

〈ARTICLE〉

Drug Abuse and Family Violence: A Study Experience in Bangladesh

Golam Azam*

This paper is an outcome of a study undertaken on drug abuse and its consequences in the family. One of the major objectives of the study was to know the connection between drug abuse and family violence. However, the main concern of this paper is to present drug abuse and its impact in the family in terms of family violence, especially violence committed by drug abusing husbands against wives. In this paper, concept of violence and different forms of wife abuse in terms of physical, sexual, economical, emotional and spiritual maltreatment have been discussed and explained using simple descriptive statistics.

1.0 INTRODUCTION

The emerging interest in violence within the context of the family represents a challenge to the anthropological, sociological, judicial and practical theories and establishment. The existing theories and policies related to violence in the family seem inadequate both for explaining the complex nature of violence in the family and/or factors contributing to an increase in violence differ greatly. Some tend to focus on the personal characteristics of the offender (for example, medical and psychological problems, stress, and substance abuse), while others stress the relationships between individuals and society (such as the effects of unemployment or financial problems). Others focus on the personality of the victim, or on the victim-offender relationship

* Assistant Professor, Institute of Social Welfare and Research, University of Dhaka, Bangladesh, and Ph.D. Candidate at the Doctoral Program in Social Sciences, University of Tsukuba, Japan.

(traditional male/female sexual role expectations and their crisis). A consensus is emerging to consider the context of family violence as a highly complex one which cannot be adequately explained by a single factor. There are several variables and relationships related to the context, personal behavior, social ties and cultural environment that appear significant in describing and understanding this phenomenon¹. Drug use and drug abuse are, however, examined as etiological factors in the creation of violence. Many researches have consistently found strong connections between drugs and violence. Drugs and violence are seen as being related in three possible ways: the psychopharmacological, the economically compulsive, and systematic. Each of these models must be viewed, in a theoretical sense (Martindale 1959 pp. 58–59). But, there can be overlap between the three models and this overlap does not detract from the heuristic value of the tripartite conceptual framework.

The psychopharmacological model suggests that some individuals, as a result of short or long term ingestion of specific substances, may become excitable, irrational, and may exhibit violent behavior. The most relevant substances in this regard are probably alcohol, stimulants, barbiturates and PCP. (Tinklenberg 1973; Virkunen 1974; Glaser 1974; Gerson et al. 1979; Ellinswood 1971; Smith 1972; Asnis and Smith 1978; Feldman et al. 1979). Studies on violence indicate relatively high frequencies of alcohol consumption in rape (Amir 1971; Rada 1975) and homicide victims (Shupe 1954; Wolfgang 1958). Opiates may also lead to violence closely associated with irritable behavior which results from the withdrawal syndrome (Goldstein 1979).

The economically compulsive model suggests that some drugs engage in economically oriented violent crime, e.g., robbery, in order to support costly drug use. Heroin and cocaine, because they are expensive drugs typified by compulsive patterns of use, are the most relevant substances in this category. Economically compulsive actors are not primarily motivated by impulses to act out violently. Rather, their primary motivation is to obtain money to purchase drugs. Violence generally results from some factors in the social context in which the economic crime is perpetrated. Such factors include the perpetrator's own nervousness, the victim's reaction, weaponry (or lack of it) carried by either offender or victim. But a factor that is often

taken into consideration, in particular during the analysis of the offender's personality, is substance abuse. It is important and useful to examine the interactive influences of alcohol and other substance on violence. Alcohol is strongly associated with higher risks of repeated injury, recidivism, danger to the life of family members, and noncompliance with treatment. However, wife abuse in the context of family violence appears in all strata of society. But high levels of marital conflict and low socioeconomic status emerge as the primary predictors of a higher likelihood of wife abuse. Patriarchal ethos, a sexist cultural environment, and changes in the marital balance of power also seem to be important influencing factors for family violence. Many studies have shown that common gender role stereotypes are often used to explain, justify and legitimize the male abuser and even, at times, to blame the female victim for the act. This can be explained within the context of social control, which is generally based on a social structure that condones men's domination over women. Without this cultural acceptance and the structural support of men's authority over women, violence would be less effective as a means of domination. Particular case studies on marital homicide have revealed that, when perpetrated by men, it is usually an offensive act while in the case of women it is usually used as a form of extreme defense.

However, as the subject matter of this article is limited to the Bangladesh case of family violence, it is necessary to highlight this issue with relevant information within the context of Bangladesh society. Bangladesh as a developing country is characterized by overpopulation, higher rate of illiteracy, unemployment, poor rule of law, disorganized social organization, economic instability and poverty, and practice of traditional cultural values. Bangladesh society is composed of the religions such as Islam, Hinduism, Christianity and Buddhism. Among the total population of Bangladesh, 88.0 percent are Muslim, most of them abide by the rules and codes of Islam in personal, family and social life. Only 10.0 percent are Hindu and the rest of the population are Christian and Buddhist. According to the religious codes of Islam, use of any type of psychoactive drugs are completely prohibited for both sexes, male and female, although use of drugs like alcohol or marijuana are socially and religiously relaxed or accepted in Christianity, Hinduism and Buddhism. For example, in Japan

alcoholic substances and other soft drugs are culturally accepted as norm and practiced by more or less all the Japanese people regardless of sex, religion and attitude towards drugs. Japan has a relatively homogenous culture with a high sense of community values, family life, and concern for children and culture of much public drunkenness². Although rule of law is strongly exercised and executed in Japan, there are some official reported cases of family violence. Nowadays there is a growing recognition that Japanese women are also subject to violence. Culturally specific aspects of such male violence against wives in Japan include showing contempt by overturning the dinner table, a central symbol of the women's domestic role; throwing water or salt at their wives, with the symbolic meaning of making women as unclean; or husband's refusing to use condoms in a society where oral contraceptives are not easily available and women have little direct control of contraception (Yoshihama 1995). In the cases of family violence, cultural variation results in some differences in the prevalence of domestic or family violence between countries (Levinson 1989) From this view point, it is quit natural that reasons and patterns of family violence vary from Bangladesh to Japan society and other societies as well.

