong Kong, Australia, UK, USA and

Europe. In ancient times, when husbands go out for war or business, they used to apply a belt, a lock round the perineum. It was called 'chastity Belt'. The purpose was to prevent the woman from having illicit relations. In Middle Eastern countries, there was a custom to stuff vagina with chili powder soon after birth. This would cause intense pain, inflammation and finally causing vagina to shrink. This would give more satisfaction during coitus. Female genital mutilation is the worst type of violence on innocent female child. The ghastly system of 'Sati' was practiced in India till the last century

A study of violence against women was carried out by MATCH International⁽⁴⁾.

The summary of the study is as follows.

- 1 More than 90 million African women and girls are victims of female Circumcision**
- 2 Fifty percent of married women are regularly battered by their Partners in Bangkok**
- 3 A woman is raped every nine minutes in Mexico**
- 4 A woman is beaten every 15 seconds in USA**
- 5 One in every 10 Canadian woman will be abused by the husband or The partner**
- 6 In India, between 1978-1982, 78000 fetuses were aborted after sex Determination tests.**

Unfortunately, many Ob.Gyn experts do not routinely ask their clients about domestic violence or substance abuse. Most women in Asian countries are reluctant to admit about domestic violence or substance

abuse from male members. Violent acts include verbal, emotional and physical intimidation, forced sex, slapping, punching, kicking, burning and stabbing.(Table 2)

Types of Domestic Violence
•Fists,Stick,shoes
•Pushing,Kicking,Hitting
•Forced sex
•Burning with cigarette lighter
•Shooting, Stabbing, Sati system
•Denying Food, Education

Table2

Domestic violence has great risk to genital tract. Women experience 2 million injuries from domestic violence. In USA, vast majority of non fatal intimate partner victimization, 66% are women ⁽⁵⁾.

Domestic violence can cause injury to genital tract, infection of genital tract, menstrual disturbances, poor obstetric performance and lot of psychological insult. There is twice the risk of miscarriage and four times the risk of preterm birth with low birth weight baby

Substance Abuse

Substance abuse during pregnancy is an increasing problem in our society and sufferers are mostly women. Substance abuse in pregnancy leads to adverse obstetric outcome. In a National survey of drug abusers in USA, it was found that 34 million women between 15-44 years are substance abusers ⁽⁵⁾. Substance abuse costs the nation in lost productivity, health care expense and criminal activity. Substance abuse also increases the risk of HIV infection through needles or sexual activity. Substance abuse drugs used are – Marijuana, opium, cocaine, amphetamines, heroine, and LSD etc. There is a pithy saying, “Future is black if the sugar is brown.” Substance abuse affects reproductive health in the following way. It may cause miscarriage, placental abruption, placental insufficiency, low birth weight and increased perinatal mortality. There is increased risk of fetal anomalies, sudden infant death syndrome (SIDS) and increased risk of HIV infection and AIDS. The adverse obstetric outcome is not only due to substance abuse but it is related to poor socio-economic status, poor nutrition and lack of antenatal care

Alcohol Abuse

Alcohol consumption in various forms exists from time immemorial. The stimulating effect helped it to be recognized as a social need during festivals. Millions of people lose their lives due to alcohol related causes. This may include traffic accidents, falls, drowning, burns, and various types of cancers, cardio-vascular diseases, and cirrhosis of the liver etc. Unfortunately, alcohol consumption is considered as a sign of social status. Normally more men consume alcohol but now the habit has spread to women folks also. Alcohol consumption during pregnancy is estimated 1-2 percent in all pregnant women and one third of alcohol abusers are women in USA ⁽⁶⁾. Alcohol use is another factor which promotes domestic violence and adverse obstetric outcome. Alcohol consumption by a pregnant woman can result in fetal alcohol syndrome (FAS). It may cause learning disabilities, central nervous

system disorder, facial deformation, perception impairment and even death. Alcohol in mother's blood passes to the baby through umbilical cord. Drinking alcohol during pregnancy may cause mis-carriage, still birth and range of lifelong physical, behavioral and intellectual disabilities.

Tobacco use

People have been using tobacco since time immemorial. Tobacco is used for pleasure, relaxation, social pass time, or depression. In old times tobacco was also used hypothetically to treat bruises, toothache, earache, snakebite etc. While smoking is on the decline in developed world, it is on the increase in developing world. Smoking unfortunately was considered as sign of social status or modernism. Tobacco is not only inhaled in smoking but is chewed as well used as nasal snuff. In India, small pouches of tobacco sold under the name ‘Gutka’ find its place in the pockets of many students and also in elderly men and women. Tobacco use has become world public health issue because of the risk of mouth and lung cancer and many other diseases. Governments, health care providers, social workers are aware of the harmful effects of tobacco. Most governments have passed legislation banning smoking in public places and advertising on television or radio. As a result, since 1980 large reductions in the estimated prevalence of daily smoking were observed at the global level for both men and women. However, among high school students in UK, the percentage of those who smoke increased from 27 % in 1991 to 35% in 1995 and 35% of high school girls reported that they smoked cigarette ⁽⁷⁾. Tobacco remains a threat to the health of people, intensified efforts to control its use are needed. About 80% of the world smokers now live in low and middle income countries of Asia, and Africa ⁽⁸⁾. There was awareness about the harm of tobacco for lung and mouth cancers and other medical diseases. The risk of tobacco use for reproductive health is recognized recently.

