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Research Article

Financial dependence and intimate partner violence (IPV) among married Syrian refugee women living in non-camp settings in Jordan

Ajita Singh[1], Nabila El-Bassel[1], Neeraj Kaushal[1], Melissa Meinhart[1], Jennifer Komos Hartmann[1], Trena Mukherjee[2], Maysa' Khadra[3], Ruba Jaber[4], Raeda Al-Qutob[4], Anindita Dasgupta[1]

[1] Columbia University School of Social Work, New York, USA, [2] Columbia University, Mailman School of Public Health, New York, USA, [3] Department of Obstetrics and Gynecology, University of Jordan School of Medicine, Amman, Jordan, [4] Department of Family and Community Medicine, University of Jordan School of Medicine, Amman, Jordan

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Background

Globally, several studies show that the prevalence of intimate partner violence (IPV) is associated with the financial dependence of women on their husbands. Limited research exists on the relationship between IPV and male partner financial dependence among refugees, especially Syrian refuge women in host countries. This paper is designed to examine the relationship between financial dependence of Syrian refugee women on their husbands in the host country and IPV perpetrated by husbands. We hypothesize that women whose financial dependence on their husbands increased in the host country Jordan as a result of displacement caused the Syrian Civil War are more likely to report experiences of IPV within the past 12 months as compared to women whose financial dependence on their husbands did not increase or change.

Methods

We recruited 507 Syrian refugee women for the project Advancing Solutions in Policy, Implementation, Research and Engagement for Refugees (ASPIRE) study using time and venue-based random sampling from health clinics in Jordan in 2018. Eligibility criteria included: being a female Syrian refugee, living in non-camp settings, and being at least 18 years of age. Women participated in face to face interviews on gendered health and mental health concerns, physical and sexual IPV in the past year, and financial dependence on their husbands. In this paper we focused on women who were married prior to the Syrian civil war (N=313). We asked if the war in Syrian increased, decreased, or did not change the financial dependence on the husband. We used multivariable logistic regression to examine the association between financial dependence and IPV, adjusting for covariates of age, education, family decision-maker in the household, marital status, number of children in the household, and Syrian governorate prior to leaving Syria.

Results

On average, women were 35.7 (standard deviation, SD=9.05) years. Nearly half (41.2%) reported a decrease in financial dependence on their husbands after the Syrian civil war. A little over one-fifth (20.5%) of the women reported an increase in financial dependence on their husbands after the Syrian civil war. More than one-third (38.3%) of Syrian refugee women in the study reported that their financial dependence on their husbands did not change. Nearly two-fifths of women (38.7%) reported experiencing IPV in the past 12 months. Participants who experienced a decrease in financial dependence had 1.99 higher odds (adjusted odds ratio, aOR=1.99, 95% CI, confidence interval=1.11-3.58) of experiencing IPV in the past 12 months. Participants who experienced an increase in financial dependence also had 1.96 higher odds (aOR=1.96, 95% CI=1.00-3.81) of experiencing IPV in the past 12 months. Therefore, we found that women whose financial dependence on their husbands either increased or decreased were both more likely to

report experiencing IPV perpetrated by husbands in the last 12 months, suggesting the possible implications of disrupted stability in a relationship in conflict situations, compared to women whose financial dependence on their husbands did not change after the Syrian civil war.

Conclusions

IPV prevention efforts in changing household dynamics among Syrian refugee married couples should be considered while developing potential economic empowerment intervention programs. As women may be more likely disclose their financial dependence changes than IPV experiences, these lessons could benefit the health and humanitarian sector in identifying women's health and protection needs.

The Syrian Civil War started in 2011 and led to 6.6 million Syrians becoming refugees, the majority of whom are women and children.[1] Syrian refugees often fled to neighboring countries, including Jordan which hosts over 668,000 Syrian refugees.[2] A number of studies show that Syrian women refugees in Jordan experience intimate partner violence (IPV), have unmet sexual and reproductive (SRH) health needs, and face barriers to access SRH services like lack of reliable information on sexual and gender-based violence (SGBV), use of family planning services, and inadequate provision of maternal health services.[3-5] In addition to these barriers, Syrian refugees experience severe economic hardships and are financially constrained.[6,7] While there is evidence that Syrian refugees contend with financial insecurities and IPV, there are limited studies exploring the association between marital financial dependence of Syrian women refugees on husbands and IPV.