In recent years, many researches support that there is close connection between drug abuse and family violence. Scientific studies have revealed that the brains of impulsive offenders possess low serotonin³ levels, a chemical that is critical to the functions of the portion of the brain that control aggression or anger. In neoropsychological point of view, alcohol or other addictive drugs such as heroin and cocaine affect serotonin level drastically in the brain and depress nervous system, reduce brain arousal, particularly eroding impulse control of drug abusing persons. Thus aggression or anger develops and promotes to occur violence mostly unintentionally or without control of mood and emotions. But it is also true that serotonin is not the key to violence, nor is biology is the cause or explanation for violence. There are other factors such as environment (social, economic and cultural), social status, circumstances (e.g. unemployment, poverty), attitudes, and some learned behaviors which contribute to family violence. In addition, many people experience some particular personality traits like psychopathology, mental illness, anger, anxiety,

depression, frustration associated with alcohol and other psychoactive drug abuse, and also conflict on family matters such as dominance in exercising power and control over family properties, money and other resources and decision making in the family. These factors are very effective in the creation of family violence.

However, in Muslim community of Bangladesh, female drug use or abuse is culturally and socially hateful, stigmatized and sometimes punishable by local religious or legal authorities. The abuse of psychoactive drugs by female is culturally unacceptable in the family or social settings as well. But, very inconsiderable young females experiencing some personal, health or family troubles take drugs (usually soft drugs) mostly in hidden places violating social norms of the mainstream society. The combination of religion, history and culture in Bangladesh society is a great barrier to use drugs by female. Rather, modest and respectful behaviors to husbands by wives are central to their social acceptance. The status of Bangladeshi women is measured in terms of their contribution to the family, such as income provider, good care giver and performer of the family responsibilities. In some cases, women face troubles of enjoying power and right on their own or family properties and on decision making of family affairs like many other societies in the world. For example, a woman is not sometimes allowed to spend money as she wishes without the consent of husband. But although women are not usually in fully control of their earning, their contribution to family are respected and appreciated to increase the family status and respect of their husbands as well. Women are socially taught to abide by or observe the rules, values of mainstream society so that family norms and values compatible with social and religious values are practiced and maintained to protect the family status and prestige in the broader society. Bangladesh society is of male dominance. Our society still sees women as nonviolent peacemakers, but not as aggressors against men. In some cases, women are thought of as the victims and men as the aggressors in behavioral dimension. But it is pretty unbelievable that there is no incidence of husband abuse by wives in the society. In fact, incidence of husband abuse associated with drug practice is very rare and infrequent in drug using family. Rather wives are prime victim of husband's biological, physical, financial and other forms of abuse that is directly or

indirectly associated with drug abuse requiring substantial money or fund from family or other sources, which works as predisposing factor of family violence. Many research studies have found that there is strong link between drug use and wife abuse depending on the dose, administration of drugs causing psychological irritation, alteration of mood and behavior of drug abusers. Usually the drug abusers who are psychophysically dependent on some addictive drugs and experience withdrawal symptoms are more likely to abuse their partners (male or females). In many societies, drug use by female is culturally, socially prohibited and sometimes stigmatized or punishable, and some societies accept the use of psychoactive drugs like alcohol, marijuana for both sexes, male and female. But the problem points to the fact that females are biologically more susceptible and exposed to drugs than male and experience psycho-behavioral problems and exert harmful impact on the family as well as on society. In a social setting, social norms and values regarding drug use are very influential factors that allow or disallow the females taking drugs. It also places influences on structural relationship in family and community level. Consequently, abusive relationship between the spouses develop and turn it to family violence.

In many societies, wives are abused in terms of verbal, physical, emotional and economical maltreatment. Generally, wives as female are physically weaker than male, sometimes dependent biologically and economically on husbands and cannot dare go against husband due to fear of being abused further with the experience of miserable life situations. Drug abusing family is, however, characterized by financial instability, taking away money from basic things for family, poor communication between drug abusing husband and wife, lack of economic insecurity and emotional support in the family, dissatisfaction of children's needs and their involvement in deviant activities. May be drug abuse is one important factor of many that cause family violence, especially violence against wife by drug using husbands. Drug abuse itself is a social vice, which is closely associated with family conflict on enjoying power and rights on money and other family resources by wives. It helps to exploit wives by abusing husband in a variety of ways, that ultimately works as a force to lead the family relationship into troubles.

