



Strategies against domestic violence and its consequences amongst Iranian women: A review study

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Abstract

Background and aims: Domestic violence against women is a problem that might cause irreparable damage to women's health. This study aims to review the studies on the strategies regarding domestic violence against women in Iran.

Methods: This study is a narrative review of published articles on strategies to prevent domestic violence against women in Iran from 2009 to 2019. Two scholars on valid databases searched. Articles were selected based on the time and setting of studies, purpose, and research structure framework. The full text of the articles and the publication language were included in the study. The quality of the articles was assessed using the "checklist of original research articles," which comprises five sections; the structure of the abstract, the title and introduction, the review method, the results, the conclusion, and the keywords. The general opinion of the reviewer was also taken into consideration.

Results: 13 eligible articles were reviewed, including 11 in Persian and 2 in English. The finding of the reviews indicated the interventions implemented to reduce and prevent domestic violence against women in Iran. These interventions focused on life skills in three categories (a) Communication and Interpersonal Skills (such as resilience based on spirituality, mindfulness techniques, motivational interview, and emotionally focused couple therapy), (b) decision-making and critical thinking skills, including problem-solving, decision-making, narrative exposure therapy, and conflict resolution related to domestic violence against women), and (c) coping and self-management skills (such as anger management, marital adjustment, and self-defense).

Conclusion: The effective implementation of life skills can serve as practical methods to prevent domestic violence against women.

Keywords: Domestic Violence, Women, Iran

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Introduction

Violence against women appears in different situations, forms, and manifestations. Domestic violence or intimate partner violence is the most common form against women (1). Domestic violence against women is considered a violation of human rights (2) and has been reported as one of the most severe social problems that transcend cultural, social, and regional boundaries (3). Laws to prohibit violence against women have been approved in most countries, but the significant statistics of this social problem have been globally demonstrated, including in Iran (4). Domestic violence is any incident or behavior associated with physical (5), sexual, financial, or emotional threat, violence, and abuse (6). The World Health Organization (WHO) classifies domestic violence as interpersonal violence. It states that domestic violence encompasses any behavior carried out against a woman in any marital status, whether legal or illegal, with the intent to gain or exercise power (4).

Domestic violence is the most frequent and prevalent type, yet it is the least reported to the police, leading to the highest social, emotional, and economic consequences. According to WHO reports, the prevalence of domestic violence ranges from 15% in Japan to 71% in rural areas of Ethiopia. Additionally, partners are responsible for 40% to 70% of women who are murdered (7). In the United States, two million women are physically raped by their husbands, resulting in 73 000 hospitalizations and 1500 deaths (8). Obtaining accurate statistics about the prevalence of domestic violence against women in Iran is difficult due to the cultural belief that violence is a private matter, discouraging women victims from speaking out and raising awareness in society (1). Furthermore, official sources in society are reluctant to collect and disclose official statistics in this field. However, survey research in Iran revealed that 66% of Iranian women had experienced domestic violence at least once (1).

Among the underlying causes of violence against

Iranian women in the last 11 years are psychological and economic problems, alcohol abuse, COVID-19, education level, family conflicts, women's age, husband's occupation or women's employment, type of marriage (forced or voluntary), the experience of parental violence in childhood, quality of married life, differences in cultural education, family patriarchy, religious beliefs, and the criminal history of the spouse can be mentioned (9). Factors influencing domestic violence against women also include sexual dissatisfaction (10), low family and social support, economic dependence, social attitudes toward violence and women, lack of awareness of available resources (11), and power inequality within the family (12).

The types of domestic violence include mental-emotional, physical, and sexual violence. Mental-emotional violence refers to humiliation and control over the victim's behaviors, inhibiting awareness of daily issues, isolating the person from society, and interfering with relationships with family and relatives. Physical violence involves using force to harm, injure, or kill the victim. In contrast, sexual violence includes using physical force to engage in sexual behaviors against the victim's will or attempting to have intercourse with disabled individuals (8). The results of one study conducted in 28 cities in Iran showed that 66% of women had experienced domestic violence at least once in their marriage (8). It was also reported that emotional violence is the most prevalent type at 81.8%, followed by sexual and physical violence (10).

Violence against women affects their physical and mental health. It has also been recognized as a public health problem (7,11). The physical consequences of violence against women include murder, recurrent injuries, and neurological symptoms such as migraines, headaches, pain syndromes, abdominal pain, arthritis, coronary heart disease, stomach ulcers, and other gastrointestinal disorders (11,12). Additionally, domestic violence can lead to other unpleasant effects and gynecological problems such as pelvic inflammatory disease, painful sexual intercourse, AIDS, sexual harassment, vaginal bleeding, pelvic pain, and urinary tract infection (7,11-13).

Victims primarily experience the negative consequences of violence as psychological symptoms, including anxiety, depression, suicidal ideation, fear, obsession, low self-esteem, post-traumatic stress disorder (PTSD), feelings of worthlessness, and engaging in high-risk behaviors such as smoking and addiction. They may also face difficulties raising children and cannot fulfill their critical roles within the family and community. These individuals might exhibit behaviors such as running away from home, child abuse, corruption, suicide, or attempting to murder their spouse (8,11).

In Iran, women are expected to preserve their family's honor by keeping their problems within the family, and they are often advised to tolerate any difficulties in their marriage and resolve problems by themselves (14). Violence and divorce have a two-way relationship, with

effects that include a reduction in women's self-confidence, the prevalence of constant fear and worry when dealing with and facing problems, an increase in deviant behavior in the city, statistics related to children of divorce, damages caused by the lack of proper educational supervision by parents due to behavioral crises towards their children, involvement with judicial and family courts, and delays in processing filed cases. In judicial courts, one of the negative consequences of divorce caused by men's violence against women is the serious harm it causes to others.

(15). Divorce can have financial, social, and emotional consequences, especially for women. Therefore, women might prefer to stay in an abusive relationship for different reasons, such as fear of defamation, losing custody of their children, lack of social and legal support, and pressure from social norms that stigmatize divorce (16).