The IPV has been identified among refugee women globally and Syrian refugee women is no exception.[8-18] Several social and economic factors have been attributed to IPV including age, education,[19-21] income/economic status, financial stress,[11,14,18,22-24] patriarchal norms, and exposure to violence.[11,15,17,22,25-27]

Studies in general have shown that economic dependence of a woman on husband lead to IPV.[20,28-31] However, literature also suggests women's economic independence is associated with higher IPV.[22,32-37] Globally there are mixed results whether financial dependence and economic empowerment increases IPV risks depending on the social and economic contexts.[38] It is vital to explore if women's changes in economic dependence on husbands increases the likelihood of IPV among Syrian refugee women living in Jordan.

The Theory of Gender and Power (TGP) offers a framework for understanding how changes in financial situation can lead to shifts in power dynamics, and thus changes in sexual and labor divisions between husbands and wives.[39] Studies have shown that IPV among women who were paid cash was higher compared to non-working women in Colombia, Dominican Republic, India, Iran, Nicaragua, and Peru.[38] Women who were housewives also had significantly lower IPV compared to other women in India.[38] A UNHCR study found that female headed Syrian households in Egypt experienced anxiety of their new gender roles.[40] Sudden shifts in traditional gender roles and financial uncertainty can often lead to conflict within marital relationships.[39-42] Also, studies have shown destabilization of gender norms and roles and culture of accepting spousal abuse have triggered IPV in humanitarian situations.[11,15,18,42-44] In case of Syrian refugee women in Jordan, who struggle with financial insecurity have taken new roles as families' breadwinners, which were traditionally held by men in Syrian society.[7,45] A 2016 World Bank research indicates some 90 percent of Syrian female refugees occupied as service and sales workers in their previous employment compared to 8 percent of females workers before the crisis.[7] Additionally, many Syrian refugee women, majority of study participants in our study, registered for financial support with international organizations and donors like World Food Program and UNHCR's cash assistance program, in addition to other social services focused on providing humanitarian support.[7] Therefore, fundamental shifts and tensions in structure of financial responsibilities in these families are likely to arise between refugee couples due to poverty, displacement, changes in financial dependence of women on husbands, changing gender roles and responsibilities, and lead to potential violence.[20,28-31,42]

Given the paucity of research on how change in financial dependence of Syrian refugee women on husbands after the Syrian war affect their IPV experiences in host country Jordan, we aim to examine associations between changes in financial dependence of Syrian women refugee on husbands in the host country Jordan and IPV. We hypothesize that women whose financial dependence on husbands increased are more likely to report experiences of IPV within the past 12 months than women whose financial dependence on their husbands did not increase or change. Therefore, this paper is designed to fill the gap in the literature on economic dependency and IPV among Syrian refugee women.

METHODS

PARTICIPANTS

We used data from Women ASPIRE study – a cross-sectional study that is designed to examine the health of health service-seeking Syrian refugee women living in non-camp settings in Jordan. We recruited Syrian refugee women from two non-governmental organizations primarily serving refugees using a time- and venue-based systematic sampling approach from waiting rooms at four health clinics in Amman, Zarqa, Mafraq, and Ramtha, Jordan between March and November 2018.[46] Trainings in ethical

conduct of research were provided to all research staff to administered the quantitative assessment. Inclusion criteria include being a female Syrian refugee, living in non-camp settings, and being at least 18 years of age. Women completed interviewer administered surveys that assessed gendered health and mental health concerns, physical and sexual IPV perpetrated by husbands in the past year, and change in financial dependence on their husbands as a result of the Syrian Civil War. The survey was translated from English into Arabic, and then back-translated to ensure validity of measurement tools. The study participation rate for Women ASPIRE was 84%, and 507 women were enrolled. Majority of the women reported time constraints as the reason for the refusal of their participation. All study procedures were approved by Institutional Review Boards at Columbia University and the Ministry of Health in Jordan. And all women consented to participate in the research. In this paper we restrict our sample to women who were married prior to the Syrian Civil War (N=313).