2.0 CONCEPT OF FAMILY VIOLENCE

An awareness of power differences based on gender and other factors is essential for understanding family violence. Usually the person using violence is already in a position of greater power and the people being violated or controlled have less power to resist or remove themselves from the situation. In defining violence, the nature of the relationship between the parties (husband, wife and other members in the family) is important. Generally it involves behavior towards the members of one's family, including by marriage or blood ties, de facto relationships or relationships of a similar nature. The setting is also relevant when the parties are or have been living together. But the relevant relationships are characterized by emotional and other intimacy and the degree of trust. However, violence can be defined as an 'explosion of energy.' Violence, according to Webster's Dictionary, is an exertion of any physical force so as to injure or abuse. In this sense, family violence often refers to the intention of the man using violence to exert power and control. The intention can be to harm or intimidate in order to control. It can also involve causing harm out of revenge or as punishment. The intention of misuse of power and control is an important factor in family violence. But certain behavior is still violent or controlling even the husband is not consciously aware on a given occasion of any intention to exert power or control. It is still violent or controlling even if he says he feels powerless himself or is not aware that the behavior is violent or controlling⁴.

However, family violence includes the many different forms of abuse, mistreatment or neglect that adults or children may experience in their intimate, kinship or dependent relationships. Family violence denotes actions taken by parents, care givers, or other family members that cause physical, emotional, or psychological trauma, impair normal development, threaten personal safety, or create an atmosphere of danger. It includes but is not limited to child abuse, spousal battering and rape, murder, assault, enslavement, mental torture, kidnapping, stalking, addiction, and endangerment of health. It is the use or misuse of power over others who cannot defend themselves because they are weaker or smaller. In violent families, physical

force is usually the primary force is usually the primary means of asserting parental control, solving conflicts, and venting rage, anger, disappointment, and low-self esteem in the name of administering punishment. Family violence can also take a sexual form and behaviors that involve emotional violence or abuse. Emotional violence takes the form of shaming and humiliating behaviors⁵. Some common types of family violence include spousal abuse, child abuse (including physical abuse, sexual abuse and exploitation, neglect, and emotional abuse), dating violence and abuse of older adults. All types of family violence have serious and sometimes fatal consequences for victims also⁶.

3.0 METHODS OF THE STUDY

This paper is based on data taken from a survey research undertaken in Rajshahi, a metropolitan city in Bangladesh. The study is of survey design and, therefore, followed the principles and techniques of survey study especially with reference to data collection and analysis, and presentation of the study findings as well. Population: Families, which belonged to at least one active regular drug abuser (drug dependent person) regardless of age, sex and occupation, constituted the population of the study. Sample: A multistage cluster sampling procedure was used in selecting the sample of the study. Firstly, the city consisting of 30 wards (administrative unit) was divided into 10 clusters on the basis of more or less homogeneity of drug abuse prevalence and its negative consequences in the families facing drug abuse problem. From the 10 clusters, three were selected randomly (using lottery method of selection) as an area for the study. Secondly, a sampling frame, a list of families having drug abuser was prepared with the help of local community people, local medical doctors, and staff of drug treatment centers, and even some drug abusers who were willing to provide information for the study. Thirdly, from the prepared list of families (population), the sample of the study was selected. Two hundred families were selected as sample following convenience sampling (a type of nonprobability sampling)

procedure⁷ from which data were collected especially considering accessibility of the interviewers to the families of drug abusers. Techniques of Data Collection: Both quantitative and qualitative techniques of data collection were used in the study. Data for the study were collected in 2002. The study was a composite of interview, observation, and focus group discussion. Interviewing the head of the family who had authority on finance, properties, and family decision making and did not use drug or anybody else in the family (in the case of family head's drug abuse) who were knowledgeable and able to provide information about the consequences of drug abuse in the family were primary source of data. Data were collected using face to face interviews with a structured questionnaire. In addition, in order to gather qualitative data, in-depth interviews, focus group discussions were carried out as supplementary methods. Moreover, partial participant observation was undertaken in the case of observing drug behavior and other issues related to drug habit especially with the willingness and cooperation of drug abusers, where they usually congregated to take or purchase drugs. Data Analysis: Both quantitative and qualitative techniques of data analysis were used. As the study is of survey design, descriptive statistics has been used in data analysis. Data of the study have been tabulated and analyzed using SPSS.

4.0 DRUG ABUSE AND FAMILY VIOLENCE

In the present study, violence related with drug use and abuse were found in a variety of forms. Most of the violence resulted from multiple domains such as behavioral, demographic, environment and socio-economic conditions, which contributed to the development and involvement in various kinds of violent behavior. The strong links between violence, drug use and abuse were observed in the study. Family violence associated with drug abuse and its different forms, causes and others variables have been discussed in the following tables.

TABLE: 1 MAJOR CAUSES OF FAMILY VIOLENCE

| Causes of Family Violence | Frequency | Percent | Valid Percent | Cumulative Percent |
|---|-----------|---------|---------------|--------------------|
| Felling of frustration, envy, rejection | 10 | 5.0 | 7.1 | 7.1 |
| Drugs interfering with control mechanism of impulses | 11 | 5.5 | 7.8 | 14.9 |
| Economic hardship and intrafamilial conflict | 36 | 18.0 | 25.5 | 40.4 |
| Drug abuse and brain malfunctioning that stimulate violent behavior | 43 | 21.5 | 30.5 | 70.9 |
| Drug abuse and demanding money from family members | 41 | 20.5 | 29.1 | 100.0 |
| Total | 141 | 70.5 | 100.0 | |
| N. A.* | 59 | 29.5 | | |
| Total | 200 | 100.0 | | |

* N. A. stands for "No Answer" meaning that the respondents did not answer the questions.