Several strategies have been implemented to cope with violence against women, including educational, legal, and supportive approaches. These strategies involve providing psychoanalytic training for men and women, empowering families to enhance their skills in addressing spousal violence, raising awareness and educating the community, improving premarital education, and modifying existing laws (10,17).

According to Ansari et al, promoting communication skills among women can help reduce violence against them (18). Khalili et al also found that implementing instructional interventions significantly reduced psychological anxiety among pregnant women who experienced violence (19). Cognitive-behavioral interventions have been effective in reducing anxiety and depression and increasing self-esteem among women who have experienced violence (20). Additionally, Tiwari et al demonstrated that supportive training sessions could improve mental health among Chinese women (21).

The health and welfare of women are recognized as fundamental human rights, and they are believed to impact the health and well-being of families and society. Domestic violence is currently one of the most significant and distinct forms of human rights violations, and unfortunately, women are not immune to this type of violence. Women who are victims of domestic violence cannot fulfill their crucial roles in the family and society, and they may engage in negative behaviors such as running away from home, child abuse, sexual misconduct, suicide, or even harming their spouse. This comprehensive review aims to investigate strategies against domestic violence and its consequences for Iranian women. The study seeks to provide a foundation for selecting and implementing appropriate and effective interventions, offering researchers better solutions to prevent harm to families and society.

Materials and Methods

This **narrative** review study was conducted from October to December 2019. To access studies on strategies regarding domestic violence against Iranian women,

the researchers conducted an electronic search using keywords such as violence, domestic violence, spouse abuse, intimate partner abuse, women, and Iran in the Scopus, PubMed, Web of Science, Embase, Magiran, and SID databases from 2009 to 2019. Boolean connectors and truncation symbols “OR” and “AND” were used to merge the terms and focus and expand the search. Articles were identified by evaluating the title and abstract for relevance to the review objective and then retrieving the full text for further assessment. The inclusion criteria included the time of research (2009-2019), setting of research (Iran), relevance to the purpose of the research, having a structured framework, access to the full text, intervention studies (random and non-random clinical trials, and clinical trials without a control group), and publications in Persian and English. The quality of included studies was independently evaluated by two reviewers using criteria adapted from validated tools. The checklist for original research articles (RCTs and Quasi-experiment) was used to evaluate the quality of these articles. This checklist contains 31 questions in 5 sections: a) the structure of the abstract, title and introduction (10 points), the review method (27 points), the results (13 points), the conclusion (12 points), the keywords (3 points) and the general opinion of the reviewer (20 points), the total score of the checklist is 85 (22). Reviewers compared scores and resolved disagreements before allocating a final appraisal score. Moreover, in terms of quality, the articles were divided into three categories of good (with more than 75% of the total score), moderate (with 50% to 75% of the total score), and poor (less than 50% of the total score). In the current study, only good articles with more than 75% of the total score were included (23). The quality assessment results are presented in Table 1.

Results

A total of 483 articles were assessed (Figure 1); eventually, 13 articles (11 articles in Persian and two in English) were

selected for the review process. The characteristics of these articles are presented in Table 2.

The findings of the reviews showed that the interventions to reduce and prevent domestic violence against women in Iran significantly rely on life skills. Among all the articles studied, only one investigated the effectiveness of general life skills training (32), while 12 highlighted the impact of specific life skills-related interventions on domestic violence against women. In the reviewed articles, the interventions were designed based on life skills. Therefore, the WHO classification was used to classify the results and assigned them into three categories: (a) communication and interpersonal skills, (b) decision-making and critical thinking skills, and (c) coping and self-management skills (29) as follows:

a. Communication and interpersonal skills

Amongst the articles under review, only one article (7.69%) investigated the impact of educational intervention on general life skills, including communication and interpersonal skills such as the relationship with spouse and self-confidence on domestic violence. Eight articles (61.53%) focused on interventions based on individual skills (resilience based on spirituality, mindfulness techniques, motivational interview, self-efficacy, and self-esteem) as well as interpersonal skills (emotionally focused couple therapy). These interventions, conducted through education, counseling, group discussion, interviews, empirical demonstrations, and movies, significantly reduce domestic violence and its consequences, such as anxiety, stress, and general health. In other words, self-awareness, learning techniques to control emotions, resolving doubts and ambivalence, learning coping strategies, increasing self-esteem, and establishing an empathetic relationship with one's spouse can effectively reduce intimate partner violence.

b. Decision-making and critical thinking skills

only one (7.69 %) of the articles under review highlighted

Table 1. Quality assessment of reviewed studies based on a checklist of original research articles

Study name	Introduction	Methods			Results	Conclusion	Keywords	Reviewer general opinion	Total score
		A	B	C					
Naeim et al (24)	10	13	-	7	13	10	2	17	72
Porzoor et al (25)	10	13	-	6.5	11	12	3	17	67.5
Taherifard and Mikaeili (26)	9	10.5	-	8	10	10	3	18	73.5
Pourmohamad Ghouchani et al (27)	9	11	-	8	13	12	3	18	74
Aslani et al (28)	10	12	-	8	12	12	3	19	76
Basharpour et al (29)	9	13	-	7	13	12	3	18	75
Latifi et al (30)	8	12	-	7	13	9	3	17	69
Mohammadbeigi et al (31)	9	9	-	7	13	9	1.5	15	63.5
Mahmoudian et al (32)	8	12	-	8	12	8	3	17	68
Taghdisi et al (33)	9	13	-	8	12	9	3	16	70
Ghahari et al (34)	10	8	-	6	12	10	3	14	63
Shahmoradi et al (35)	10	7	-	8	13	10	3	19	70
Orang et al (36)	10	8.5	4	8	13	12	3	17	75.5

Figure 1. Screening and Selection of the articles based on PRISMA Chart.

the impact of general life skills training interventions, including problem-solving, decision-making, and conflict resolution. Additionally, one (7.69 %) of the articles investigated the impact of narrative exposure therapy on domestic violence against women. The results of the current study indicate that, in various dimensions (e.g., mental, physical, and verbal), the rate of domestic violence decreased, and general health improved.

c. Coping and self-management skills

One (7.69 %) of the reviewed articles investigated the impact of educational interventions on general life skills, including anger management. Additionally, three articles (23.07%) evaluated the effectiveness of adaptation-based and self-management interventions, such as marital adjustment, anger management, and self-defense, on domestic violence (24,29,32). The results of this study indicated that teaching anger management skills was reported as effective in reducing domestic violence in one study. However, in another study, there was no significant change in the rate of domestic violence after the intervention. Nevertheless, marital adjustment and self-defense interventions have been shown to reduce intimate partner violence.