Magnitude of the problem

Smoking pattern in some countries is shown in Table 2.

It is likely that the smoking rates are higher than what is reported by government data. World Health Organization has surmised that 200 million people smoke ⁽⁹⁾. It is projected that 20% of women will be smoking by 2025. More girls than boys smoke in Britain ⁽¹⁰⁾. Oliver Wendell Holmes wrote about tobacco use in very humorous way. He wrote

Smoking habits in some countries					
(In percentage)					
Country	Male	Female	Country	Male	Female
	%	%		%	%
Bangladesh	38	4	Malaysia	38	1
Chile	32	26	Philippines	40	8
Japan	19.3	9.7	South Korea	42.3	6.8
India	23	3	Singapore	23	4
Israel	26	14	Sri Lanka	24	1
Indonesia	57	4			

“Tobacco is a filthy weed that from the devil does proceed. It drains your purse; it burns your clothes and makes a chimney of your nose.” Smokers tend to be impulsive, arousal seeking, danger loving, risk takers who are belligerent towards authority. They drink more Tea, Coffee and Alcohol and are prone to accidents, divorce and changing jobs. Women and children are subjected to passive smoking when they come in contact with people who smoke. In developing countries, families living in shanty houses, women and children inhale the smoke of tobacco and wood fire in a closed room. British Medical Journal wrote in its Editorial, “There is a danger of this deadly habit being exported to the younger countries of Africa and Asia. Western World has a responsibility to see that this is not done. We have already produced millions of slaves to cigarette in our own land. To export this slavery to the developing world would be wrong⁽¹⁾.”

Impact of tobacco use on Reproductive health There is decreased fertility. Women who smoke also have poor response to in vitro fertilization (IVF). Smokers have increased risk of ectopic pregnancy and miscarriage⁽¹²⁾. Smoking causes ovarian dysfunction. Smoking alters characters of sperms. Men who smoke heavily generate sperms with DNA damage. This DNA damage may result in their children having high incidence of cancer. Tobacco can also cause DNA damage in germ line. It may result in low birth weight babies, preterm birth, abortion and increased perinatal mortality. British Perinatal Mortality survey shows that smoking in later weeks of pregnancy is definitely prejudicial to normal growth and survival of the fetus. Their report showed that perinatal mortality in women who smoked was 41.1/1000 births as compared to 32/1000 births in non smokers⁽¹³⁾. Smokers may experience more menstrual cramps and discomfort than non smokers. Smokers also tend to have a shorter menstrual cycle as compared to non smokers. Women, who smoke, reach menopause approximately two years earlier and have more menopausal problems like insomnia, hot flashes as compared to non smoking women⁽¹⁴⁾. Quitting smoking will reduce the risk of early menopause. Women who smoke have low bone density and are at a higher risk of bone fracture. Women, who smoke, have increased risk of developing cervical and vulva cancer⁽¹⁵⁾. There is increased risk of stroke and heart disease if the smoker is 35 years plus and is on OC pill⁽¹⁶⁾. It must be realized that not everyone who is addicted to drugs/alcohol is abusive to his partner. Likewise, not every domestic violence abuse has an issue with substance abuse or alcohol. However, statistics tell us that far too often the two do go hand in hand. Effect of poverty gets mixed up with effects of drug abuse. Many of the effects thought to be due to maternal drug use

are related to socio-economic deprivation, nutrition or associated factors such as smoking. Mother Teresa said, “Addicts should not be ostracized from society. Why they smoke is not known. So they should not be condemned. They should be made to feel that they are cared for.”

Impact on children Most heartbreaking consequence of the dual issues of domestic violence and substance abuse is what happens to their children. Children living in abusive homes where drugs and alcohol abuse occur are often deprived of basic food, shelter and love. Children are the greatest sufferers if their parents resort to domestic violence or substance abuse. Children of substance abusing parents are more likely to experience physical, emotional or sexual abuse than children who live in non substance abusing homes. It is estimated that three million children witness violent acts against mothers each year. As a result many children come to believe that behaving in a violent manner is an acceptable way. Victims of child abuse become abusing partners. (National committee on child abuse) Ob.Gyn is the only physician most women in developing countries see. Therefore, women have long standing trusted relationship with ob.gyn. Therefore, they have responsibility to play active role in preventing drug abuse, smoking and domestic violence. Ob.gyn have to be partners with other disciplines. Let us hope ob.gyn experts share the responsibility to help and guide these victims of substance abuse. Healthcare providers must also shoulder civic responsibility to educate their patients about the risk of domestic violence and substance abuse. Encourage them to attend antenatal clinics, be sympathetic to them, do not reduce the dose of substance used suddenly and observe the newborn for withdrawal symptoms. Domestic violence needs not only medical support but social awareness and government support.

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