Table 1 indicates the major causes of family violence. About twenty six percent respondents reported that economic hardship and intrafamilial conflict was found to be one of the major causes of family violence. Usually drug abusers need money for drugs and they are, because of psychophysical dependence, compelled to collect money either from family or other sources outside family using legitimate or illegitimate means of procuring money. Because of gradual economic insolvency, drug abusers develop some typical behaviors that stimulate to do irritable, irrational and violent behavior in different circumstances of life. About 31.0 percent respondents reported that major causes of family violence were drug abuse and uncontrolled impulse and stimulating brain functioning. Drugs containing some toxic chemicals affect the normal brain functioning and develop certain abnormal behaviors that violate the conventional family norms and abuse persons in a variety of violent form. Scientific biological and neurological studies on violent behavior have found that the brains of impulsive, violent offenders typically possess low levels of serotonin, a chemical that is important to the functions of the portion of the brain which controls aggression. Scientists speculate that lack of serotonin in the brain may serve to stimulate

aggression in some individuals, thereby assisting them in making dramatic changes in their social status and circumstances. It has also been scientifically determined that serotonin levels in the brain can be dramatically affected by alcohol, and alcohol depresses the nervous system and reduces brain arousal, generally eroding such an individual's impulse control⁸. Thus malfunctioning of brain helps in the creation of physical abuse by drug abusers. In addition, feeling of frustration, rejection, envy and other emotional problems among the drug abusers were found as contributing factors of family violence. Of the total respondents, 29.5 percent did not answer the questions asked about family violence. Because they were supposed to be much conscious about the image, dignity and prestige of family, and some of the respondents were frightened of being abused by drug abusing persons if they disclosed the private matter of drug abusers.

4.1 PHYSICAL ABUSE TO WIFE

Global concern with the widespread nature of gender-based violence against women has resulted in a series of international recognition and declarations, increased research on the topic and wider mass media coverage of the links between gender and violence. There is now a general recognition that women around the world are victims of various forms of gender-based violence and that this situation inhibits women's equality with men. The traditional tendency to consider women as subordinate to men has led to a perception of justification of traditional practices and gender-based violence, such as domestic and family violence, as a form of control or "protection" of women.

Many violent acts, in particular those occurring within domestic sphere, are not recognized as crimes and do not appear in official statistics. Despite the fact that family violence appears to be frequently practically everywhere, it is also one of the most underreported offences. Furthermore, studies in both industrialized and developing countries show that acts that are reported are often not treated as crimes

and simply regarded as family and private affairs. As a consequence, women victimization involves unequal application of, and access to support and effective legal measures to deal with the issue (Angela Patrignani⁹). Physical abuse is, however, one of the forms of family violence and is perhaps the most commonly recognized form of wife abuse that includes slapping, punching, kicking, stabbing, hair-pulling, twisting arms, biting, tripping, knocking down, scratching, pushing, throwing down, physical coercion, using weapons to threaten or assault her, using marital arts or wrestling, abandoning her in a dangerous places and the like. In the study, husbands who were drug dependent were found to abuse their wives physically in different ways.

TABLE: 2 PHYSICAL ABUSE TO WIFE

| Physical Abuse | Frequency | Percent | Valid Percent | Cumulative Percent |
|--|-----------|---------|---------------|--------------------|
| No physical abuse | 65 | 32.5 | 33.9 | 33.9 |
| Pushing, slapping, or punching | 93 | 46.5 | 48.4 | 82.3 |
| Kicking | 3 | 1.5 | 1.6 | 83.9 |
| Throwing objects and injuries | 6 | 3.0 | 3.1 | 87.0 |
| Deprivation of basic things (food, water, cloths) | 16 | 8.0 | 8.3 | 95.3 |
| Using weapons against wife | 9 | 4.5 | 4.7 | 100.0 |
| Total | 192 | 96.0 | 100.0 | |
| N. A.* | 8 | 4.0 | | |
| Total | 200 | 100.0 | | |

* N. A. stands for "No Answer" meaning that the respondents did not answer the questions.

Table 2 shows that about 40.0 percent drug abusing husbands did not abuse their wives physically. Of the total drug abusers, 48.4 percent were found to be involved in physical abuse. They usually abused their wives especially using multiple ways of physical maltreatment such as pushing, slapping, or punching, kicking and so on. In addition, 8.0 percent drug abuser abused their wives by not providing adequately basic things for survival. Usually wives were found to be deprived of life saving substances like food, water, and other important necessities. The reason of this type of physical abuse lies in the fact that wives were not able to satisfy the demands

of drug abusers, such as money for drugs, wives' personal assets or resources for selling and purchasing drugs. Sometimes drug abusers were found to use verbal threat and even weapons to force wives giving their money, assets and to do something related to satisfying their needs associated with drug practice. Only 4.0 percent respondents (mostly wives) did not answer the questions asked about physical abuse. Due to fear of being physically tortured more by drug abusing husbands, wives were not found to disclose the secret matters of family.

4.2 SEXUAL ABUSE TO WIFE

Drugs and sexual abuse are closely associated. Sexual abuse caused by drug abuser depends on the pattern of use, types and doses of drugs, ways of administration, and chemicals in drugs that affect the central nervous system and sexual organs. Usually different psychoactive drugs have a variety of effects on human body and mind. Some drugs energize, speed up, or "stimulate" signals passing through the central nervous system (CNS), that is, the brain and spinal column. Drugs which stimulate CNS and affect normal brain functions are amphetamine, methamphetamine, and cocaine.