Discussion

In recent decades, the primary prevention of domestic violence against women, identification of abused women,

and management of these cases have been women's health priorities in many countries. Various interventions, including educational, supportive, and legal solutions, have been designed and implemented to address this significant problem of women's health properly. One of the main strengths of this study is the summation of various studies and the simultaneous presentation of proposed solutions regarding this social and health problem. However, one limitation of this study is that it only summarizes published findings. The findings of the reviews demonstrate that the interventions to reduce violence and improve the consequences of violence against women in Iran are largely based on life skills.

These strategies were divided into three areas, (a) Communication and interpersonal skills, (b) decision-making and critical thinking skills, and (a) coping and self-management skills (37). They will be examined as follows:

a. Communication and interpersonal skills

these skills belong to a group of skills that the individuals acquire, contribute to social acceptance, and lay the foundations of healthy behavior and social relationships (37,38). The studies show that spouses with good communication skills can effectively control their partner's undesirable behavior and improve their behavior. Additionally, communication skills can help increase the level of agreement between the spouses and foster

Table 2. Characteristics of the reviewed articles

Authors, Setting, Year	Objectives	Type of study	Sampling, sample size	Instrument	Findings
Naeim et al Ardabil 2016 (24)	Examination of the impact of life skills training on marital adjustment of women for the prevention of the domestic violence	Semi-empirical based on the pre-and post-test method without a control group.	Simple incidental N=91	Marital adjustment test	The findings showed that teaching life skills significantly affects the enhancement of marital adjustment ($P<0.001$). Besides, the results of the present study indicated that teaching life skills and anger management has led to a significant decrease in domestic violence amongst the study population ($P<0.001$).
Porzoor et al Shiraz 2018 (25)	Examining the effectiveness of a Spiritual Intervention on the personal and social resiliency of women victims of domestic violence.	Semi-empirical with pre -and post-test design	Available sampling N=40	Resilience Scale for Adults	The findings showed that spiritual interventions could significantly increase the average resilience score amongst women in the intervention group compared to the control group ($P<0.001$).
Taherifard and Mikaeili Ardabil 2019 (26)	Investigating the effectiveness of cognition-based mindfulness therapy on social anxiety, resilience, and emotion regulation in women victims of domestic violence.	Semi-empirical with pre -and post-test design as well as the control group	Available sampling N=32	Liebowitz Social Anxiety Scale Conner- Davidson Resilience Scale Emotion Regulation Questionnaire	There was a significant difference between the intervention and control groups' post-test scores ($P<0.001$). Also, cognition-based mindfulness reduced social anxiety and improved resilience and regulation of emotions among women experiencing intimate partner violence.
Pourmohamad Ghouhani et al Mashhad 2019 (27)	Investigation of the effectiveness of emotionally focused couple therapy on improving marital satisfaction and reducing the tendency to extramarital relationships in women affected by domestic violence	Semi-empirical with pre -and post-test design as well as the control group	Available sampling N=30	Enrich Marital Satisfaction Scale Emotionally Focused Couple Therapy (EFT)	The findings showed a significant difference between the pre-test scores in the intervention and control groups regarding marital satisfaction and tendency toward marital infidelity ($P<0.05$). Given the current study's findings, it could be asserted that emotionally focused couple therapy might improve marital satisfaction and reduce the tendency toward marital infidelity amongst women who experienced intimate partner violence.
Aslani et al Ahvaz 2016 (28)	Determining the effectiveness of Motivational Interviews (MI) in reducing violence against women referred to courts, dispute resolution councils, and counseling centers in Ahwaz.	Empirical design with post-test in intervention and control groups	Available sampling N=20	Violence against women questionnaire	The findings showed that motivational interviewing reduces physical violence ($F=6.33$, $P=0.02$) and psychological violence ($F=40$, $P=0.00$) against women. However, there was no significant difference between sexual violence ($F=3.02$, $P=0.10$) and economic violence ($F=0.83$, $P=0.54$).
Basharpoor et al Ardabil 2017 (29)	Determining the effectiveness of self-defense training on improving marital adjustment and family cohesion in women involved in domestic violence	Semi-empirical with pre-and post-test design as well as the control group	Available sampling N=30	The Revised Dyadic Adjustment Scale and Family Cohesion Questionnaire	The findings showed that teaching self-defense causes an increase in marital adjustment ($F=12.05$, $P<0.02$) and family cohesion ($F=40.92$, $P<0.01$) among women experiencing intimate partner violence. Therefore, teaching self-defense might lead to the improvement of marital adjustment and family cohesion through psychological empowerment and a reduction in the occurrence of intimate partner violence.
Latifi et al Gorgan 2011 (30)	Examining the impact of life skills training on the self-esteem of women for the prevention of domestic violence.	Semi-empirical with pre-and post-test design	Simple incidental N=91	Rosenberg's Self-esteem questionnaires	The study's results showed that the average self-esteem score changed from 5.29 to 6.64 after the intervention amongst women; in other words, teaching life skills significantly affected the promotion of self-esteem amongst the study population ($P<0.001$). They also reported a significant degree of violence after the intervention compared to before ($P<0.001$).
Shahmoradi et al Tehran 2019 (35)	Evaluation of the Effectiveness of EFT in marital violence reduction and family functioning improvement	Semi-empirical with pre-and post-test design as well as the control group	Newspaper sampling N=32	Domestic Violence Questionnaire for Women The McMaster Model of Family Functioning	There was a significant decrease in domestic violence after the intervention (-11.25 vs. -1.62, $P<0.001$). Besides, family functioning also improved after the intervention compared to the control group (6.25 vs. -1.69, $P=0.001$).
Mohammadbeigi et al Qom 2015 (31)	Determining the effect of life skill education program on the decline of domestic violence and general health score.	Semi-empirical	Available sampling N=22	Standard and Revised Domestic Violence CTS-2 Questionnaire Standard GHQ Questionnaire	The study's findings indicated that educational interventions significantly reduced the mean score of public health amongst the study population ($P<0.05$). Also, there was a statistically significant decrease in the frequency of general violence and its aspects, including verbal violence, physical and sexual violence ($P>0.05$).