MEASURES

Financial dependence of Syrian refugee women on husbands: We measured change in financial dependence of Syrian refugee women on husbands after the Syrian Civil War. The participants who indicated changes in financial dependence on husbands after the Syrian Civil War (independent variable) were asked if the war in Syria increased or decreased the financial dependence on husbands. Change in financial dependence after the Syrian Civil War was categorized as follows: no change, decrease, and increase in financial dependence on their husbands. For regression analyses, we created a three-level variable to reflect either increase or decrease or no change in financial dependence.

IPV: We asked questions on sexual and physical IPV perpetrated by husbands in the past 12 months (dependent variable) that was measured using the conflict tactic scale (CTS).[47] Participants responded to 10 dichotomous yes/no questions on whether they experienced physical and/or sexual violence. Physical IPV questions included whether their current or most recent husband, had thrown, kicked, or broke something while arguing with her; pushed, kicked or pulled her hard; threatened her with a knife or another sharp implement; slapped her; attacked her with a stick, a belt, or another object of that kind; attacked her with household equipment (e.g., chair); tried to choke her or placed his arms around her neck in an attempt to harm her; pulled her hair or yanked her clothes. Sexual IPV questions included whether her husband had tried to have sexual relations with her without her consent (against her will), and/or had sexual relations with her without her consent (against her will). Affirmative endorsements of any physical and/or sexual IPV items were dichotomized as having experienced IPV.

Covariates: Responses to reading ability and writing ability were combined and represented in three categories: (1) no reading and writing ability; (2) reading and writing ability with ease; and (3) reading and writing ability with some difficulty. Head of the household was also combined and represented in three categories: (1) self; (2) husband; and (3) others (father-in-law, mother-in-law, brother-in-law, father, mother, brother, grandfather, grandmother, son, daughter, uncle, aunt, and other). Marital status responses were combined into two categories: (1) married; and (2) others (includes separated, divorced, and widowed). Number of children was recorded as ordinal variable. Responses to Syrian governorates were combined into fewer categories based on proximity to one another and, relatedly, similarities based on region (Aleppo or Idlib, Al-Raqqah, Deir ez-Zor, or Hasaka, Damascus or Rif Dimashq, As-Suwayda, Daraa, or Qunitra, and Hama or Homs).

STATISTICAL ANALYSIS

Univariate analyses were conducted to characterize the sample on demographic data, including age, reading and writing abilities, family decision-maker in the household, marital status, number of children in the household, and Syrian governorate prior to leaving Syria. Pearson's chi-square or Welch's *t*-test were calculated to determine the relationship between the independent variable (i.e., change in financial dependence after the Syrian Civil War) and the dependent variable (i.e., reported IPV in the past 12 months).

Descriptive statistics were used to characterize the study sample, and prevalence of experiencing IPV in the past 12 months. An adjusted logistic regression (N=313) was performed to examine associations between financial dependence and reported IPV perpetrated by husbands in the past 12 months, adjusting for sociodemographic and household characteristics like age, reading and writing abilities, family decision-maker in the household, marital status, number of children in the household, and Syrian governorate prior to leaving Syria. Financial dependence of the participants on husbands as a primary independent variable was included in the model to test the hypothesis related to the theory of gender and power that predicts women whose financial dependence on husbands increased after the Syrian Civil War are more likely to report experiences of IPV within the past 12 months than women whose financial dependence on husbands did not increase or change. The final model for this analysis was based on identification of existing factors in the literature and stepwise elimination.[15,17-21,23,33,47-49] The "IPV ever" variable was excluded from the model due to a concern for multicollinearity. All analyses were conducted using STATA version 16.0.

RESULTS

DEMOGRAPHIC PROFILE

Table 1 displays sociodemographic and other indicators by the dependent variable of husband perpetrated IPV experiences in the past 12 months for the analytical sample (N=313). On average, women were 35.7 (SD: 9.05) years and ranged from 19 to 67 years of age. More than half (62%) of women were able to read and write with ease; 23.3% of women could neither read nor write. A majority of the women were married (96.5%); only 3.5% of women

Table 1. Demographic characteristics of married Syrian refugee women residing outside camps in Jordan (N=313).