In the case of family violence, however, women are at a greater risk of abuse within the family than outside. Almost the majority of assaults (sexual or physical) against women occur in the home and home assault usually represents the more serious type of violence¹⁰. Generally speaking, males are the predominant perpetrators of family violence while female are the main victims. This is also true that violence is usual phenomenon by husbands to wives with reference to drug abuse and family violence. Although sex between a husband and wife is generally supposed to be beautiful and satisfying emotionally as well as physically, sexual abuse is using a wife for husband's own sexual desires without considering physical or emotional needs of wife. It is hard to think that husband can also sexually abuse his wife because it is taken for granted that the wife's body belongs to the husband¹¹.

However, sexual violence or abuse includes forcing her to have sex or do sexual things against her will; physically assaulting the sexual parts of her body; treating her like a sex object; threatening her if she would not submit to sex; talking about her in a sexual way to others; depriving her of clothing in public places; insisting she gets pregnant so that she will become more dependent upon the abuser or feel that she can not leave; calling her sexual names; making demeaning remarks about her gender; accusing her of sexual promiscuity or of having sex with others, blaming her for sexual dysfunction or for 'boring' or dissatisfying sex¹².

TABLE: 3 SEXUAL ABUSE TO WIFE

| Sexual Abuse | Frequency | Percent | Valid Percent | Cumulative Percent |
|----------------------------------|-----------|---------|---------------|--------------------|
| No sexual abuse | 37 | 18.5 | 19.3 | 19.3 |
| Unwanted sex with partner (wife) | 23 | 11.5 | 12.0 | 31.3 |
| Rape | 17 | 8.5 | 8.9 | 40.1 |
| Withholding of sex or affection | 13 | 6.5 | 6.8 | 46.9 |
| Denial of wife's sexuality | 102 | 51.0 | 53.1 | 100.0 |
| Total | 192 | 96.0 | 100.0 | |
| N. A.* | 8 | 4.0 | | |
| Total | 200 | 100.0 | | |

* N. A. stands for "No Answer" meaning that the respondents did not answer the questions.

Table 3 clearly indicates that 12.0 percent drug abusers were found to abuse their wives who were not willing to engage in sexual intercourse. Of course, this type of sexual intercourse may be defined as having sex with wife by force, or threat of force without consent of wives. About 9.0 percent abusers were found to commit rape with wife which may be defined as marital rape. Marital rape can be defined as any unwanted intercourse or penetration (vaginal or anal) obtained by force, threat of force, or when the wife is unable to consent for having sex (Bergen 1996; Pagelow 1992; Russel 1990). Rape in marriage is an extremely prevalent form of sexual violence among drug abusers. Studies indicate that women who are involved in physically abusive relationships may be especially vulnerable to rape by their husbands (Bergen 1996; Browne 1993; Campbell 1989).

About 7.0 percent drug abusers were found to be reluctant or withholding sex with their wives. Because they were found to extremely concentrate on the drugs of regular use, and drug money without carrying out family responsibilities and satisfying biological and sexual needs of wives. It is surprising to note that a large number of drug abusers (53.0 percent) were found to deny sexual demand of their wives. The important reason of denying sex of wives were supposed to be partial or fully sexual impotence of the drug abusing husbands. Most of them who were found to use highly addictive drugs like heroin and some injecting drugs experienced dysfunction of sexual organs. For this reason, they were found to be frightened or shameful to their wives with reference to sexual intercourse. They were also found to resort to denial of sex with wives as a defense mechanism through which they avoided their wives and their sexual desires.

Of the total respondents, only 4.0 percent (mostly wives) did not answer the questions about sexual abuse due to fear of being sexually or physically abused by husbands. Some also did not answer the questions because they felt very shame to express their private family matters to other persons coming as unknown outsider.

4.3 EMOTIONAL ABUSE TO WIVES

Drug abuse helps developing some "typical behaviors" among the drug dependent persons mainly because of psychoactive effects of addictive drugs and their medical consequences on human body and mind. The drug abusers who abuse hallucinogens and stimulants experience loss of memory, perceptual distortion and loss of balance between what they think and what they do. Mostly because of unconsciousness with regard to anything related with drug abusers' feelings, thought and activities, they commit a wide variety of abusive acts either with wives or any other members in the family. Sometimes drug abusers who take excessive doses of marijuana and alcohol experience substance use disorders and psychiatric disorders that contribute to developing abusive behaviors with anybody, especially wives and

children in the family¹³. Due to abuse of some mind altering substances (especially hallucinogenic or stimulant drugs) most of the drug abusers experience loss of balance in terms of behavior and relation with wives. Because of abnormality in psychological balance and behavior, drug abusers usually abuse their wives emotionally. Emotional abuse is the most harmful type of abuse other than life threatening physical abuse. It is the most likely to be undetected and unreported because the scars are hidden.

Emotional abuse are those behaviors that include putting wife down; calling her name; making her think she is crazy; always wrong, stupid, ugly; belittling her feelings, opinions and reactions; degrading or demeaning her; dehumanizing and humiliating her; making her feel guilty if she fails to make the abuser happy or if she fails to manage all the details of the lifestyle that the abuser has labeled her responsibility; criticizing and ridiculing her parental abilities or the way she views herself as a wife or as a woman; instructing her in how to dress or conduct herself; convincing her that if she leaves, authority figures (i.e., judges, law enforcement, medical personnel, employers, social workers, etc.) will not believe her tales of abuse and will support the batterer's agenda (to take custody of the children, retain material assets, etc.); withholding approval or affection as punishment¹⁴.