Table 2. Continued.

Authors, Setting, Year	Objectives	Type of study	Sampling, sample size	Instrument	Findings
Mahmoudian et al Isfahan 2019 (32)	Evaluation of the effect of stress and anger management training program, which belonged to the Iranian Ministry of Health, Treatment, and Medical Education, on anger management among women who are prone to intimate partner violence	Semi-empirical incidental study with the control group	Sampling is not reported N=88	Violence screening checklist Anger Management Skill Questionnaire belonging to the violence prevention program	The results showed a significant increase in anger management scores in the intervention group. Pre-intervention anger management scores were 24.57 ± 9.92 and 23.2 ± 9.47 in the intervention and control groups, respectively ($P=0.470$). But, the scores were reported as 31.30 ± 6.48 in the intervention group and 23.34 ± 8.72 in the control group after the intervention ($P<0.001$). Also, there was no difference in the frequency of preventing violence in the two groups.
Taghdisi et al Gorgan 2014 (33)	Determining the effect of an educational intervention to increase self-efficacy and awareness for preventing domestic violence against women in Gorgan City, Iran.	Semi-empirical with pre-and post-test design without a control group	Simple incidental sampling N=91	Self-Efficacy Scale (GSE-10) and Awareness of Violence questionnaire	The findings showed no significant difference between the mean scores of women's self-efficacy and awareness of violence ($P<0.001$). In other words, the educational program effectively improved the mean scores.
Ghahari et al Tehran 2018 (34)	Investigating the effectiveness of mindfulness-based cognitive therapy in reducing anxiety and depression of women victims of domestic violence in Tehran	Semi-empirical with pre-and post-test design as well as the control group	Incidental sampling N=30	Beck's Depression Inventory 2 (BDI-II) Spielberger's State-Trait Anxiety Inventory (STAI)	The results showed a significant difference between the two groups regarding depression and anxiety after the mindfulness-based cognitive intervention.
Orang et al Tehran 2018 (36)	The efficacy of narrative exposure therapy on reducing PTSD and depression symptoms, improving daily functioning, reducing perceived stress and borderline symptoms, and IPV experiences among women living under ongoing domestic violence.	Randomized control trial	Not reported N=45	Post-traumatic Stress Symptom Scale—Interview, Perceived Stress Scale-4, Composite Abuse Scale, The Life Events Checklist, Modified Adverse Childhood Experiences, The Work and Social Adjustment Scale, Borderline Symptom List-23	NET participants showed a significantly more significant symptom reduction than the TAU group in PTSD, depression, and perceived stress at both follow-ups. Improvement in daily functioning and reduction of IPV experiences and borderline symptoms at 3- and 6-month follow-ups were pronounced but not significantly different between the two treatment groups.

intimacy within the family (39,40). Therefore, women must learn communication skills, particularly how to communicate with their spouses, to eliminate domestic violence. Ansari et al showed that strengthening women's communication skills can help reduce violence, especially physical violence (18). The acquisition of general life skills is considered one of the components of communication and interpersonal skills. These abilities enable individuals to act positively, adapt to relationships with others, their community, culture, and environment, and maintain their mental health. Learning life skills increases self-esteem, promotes rational expression of thoughts and feelings, reduces anxiety, improves social communication skills, fosters consideration for the rights of others, and helps individuals assert their rights, ultimately leading to increased life satisfaction and happiness (30). Previous research indicates the effectiveness of life skills on satisfaction among young couples (41) and rural married women (42).

Resilience is one of the essential interpersonal skills for coping with higher stress levels. Resilience helps individuals assess and manage stressful situations by adopting rational solutions, leading to feelings of satisfaction and self-confidence. Sincere and optimistic individuals committed to religious principles are usually more resilient (25). Hamid et al conducted a study that

showed that religion-based cognitive-behavioral therapy helped reduce depression among divorced women (43).

Mindfulness-based technique

Mindfulness allows individuals to respond to events and incidents thoughtfully rather than spontaneously (44). Mindfulness-based therapy significantly impacts the treatment and prevention of the recurrence of anxiety and depression; mindfulness exercises can also change mental patterns and improve mental health (26). The results of another study by Basharpour and Jani reported that mindfulness and emotional suppression are considered influential factors in depression and anxiety among women who have experienced violence (44). Moreover, related research indicates the effectiveness of mindfulness in reducing social anxiety, increasing resilience and regulating emotions in women who are victims of domestic violence (26), and increasing marital satisfaction (45).

Motivational interview

Motivational interviewing is considered one of the most effective treatments for reducing violence. Moser and Murphy stated that conducting motivational interviews lead to behavioral changes, such as improving responsibility and controlling the physical behavior in individuals with violent behavior (28). Zalmanowitz

et al demonstrated the effectiveness of motivational interviewing on men involved in domestic violence. Their results showed that motivational interviewing effectively changed the violent behavior of the men studied (46). Furthermore, motivational interviewing helped reduce depression symptoms among women who experienced domestic violence (47).

The emotionally focused couple therapy

Emotionally focused couple therapy is one of the practical approaches to resolving marital problems. According to this treatment model, emotions have an inherently adaptive capacity that, when activated, can help couples change their undesirable emotional expressions. Various studies investigated and confirmed the effectiveness of emotionally focused couple therapy in improving depression and increasing the quality of marital relationships (48), enhancing marital satisfaction and managing family behavior (49), increasing sexual satisfaction in couples (50), improving couples' communication patterns (51), reducing marital exhaustion (52),

improving marital adjustment and quality of life amongst infertile couples (53), and alleviating symptoms of depression and PTSD caused by extramarital relationships (54). Additionally, the results of a meta-analysis conducted in 2019 showed that emotion-oriented couple therapy interventions significantly reduced marital problems (55).

b. Decision-making and critical thinking skills

Individuals learn how to analyze the impact of their own and others' values on their decision-making process and the solutions they choose (56).

Problem-solving training

Problem-solving skills aim to find practical solutions for maintaining a healthy interpersonal relationship. Successful problem-solving reduces incompatibility and increases positive adaptation. According to evidence, couples may encounter problems in their marital relationships. Therefore, it is necessary to acquire problem-solving and coping skills to avoid conflicts and intimate partner violence. Positive problem-solving and communication skills are considered essential components of a healthy family. They can reduce conflicts, promote positive family relationships, and help families cope with internal and external stressors (57). Alamshahi et al examined the effect of problem-solving-based group counseling on the experience of violence against pregnant women. They reported that such counseling sessions significantly reduced the rate of domestic violence against pregnant women (58).

Decision-making training

Decision-making skills help individuals choose and implement the best solution from various options, considering sufficient information, awareness, and

realistic goals and accepting the consequences (56).

Conflict resolution training

Learning how to manage conflicts effectively is crucial for building strong relationships. Accordingly, in a win-win relationship, each spouse takes responsibility and seeks common ground, increasing intimacy and trust (59). Previous studies have indicated that teaching effective conflict solution strategies can help reduce emotional reactions, including depression and aggression among women (60).

Narrative exposure therapy

Narrative exposure therapy (NET) is an evidence-based, short-term treatment designed to address the repercussions of exposure to accumulative and multiple types of traumas, mainly among victims of war, torture, and organized violence. Several studies showed the efficacy and feasibility of NET in reducing PTSD symptoms and depression and improving daily function and physical health (36).

c. Coping and self-management skills

These skills help to enhance the basis of internal control, allowing individuals to learn that they can influence others and make a difference. Using coping skills to deal with violence could reduce its psychological outcomes (56). The coping and self-management skills reviewed in the current study include anger management, marital adjustment, and self-defense.

Anger management

Anger management could reduce the incidence of violent behavior among family members. It prevents adverse consequences in all aspects of life and has been identified as a health priority requiring skill acquisition (61). Mirfarlen et al showed that providing instructions and educating the women referred to the American Urban Domestic Violence Legal Unit (AUDVLU) could significantly affect the reduction of threats and physical violence (62).

Self-defense training

Self-defense training prevents violence between couples and ultimately improves appropriate interpersonal interactions. These instructions involve learning the physical actions of simple and practical actions in small groups that could be used in an attack or a conflict when other defensive options are unavailable (63). Self-defense training provides women with a new set of decisive responses leading to fighting against intimidation, threats, and various forms of domestic violence (64). Sinclair et al examined the effectiveness of a self-defense program in reducing the incidence of sexual harassment among Korean girls. They reported that respective training could reduce the occurrence of sexual harassment (65). Moreover, the results of another study by Hollander indicated that empowerment based on self-defense

education helps change the underlying conditions that increase violence against women (64).

Marital adjustment

Marital adjustment is considered one of the most critical factors influencing family functioning. It also affects the quality of parental functioning, life expectancy, health, life satisfaction, loneliness, growth, upbringing of children, social relationships, and the tendency toward social deviations. Couples that communicate effectively use constructive methods to resolve problems and conflicts. Learning life skills increases rational expression of thoughts and feelings, reduces anxiety, improves social communication skills and consideration for the rights of others, and at the same time, helps pursue their rights, eventually increasing marital compatibility and happiness (30). Previous research indicates the effectiveness of life skills on satisfaction among young couples (41) and rural married women (42).

Nurses, as an essential part of the healthcare team, could identify the causes of domestic violence against women through careful analysis of the families. They could also modify or eliminate such factors independently or with the family's cooperation, especially the spouse and other healthcare team members, to benefit from the appropriate solutions such as training, consultation, or referral to the related resources. However, the limitations of this review study are the low quality of some of the articles and the need for more access to some scientific evidence that is under publication.

Intimate partner violence was reported as a social problem and a significant concern in Iran, and it is still viewed as a private issue. Inadequate domestic violence legislation and limited access to emergency accommodation for temporary leave force intimate partner violence-exposed to suffer in silence (36). To understand the seriousness of this problem, it must be considered that the female population constitutes 49.7% of the total population in Iran. Hence, the consequences of this violence affect the whole society (66).

The current study's results could be applicable in training healthcare providers dealing with the women victims of intimate partner violence. These findings could also help caregivers, advocates, and policymakers design efficient care packages for abused women.

Conclusion

This review study showed that using and training life skills in various dimensions can effectively reduce domestic violence against women and improve its consequences. Utilizing communication and interpersonal skills such as resilience based on spirituality, mindfulness techniques, motivational interview, and emotionally based couple therapy, decision-making skills, and critical thinking, including problem-solving, decision-making, narrative exposure therapy, and conflict resolution regarding domestic violence against women, can be considered

effective strategies to prevent domestic violence. as Additionally, coping and self-management skills such as anger management, marital adjustment, and self-defense, are also effective in addressing domestic violence against women.

Authors' Contribution

xxx.

Conceptualization:

Data curation:

Formal analysis:

Funding acquisition:

Investigation:

Methodology:

Project administration:

Resources:

Software:

Supervision:

Validation:

Visualization:

Writing—original draft:

Writing—review & editing:

Competing Interests

The authors declared that there is no case of conflict of interest.