Table 4 shows that about 35.0 percent drug abusers were found not to provide love and affection to their wives properly. Their highest concentration was only on drugs they regularly used as well as on collecting funds for drugs. The drug abusers who were having psychophysical dependence were not found to carry out family responsibilities properly. That was one of the reasons for disrespecting and neglecting their wives.

About 34.0 percent drug abusers misbehaved with their wives in a variety of manners. They did not care to call their name or abuse verbally with rude voice that usually hit the heart and emotion of wives. In the study, wives who did not have any job or source of personal income and were completely dependent on husbands in terms of economic and biological security were found to experience deplorable and painful situations of life. They were abused by husbands in terms of deprivation of enjoying personal rights, interests, pleasures and activities inside or outside family. Some drug

TABLE: 4 EMOTIONAL ABUSE TO WIFE

| Emotional Abuse | Frequency | Percent | Valid Percent | Cumulative Percent |
|--|-----------|---------|---------------|--------------------|
| No emotional abuse | 12 | 6.0 | 6.3 | 6.3 |
| Withdrawal of affection, love | 67 | 33.5 | 34.9 | 41.1 |
| Jealousy | 1 | .5 | .5 | 41.7 |
| Denial of her right to feelings or emotions | 18 | 9.0 | 9.4 | 51.0 |
| Name-calling and word abuse | 65 | 32.5 | 33.9 | 84.9 |
| Controlling her activities | 14 | 7.0 | 7.3 | 92.2 |
| Denying her any personal pleasure or outside interests | 6 | 3.0 | 3.1 | 95.3 |
| Controlling her with fear, threats on life | 9 | 4.5 | 4.7 | 100.0 |
| Total | 192 | 96.0 | 100.0 | |
| N. A.* | 8 | 4.0 | | |
| Total | 200 | 100.0 | | |

* N. A. stands for "No Answer" meaning that the respondents did not answer the questions.

abusers abused their wives by threatening or controlled wives by using fear of physical and biological tortures as well. Only 4.0 percent respondents (mostly wives) did not answer the questions asked about emotional abuse due to fear of being deprived more of husbands' love, affection, emotional support at the time of needs or emergency. In addition, many of them did not answer the questions about emotional abuse on the grounds of being frightened to be controlled much with fear, threats by drug abusing husbands, and also of disapproval to enjoy freedom and rights in the family.

4.4 ECONOMIC ABUSE TO WIFE

Economic abuse is valuing money above one's family. The Bible says, "The love of money is the root of all evil." Not having money itself, but the love of it. That is the motivation behind this type of abuse and it is often one of the most overlooked,

because it can be explained away as frugality, or wise money management. But underneath, there is the desire to control the situation that drives the abuser to take things one step further. Economic abuse includes a variety of maltreatment such as preventing wife from getting or keeping a job; forcing wife to work; making wife ask for money (e.g. forcing to bring money from wives' parents or relatives); taking the wife's money and not allowing wife access to bank accounts¹⁵.

Economic abuse, actually, means having no access to the family's money. In some cases, the wives may live in a comfortable house, wear good clothing, have children who are well-equipped with toys and luxuries, but have no control over what is spent or saved, over what moneys come into the family, or over any decisions about what will be bought. She is allowed no money for personal use¹⁶.

Economic abuse also includes placing her on an allowance; withholding information about the state of the family's financial position, about income or about financial security; refusing to pay child support or alimony; making her beg to have her or children's basic needs; withholding the means to meet basic needs of herself or the children¹⁷.

TABLE: 5 ECONOMIC ABUSE TO WIFE

| Economic Abuse | Frequency | Percent | Valid Percent | Cumulative Percent |
|---|-----------|---------|---------------|--------------------|
| No economic abuse | 17 | 8.5 | 8.9 | 8.9 |
| Allowing wife to have no money of her own | 27 | 13.5 | 14.1 | 22.9 |
| No money for emergencies | 48 | 24.0 | 25.0 | 47.9 |
| Deprivation of basic needs (food, cloths, shelter) | 81 | 40.5 | 42.2 | 90.1 |
| Forcing her to account for and justify all money spent | 5 | 2.5 | 2.6 | 92.7 |
| Forcing to give wife's resources (ornaments, money, cloths) | 14 | 7.0 | 7.3 | 100.0 |
| Total | 192 | 96.0 | 100.0 | |
| N. A.* | 8 | 4.0 | | |
| Total | 200 | 100.0 | | |

* N. A. stands for "No Answer" meaning that the respondents did not answer the questions.

Table 5 indicates that the highest percent (42.2) drug abusers were found to abuse their wives depriving of basic things essential for biological existence and survival such as food, clothes and shelter. In the study, this type of biological deprivation was profoundly observed in the families of drug abusers, which belonged to extremely poor economic condition that were unable to provide basic things needed for the members of family. Of the total drug abusers, 14.0 percent economically abused their wives without giving any scope, authority of having money of their own. They did not give authority on family properties such as money, land, house and so on. In the study, wives who were dependent on husband's income for economic and biological security were found not to have any money that they could use and enjoy for their own satisfaction of any desires or things needed. Twenty five percent drug abusers abused their wives by not providing money in the case of emergencies, such as sickness, pregnancy and delivery, injuries related with violence, that need medical treatment. Seven percent drug abusers were found to abuse their wives by forcing to provide or hand over money, ornaments, and other valuable things salable for collecting funds for drugs and drug abuse. In fact, wives were found to experience physical and economical abuse by drug abusing husbands when they were reluctant to provide those things useful to satisfy the expenses of drugs and drug demands. Only 4.0 percent respondents did not answer the questions about economic abuse. Because they were economically dependent on husband's income for biological survival, and supposed to be frightened of being interrupted of economic security that included supply of food and other basics for survival and living.