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References

1. Golmohammad R, Ghasemi Firoozabadi M, Abdoli Z, Saghia H. The effectiveness of emotion-focused therapy on psychological distress and depression of married women victims of domestic violence. *Med J Mashhad Univ Med Sci.* 2022;64(6):4338-48. doi: [10.22038/mjms.2022.20934](https://doi.org/10.22038/mjms.2022.20934). [Persian].
2. Dalal K. Does economic empowerment protect women from intimate partner violence? *J Inj Violence Res.* 2011;3(1):35-44. doi: [10.5249/jivr.v3i1.76](https://doi.org/10.5249/jivr.v3i1.76).
3. Soleiman Ekhtiari Y, Ahmadi B. A review of studies about efficacy of public health interventions for prevention of domestic violence against women. *Social Welfare Quarterly.* 2011;11(40):237-57. [Persian].
4. Rahmatifar S. Legal protection of women from domestic violence. *J Hum Rights.* 2022;17(1):165-86. doi: [10.22096/hr.2021.526306.1302](https://doi.org/10.22096/hr.2021.526306.1302). [Persian].
5. Kiriella DA, Islam S, Oridota O, Sohler N, Dessenne C, de Beaufort C, et al. Unraveling the concepts of distress, burnout, and depression in type 1 diabetes: a scoping review. *EClinicalMedicine.* 2021;40:101118. doi: [10.1016/j.eclim.2021.101118](https://doi.org/10.1016/j.eclim.2021.101118).
6. Taghdisi MH, Estebarsari F, Dastoorpour M, Jamshidi E, Jamalzadeh F, Latifi M. The impact of educational intervention based on empowerment model in preventing violence against women. *Iran Red Crescent Med J.* 2014;16(7):e14432. doi: [10.5812/ircmj.14432](https://doi.org/10.5812/ircmj.14432).
7. Semahegn A, Mengistie B. Domestic violence against women and associated factors in Ethiopia; systematic review. *Reprod Health.* 2015;12:78. doi: [10.1186/s12978-015-0072-1](https://doi.org/10.1186/s12978-015-0072-1).
8. Fakharzadeh L, Tahery N, Heidari M, Hatefi Moadab N, Zahedi A, Elhami S. Factors associated with prevalence of domestic violence in women referred to Abadan health centers in 1394. *Iran J Epidemiol.* 2018;13(4):328-36. [Persian].
9. Jafari SZ, Parvin F. An overview of types of violence

- against women in Iran between 2010 and 2021. *J Urmia Nurs Midwifery Fac.* 2022;20(4):269-79. doi: [10.52547/unmf.20.4.269](#). [Persian].
10. Kianfard L, Parhizgar S, Musavizadeh A, Shams M. Training needs assessment to design empowerment programs for preventing domestic violence against Iranian married women. *Tolooebehdasht.* 2017;16(1):108-20. [Persian].
 11. Razaghi N, Parvizy S, Ramezani M, Tabatabaei Nejad SM. The consequences of violence against women in the family: a qualitative study. *Iran J Obstet Gynecol Infertil.* 2013;16(44):11-20. doi: [10.22038/ijogi.2013.652](#). [Persian].
 12. Kazzaz YM, AlAmeer KM, AlAhmari RA, Househ M, El-Metwally A. The epidemiology of domestic violence in Saudi Arabia: a systematic review. *Int J Public Health.* 2019;64(8):1223-32. doi: [10.1007/s00038-019-01303-3](#).
 13. García-Moreno C, Jansen HA, Ellsberg M, Heise L, Watts C. WHO Multi-Country Study on Women's Health and Domestic Violence Against Women. World Health Organization; 2005.
 14. Naghavi A, Amani S, Bagheri M, De Mol J. A critical analysis of intimate partner sexual violence in Iran. *Front Psychol.* 2019;10:2729. doi: [10.3389/fpsyg.2019.02729](#).
 15. Yarinassab F, Amini K. Prevalence and types of violence against women seeking divorce referred to the Forensic Medicine Organization: a case study of Boyer-Ahmad County. *Iran J Forensic Med.* 2020;25(4):39-44. [Persian].
 16. Taherkhani S, Negarandeh R, Simbar M, Ahmadi F. Iranian women's experiences with intimate partner violence: a qualitative study. *Health Promot Perspect.* 2014;4(2):230-9. doi: [10.5681/hpp.2014.030](#).
 17. Khani S, Adhami J, Hatami A, Bani-Amerian J. A study on the domestic violence among families of Dehgholan city; with emphasis on violence against women. *Sociol Stud Youth.* 2010;1(03):67-90. [Persian].
 18. Ansari H, Golshiri P, Mostajaboldavati SR. The effect of women's communication skills on domestic violence. *J Isfahan Med Sch.* 2017;35(444):1080-7. [Persian].
 19. Khalili Z, Navaee M, Shakiba M, Navidian A. The effect of supportive-educational intervention on psychological distress in pregnant women subjected to domestic violence: a randomized controlled trial. *Hayat.* 2019;25(2):151-67. [Persian].
 20. Arroyo K, Lundahl B, Butters R, Vanderloo M, Wood DS. Short-term interventions for survivors of intimate partner violence: a systematic review and meta-analysis. *Trauma Violence Abuse.* 2017;18(2):155-71. doi: [10.1177/1524838015602736](#).
 21. Tiwari A, Cheung DST, Hui V. Improving mental health outcomes of Chinese women survivors of intimate partner violence through advocacy interventions. *Glob Ment Health (Camb).* 2018;5:e15. doi: [10.1017/gmh.2018.5](#).
 22. Ferestehnejad S, Baradaran H, Moradi Lakeh M. Validity and reliability of a checklist for critical appraisal of the original research abstracts by student peer reviewers in medical student research congresses. *J Sabzevar Univ Med Sci.* 2014;20(5):611-22. [Persian].
 23. Tao P, Coates R, Maycock B. Investigating marital relationship in infertility: a systematic review of quantitative studies. *J Reprod Infertil.* 2012;13(2):71-80.
 24. Naeim M, Rezaei Sharif A. The efficacy of life skills training on marital adjustment of women for the prevention of domestic violence. *Shenakht Journal of Psychology and Psychiatry.* 2016;3(2):21-32. [Persian].
 25. Porzoor, P, Abbasi, M, Shojaei, A. The effectiveness of spiritual intervention on personal and social resiliency of women victims of domestic violence. *J Clin Psychol.* 2018;10(2):95-105. doi: [10.22075/jcp.2018.12744.1250](#). [Persian].
 26. Taherifard M, Mikaeili N. The effectiveness of cognition-based mindfulness therapy on social anxiety, resilience and emotion regulation in women victims of domestic violence. *Thoughts and Behavior in Clinical Psychology.* 2019;14(51):17-26. [Persian].
 27. Pourmohamad Ghouhani K, Zare MR, Mandanizade Safi S. The effectiveness of emotionally focused couple therapy (EFT) on improving marital satisfaction and reduction tendency to extramarital relationships women affected by domestic violence. *Rooyesh-e-Ravanshenasi.* 2019;8(8):221-30. [Persian].
 28. Aslani K, Ahmadi M, Sodani M. Evaluating the effectiveness of motivational interview (MI) in reducing domestic violence against women referred to courts, dispute resolution councils, & counseling centers in Ahwaz. *Iran J Forensic Med.* 2016;22(3):183-91. [Persian].
 29. Basharpour S, Zabihi S, Heydari F, Mikaeili N. The effectiveness of self-defense training on marital adjustment and family cohesion in women involved in domestic violence referring to Ardabil justice. *Family Counseling and Psychotherapy.* 2018;7(2):82-98. [Persian].
 30. Latifi M, Taghdisi MH, Afkari ME, Azam K. Effect of life skills training on self-esteem and decreasing violence against women. *J Health Syst Res.* 2013;8(6):1040-9. [Persian].
 31. Mohammadbeigi A, Seyedi S, Behdari M, Brojerdi R, Rezakhoo A. The effect of life skills training on decreasing of domestic violence and general health promotion of women. *J Urmia Nurs Midwifery Fac.* 2016;13(10):903-11. [Persian].
 32. Mahmoudian SA, Golshiri P, Javanmard SM, Geramian N, Akhavan-Taheri S. The effect of anger management skills training program on women exposed to domestic violence: an interventional study. *J Isfahan Med Sch.* 2019;37(516):119-24. doi: [10.22122/jims.v37i516.11200](#). [Persian].
 33. Taghdisi MH, Latifi M, Afkari ME, Dastoorpour M, Estebsari F, Jamalzadeh F. The impact of educational intervention to increase self efficacy and awareness for the prevention of domestic violence against women. *Iran J Health Educ Health Promot.* 2015;3(1):32-8. [Persian].
 34. Ghahari S, Khademolreza N, Sadeghi Poya F, Ghasemnejad S, Gheitarani B, Pirmoradi MR. Effectiveness of mindfulness techniques in decreasing anxiety and depression in women victims of spouse abuse. *Asian J Pharm Res Health Care.* 2017;9(1):28-33. doi: [10.18311/ajprhc/2017/7644](#).
 35. Shahmoradi S, Keshavarz Afshar H, Goudarzy M, Gholam-Ali Lavasani. Effectiveness of emotion-focused therapy in reduction of marital violence and improvement of family functioning: a quasi-experimental study. *Iran Red Crescent Med J.* 2019;21(11):e97183. doi: [10.5812/ircmj.97183](#).
 36. Orang T, Ayoughi S, Moran JK, Ghaffari H, Mostafavi S, Rasoulizadeh M, et al. The efficacy of narrative exposure therapy in a sample of Iranian women exposed to ongoing intimate partner violence-a randomized controlled trial. *Clin Psychol Psychother.* 2018;25(6):827-41. doi: [10.1002/cpp.2318](#).
 37. Kurtdele-Fidan N, Aydoğdu B. Life skills from the perspectives of classroom and science teachers. *International Journal of Progressive Education.* 2018;14(1):32-55. doi: [10.29329/ijpe.2018.129.4](#).
 38. World Health Organization (WHO). *The World Health Report - Changing History.* WHO; 2004. Available in: <http://www.who.int/whr/2004/en/>.
 39. Khoshbakht A. *Relationship Between Coping Communication Skills and Domestic Violence Among Women Referring to Health Care Center* [dissertation]. Tabriz University of Medical Sciences, School of Health; 2017. [Persian].
 40. Khoshbakht A. *Relationship Between Coping Communication Skills and Domestic Violence Among Women Referring to Health Care Center* [dissertation]. Tabriz University of Medical Sciences, School of Health; 2017. [Persian].
 41. Sajjadi S, Ghaderi Sanavi, Farhoodian A, Mohaqeqi Kamal SH, Reza Soltani P, Azadchehr MJ. Effectiveness of life skills training on marital satisfaction among young couples. *Social*