4.5 SPIRITUAL ABUSE TO WIFE

Spiritual abuse is associated with the abuse of religious beliefs and institutional practice of religion. Spiritual abuse means that a women's spiritual beliefs are made fun of or attacked, or that she is not allowed to attend religious ceremonies. It also includes disapproval to practice her spiritual belief system; ridiculing her beliefs;

keeping her away from her source of spiritual strength; telling her that if she leaves, God will punish her; telling her that divorce is an “unforgivable sin” and proof that she is a bad woman; reinforcing beliefs that if she prays hard enough, the abuse will stop; telling her that abuse is God’s punishment on her for some misdeed; using Koranic or Bible passages to justify or support battering behavior; using Koranic passages to convince her that she has no right to deny sex or that the abuser has the “God-given” right to sex upon demand; distorting Koranic passages to make her think God created males to be powerful, authority figures and females to be submissive, inferior servants¹⁸.

TABLE: 6 SPIRITUAL ABUSE TO WIFE

| Spiritual Abuse | Frequency | Percent | Valid Percent | Cumulative Percent |
|--|-----------|---------|---------------|--------------------|
| No spiritual abuse | 184 | 92.0 | 95.8 | 95.8 |
| Breaking down belief system (cultural or religious) | 5 | 2.5 | 2.6 | 98.4 |
| Being punished or ridiculed for her beliefs | 2 | 1.0 | 1.0 | 99.5 |
| Preventing the practice of beliefs | 1 | .5 | .5 | 100.0 |
| Total | 192 | 96.0 | 100.0 | |
| Missing | 8 | 4.0 | | |
| Total | 200 | 100.0 | | |

Table indicates here that about 96.0 percent drug abusers were not found to abuse their wives spiritually. About 3.0 percent drug abusers were found to break or hurt religious and cultural belief system of their wives. Only 1.0 percent drug abusers abused their wives in terms of ridicule or punishment because of the beliefs that the wives held and practiced in their life. Only 4.0 percent did not answer the questions asked about spiritual abuse because of the fear of husband’s psychological and emotional abuse and infliction.

5.0 CONCLUSION

Drug abuse and family violence go hand in hand. Because drugs containing toxic chemicals affect and damage central nervous system and other important organs of human body. Because of malfunctioning of brain caused by misuse or non-medical use of addictive drugs, the drug abusers develop some irritative, aggressive, irrational and abnormal behaviors that entice them to involve in violent activities. Nowadays, drug abuse and a wider variety of family violence are emerging as a social problem and have got an international recognition. In view of this fact, national and international efforts to minimize the problem of drug abuse closely associated with family violence that destroys many valuable lives and undermine families have been felt to be necessary. If these efforts are initiated and successfully realized, the lives of a huge number of wives who are daily experiencing psychophysical, emotional and economic abuses by their drug abusing husbands can be saved. In this regard, families, fundamental institutions of the society, in which many problems originate should be reconstructed, and family ties, bond, communication, sharing equal right and responsibilities regardless of age, gender should be ensured for the betterment and wellbeing of women as well as of all the members in the family.

Notes and Websites

- 1 http://www.unicri.it/documentation/Issues&reports/I_R4.htm
- 2 <http://www.bciv.org/resources/newsletter/1995/fall/japan.html>
- 3 Serotonin is known as 5-hydroxytryptamine (5-HT). Serotonin is a widespread neurotransmitter that is necessary for sleep, maintaining body temperature, controlling appetite, preventing seizures, and regulating many other hormones. Serotonin also has a large effect on mood.
- 4 http://ntv.net.au/ntv_five_two.htm
- 5 http://nida.nih.gov/PDF/DARHW/335-364_Robles.pdf
- 6 See, Department of Justice Canada. Overview: Family Violence. [online] Available:

[<http://canada.justice.gc.ca/en/ps/fm/overview.html>]

- 7 Convenience sampling procedure (a nonprobability sampling) has been used in the study. Because, there was no survey of drug abuse households (families) in the study area, and population itself was unclear and unspecified. Other thing is that there was no statistics indicating the list of families that belonged to drug dependent persons.

Due to lack of clear and specified population size, and prior list of drug abuse families, I prepared a list of families (as population) having active drug abuser with help of local community people, and from the prepared list I picked up 200 families as sample for the study considering accessibility to those families from which data were collected. It is important to say here that 200 families are not statistically reliable and representative. For that reason, I cannot say that selection of sample is statistically random. Because of this limitation in sampling, I used convenience sampling procedure to select the sample for the study particularly considering accessibility to the respondents of the families of drug abusers.