- Welfare Quarterly. 2015;15(56):133-49. [Persian].
42. Kaveh Farsani Z, Ahmadi SA, Fatehizadeh MS. The effect of life skills training on marital satisfaction and adjustment of married women in rural areas of Farsan. *Family Counseling and Psychotherapy*. 2012;2(3):373-87. [Persian].
 43. Hamid N, Dehghanizadeh Z, Aedi Bayghi M. A study of the effect of religion-based cognitive-behavior therapy on depression in divorced women. *Family Counseling and Psychotherapy*. 2011;1(1):54-64. [Persian].
 44. Basharpour S, Jani S. The role of mindfulness and alexithymia in reducing depression and anxiety in women victims of spouse violence. *Shenakht Journal of Psychology and Psychiatry*. 2020;6(6):55-65. doi: [10.29252/shenakht.6.6.55](https://doi.org/10.29252/shenakht.6.6.55). [Persian].
 45. Madani Y, Hojati S. The effect of mindfulness-based cognitive therapy on marital satisfaction and quality of life in couples. *J Appl Psychol Res*. 2015;6(2):39-60. doi: [10.22059/japr.2015.54564](https://doi.org/10.22059/japr.2015.54564). [Persian].
 46. Zalmanowitz SJ, Babins-Wagner R, Rodger S, Corbett BA, Leschied A. The association of readiness to change and motivational interviewing with treatment outcomes in males involved in domestic violence group therapy. *J Interpers Violence*. 2013;28(5):956-74. doi: [10.1177/0886260512459381](https://doi.org/10.1177/0886260512459381).
 47. Saftlas AF, Harland KK, Wallis AB, Cavanaugh J, Dickey P, Peek-Asa C. Motivational interviewing and intimate partner violence: a randomized trial. *Ann Epidemiol*. 2014;24(2):144-50. doi: [10.1016/j.annepidem.2013.10.006](https://doi.org/10.1016/j.annepidem.2013.10.006).
 48. Denton WH, Wittenborn AK, Golden RN. Augmenting antidepressant medication treatment of depressed women with emotionally focused therapy for couples: a randomized pilot study. *J Marital Fam Ther*. 2012;38 Suppl 1(0 1):23-38. doi: [10.1111/j.1752-0606.2012.00291.x](https://doi.org/10.1111/j.1752-0606.2012.00291.x).
 49. Javidi N. The effectiveness of emotion-focused couples therapy (EFCT) in improving marital satisfaction and family behavior control. *Biannual Journal of Applied Counseling*. 2014;3(2):65-78. [Persian].
 50. Javidi N, Soleimani A, Ahmadi K, Samadzadeh M. The effectiveness of training of emotion management strategies according to emotionally focused couple therapy (EFT) to increase sexual satisfaction in couples. *J Health Psychol*. 2012;1(3):5-18. [Persian].
 51. Javidi N, Soleimani A, Ahmadi K, Samadzadeh M. The effectiveness of emotionally focused couples therapy (EFT) to improve communication patterns in couples. *J Res Behav Sci*. 2013;11(5):402-10. [Persian].
 52. Davarniya R, Zaharakar K, Moayeri N, Shakarami M. Assessing the performance of emotionally-focused group couples therapy (EFCT) on reducing couple burnout in women. *Medical Science Journal of Islamic Azad University-Tehran Medical Branch*. 2015;25(2):132-40. [Persian].
 53. Najafi M, Soleimani A, Ahmadi K, Javidi N, Hoseni E, Pirjavid F. The study of the effectiveness of couple emotionally focused therapy (EFT) on increasing marital adjustment and improving the physical and psychological health of the infertile couples. *Iran J Obstet Gynecol Infertil*. 2015;17(133):8-21. doi: [10.22038/ijogi.2015.3703](https://doi.org/10.22038/ijogi.2015.3703). [Persian].
 54. Karimi J, Sodani M, Mehrbizade Honarmand M, Neisi A. Comparison of the efficacy of integrative couple therapy and emotionally focused couple therapy on symptoms of depression and post-traumatic stress symptoms caused by extra-marital relations in couples. *J Clin Psychol*. 2013;5(3):35-46. [Persian].
 55. Forouzanfar A, Sayadi M. Meta-analysis of the effectiveness of emotionally focused therapy on reducing marital problems. *Armaghane Danesh*. 2019;24(1):97-109. doi: [10.52547/armaghanj.24.1.97](https://doi.org/10.52547/armaghanj.24.1.97). [Persian].
 56. **World Health Organization (WHO).** *The World Health Report - Changing History*. WHO; 2004.
 57. Taghizadeh Z, Purbakhtyar M, Daneshparvar H, Ghasemzadeh S, Mehran A. Comparison the frequency of domestic violence and problem-solving skill among pregnant women with and without violence in Tehran. *Iran J Forensic Med*. 2015;21(2):91-8. [Persian].
 58. Alamshahi M, Olfati F, Shahsavari S, Taherpour M. The Effectiveness of group counseling based on problem-solving on experiencing domestic violence among pregnant women: a clinical trial. *Soc Health Behav*. 2020;3(2):62-9.
 59. Hosseinian S, Shafeineya A. The effects of a conflict resolution skills training course on marital relationship. *New Thoughts on Education*. 2006;1(4):7-22. [Persian].
 60. McFarlane J, Malecha A, Gist J, Watson K, Batten E, Hall I, et al. Protection orders and intimate partner violence: an 18-month study of 150 Black, Hispanic, and White women. *Am J Public Health*. 2004;94(4):613-8. doi: [10.2105/ajph.94.4.613](https://doi.org/10.2105/ajph.94.4.613).
 61. Kaufman DA, Rudeen R, Morgan C. *Safe within Yourself: A Woman's Guide to Rape Prevention and Self-Defense*. Visage Press; 1980.
 62. Kelly L. *Surviving Sexual Violence*. Minnesota, MI: University of Minnesota Press; 1988.
 63. Sinclair J, Sinclair L, Otieno E, Mulinge M, Kapphahn C, Golden NH. A self-defense program reduces the incidence of sexual assault in Kenyan adolescent girls. *J Adolesc Health*. 2013;53(3):374-80. doi: [10.1016/j.jadohealth.2013.04.008](https://doi.org/10.1016/j.jadohealth.2013.04.008).
 64. Hollander JA. The importance of self-defense training for sexual violence prevention. *Fem Psychol*. 2016;26(2):207-26. doi: [10.1177/0959353516637393](https://doi.org/10.1177/0959353516637393).
 65. Nemati Sogolitappeh F, Mohamadyfar MA, Khaledian M. The effect of cognitive behavioral therapy on marital conflict and marital adjustment in addicts. *Res Addict*. 2017;11(43):11-30.
 66. Khodabakhshi-Koolaei A, Bagherian M, Rahmatizadeh M. Stress and coping strategies in women with and without intimate-partner violence experiences. *Journal of Client-Centered Nursing Care*. 2018;4(1):29-36. doi: [10.32598/jccnc.4.1.29](https://doi.org/10.32598/jccnc.4.1.29).

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