- 8 <http://www.vaw.umn.edu/documents/nativeamerican/nasection1.shtml>

- 9 http://www.unicri.it/documentation/Issues&reports/I_R5.htm

- 10 <http://www.unicri.it/documentation/Issues&reports/IR4.html>

- 11 <http://www.geocities.com/Heartland/Oaks/6477/mssexual.html>

- 12 <http://www.vaw.umn.edu/documents/nativeamerican/nasection1.shtml>

- 13 <http://www.drugabuse.gov/Newsroom/03/NS-01.html>

- 14 <http://www.vaw.umn.edu/documents/nativeamerican/nasection1.shtml>

- 15 <http://www.geocities.com/Heartland/Oaks/6477/mseconomic.html>

- 16 <http://www.violentnet.org/info/genj-1.htm>

- 17 <http://www.vaw.umn.edu/documents/nativeamerican/nasection1.shtml>

- 18 <http://www.vaw.umn.edu/documents/nativeamerican/nasection1.shtml>

REFERENCES

- Amir, M. (1971). *Pattern in Forcible Rape*. Chicago: University of Chicago Press.
- Angela Patrignani. Women's Victimization in Developing Countries. United Nations International Crime and Justice Research Institute (UNICRI), Issues and Reports No. 5. [http://www.unicri.it/documentation/Issues&reports/I_R5.htm]
- Asnis, S. and R. Smith (1978). Amphetamine Abuse and Violence. *Journal of Psychedelic Drugs*. Vol. 10, No. 3. Pp. 317-177.

- Bergen, R. K. (1996). *Wife Rape: Understanding the Response of Survivors and Service Providers*. Thousand Oaks, CA: Sage.
- Browne, A. (1987). *When Battered Women Kill*. New York: The Free Press.
- Cambell, J. C. (1989). Women's Response to Sexual Abuse in Intimate Relationships. *Health Care for Women International*. Vol. 10, pp. 335-346.
- Cushman, P. (1974). Relationship between Narcotic and Addiction and Crime. *Federal Probation*. Vol. 38, pp. 38-43.
- Ellinswood, E. (1971). Assault and Homicide Associated with Amphetamine Abuse. *American Journal of Psychiatry*. Vol. 127, pp. 1170-1175.
- Feldman, H., M. H. Agar and G.M. Beschner (Eds.) (1979). *Angel Dust: An Ethnographic Study of PCP Users*. Lexington: Lexington Books.
- Glaser, D. (1974). Interlocking Dualities in Drug Use, Drug Control and Crime. In Inciardi, J. A. and C. Chambers (Eds.) *Drugs and Criminal Justice System*. Beverly Hills: Sage Publications.
- Gerson, L. W. and D.A. Prston (1979). Alcohol Consumption and the Incidence of Violent Crime. *Journal of Studies on Alcohol*. Vol. 40, pp. 307-312.
- Goldstein, P. J. (1979). Prostitution and Drugs. Lexington: Lexington Books. Getting 1981 Over: Economic Alternatives to Predatory Crime among Street Drug Users. In Inciardi, J. A.(Ed.). *The Drugs/Crime Connection*. Beverley Hills: Sage Publications.
- Goldstein, P.J. and N. Duchaine (1980). *Daily Criminal Activities of Street Drug Users*. paper presented at annual meetings of the American Society of Criminology.
- Johnson, B. D. ; P.J. Goldsten, E. Preble, J. Schmeidler, D.S. Lipton ; B. Spunt and T. Miller (1985). *Taking Care of Business: The Economics of Crime by Heroin Abusers*. Lexington: Lexington Books.
- Levinson, D. 1989. *Family Violence in Cross Cultural Perspective*. Newbury Park. CA: Sage.
- Martindale, D. (1959). Sociological Theory and the Ideal Type. In Gross, L (Ed.) *Symposium on Sociological Theory*. New York: Harper and Row.
- Pagelow, M. (1992). Adult Victims of Domestic Violence. *Journal of Interpersonal Violence*. Vol.7, pp. 87-120.
- Preble, E. and J. Casey (1969). Taking Care of Business: The Heroin Users' Life on the Street. *International Journal of Addictions*. Vol. 4, pp. 1-24.
- Rada, R. (1975). Alcoholism and Forcible Rape. *American Journal of Psychiatry*. Vol. 132. pp. 444-446.
- Russel, D. E. H. (1990). *Rape in Marriage*. New York: Macmillan Press.
- Shupe, L. M. (1954). Alcohol and Crime: A Study of the Urine Alcohol Concentration Found in 882 Persons Arrested During or Immediately After the Commission of a Felony. *Journal of*

Criminal Law, Criminology and Police Science. Vol. 44, pp. 661-664.

Smith, R. (1972). Speed and Violence: Compulsive Metamphetamine Abuse and Criminality in the Haight-Ashbury District. In C. Zarsfonetis (Ed.). *Drug Abuse: Proceedings of the International Conference*. Philadelphia: Lea and Febiger.

Swezey, R. (1973). Estimating Drug-Crime Relationships. *International Journal of Addictions*. Vol. 8, pp. 701-721.

Tinklenberg, J. (1973). Drugs and Crime. In *National Commission on Marijuana and Drug Abuse, Drug Use in America: Problems in Perspectives*. Appendix, Volume 1, Patterns and Consequences of Drug Use. Washington, DC: United States Government Printing Office.

Virkunnen, M. E. (1974). Alcohol as a Factor Precipitating Aggression and Conflict Behavior Leading to Homicide. *British Journal of Addictions*. Vol. 69, pp. 149-154.

Wolfgang, M. E. (1958). *Patterns in Criminal Homicide*. Philadelphia: University of Philadelphia Press.

Yoshihara, M. "Assessment of Culture-specific Manifestations of Male Partners' Violence: A Study in Japan". Paper presented at 4th International Conference on Family Violence, University of New Hampshire, July 1995.