Variables	Total N (%) or Mean (SD)		IPV, 12 months (*N*=121) x (SD) or n (%)[a]		No IPV, 12 months (*N*=192) x (SD) or n (%)[a]		*P*-Value
	Mean	±SD	Mean	±SD	Mean	±SD	
Financial Dependence							**0.025***
Not Changed	120	38.34	35	28.93	85	44.27	
Decreased Dependence	129	41.21	57	47.11	72	37.50	
Increased Dependence	64	20.45	29	23.97	35	18.23	
Age	35.67	9.05	34.34	7.83	36.56	9.67	**0.035***
Writing and reading ability							0.379
No	73	23.32	27	22.31	46	23.96	
Read/write with ease	194	61.98	80	66.12	114	59.38	
Read/write with difficulty	46	14.70	14	11.57	32	16.67	
Marital status							0.637
Married	302	96.49	116	95.87	186	96.88	
Separated, Divorced & Widowed	11	3.51	5	4.13	6	3.13	
Number of children in the household	3.97	1.96	4.09	0.16	3.90	0.15	0.406
Head of the household							0.655
Self	55	17.57	23	19.01	32	16.67	
Husband	241	77.00	93	76.86	148	77.08	
Others	17	5.43	5	5.43	12	6.25	
Syrian Governorate							**0.014***
Aleppo or Idlib	69	22.04	31	25.62	38	19.79	
Al-Raqqah, Deir ez-Zor, or Hasaka	40	12.78	8	6.61	32	16.67	
Damascus or Rif Dimashq	39	12.46	13	10.74	26	13.54	
As-Suwayda, Daraa, or Qunitra	108	34.50	39	32.23	69	35.94	
Hama or Homs	57	18.21	30	24.79	27	14.06	
Time since displacement (in years)	5.80	1.42	5.78	0.10	5.80	0.15	0.920

*$P \leq 0.05$, IPV=intimate partner violence, SD=standard deviation.

were separated from their husbands, divorced, or widowed. The average number of children in the household was 4 (SD:1.96). A majority of the women (77.0%) reported their husbands to be the head of the household; whereas only 17.6% of women reported themselves to be the head of the household.

CHANGES IN FINANCIAL DEPENDENCE AND IPV

Nearly two-thirds (61.7%) of participants reported that the Syrian Civil War changed their financial dependence on husbands. Of these participants, more than two-fifths (41.2%) reported a decrease in financial dependence on husbands due to the Syrian Civil War. A little over one-fifth (20.5%) of the participants reported an increase in financial dependence on husbands due to the Syrian Civil War.

More than three-fifths (60.5%) reported a prevalence of IPV ever. A significant proportion of them (59.6%) reported experiencing physical violence ever while 9% reported experiencing sexual violence ever. About two-fifths (38.7%) reported a prevalence of IPV in the past 12 months. The vast majority (38.4%) reported experiencing physical violence while 8.6% reported experiencing sexual violence.

Of the 41.2% of the participants who reported a decrease in financial dependence, a significantly higher proportion of participants (47.1%) reported experiences of IPV relative to those who reported no change (47% vs 38%; P=0.03). Similarly, of the 20.5% of the participants who reported an increase in financial dependence, 24% reported experiences of IPV relative to those who reported no change (24% vs 18%; P=0.03). Women who reported IPV experiences were slightly younger than women who did not report IPV experiences (34 vs 37 years; p=0.04).

Therefore, the result was consistent with our hypothesis that women whose financial dependence on husbands in-

Table 2. Unadjusted and adjusted multivariable logistic regression: associations between financial dependence and intimate partner violence (IPV) among clinic attending married Syrian refugee women living in non-camp settings in Jordan (N=313).

Variable	N (%)	OR (95% CI)	AOR[A] (95% CI)
Financial Dependence (N=313)			
No Changed (Reference Category)	120 (38.34)	-	-
Decreased Dependence	129 (41.21)	1.92 (1.14, 3.25) *	1.99 (1.11, 3.58) *
Increased Dependence	64 (20.45)	2.01 (1.07, 3.78) *	1.96 (1.00, 3.81) *

[A] Adjusted for age, education (reading and writing proficiency), head of household, marital status, number of children, and Syrian governorate.
*P<0.05, IPV, intimate partner violence; OR, odds ratio; CI, confidence interval

creased are more likely to report experiences of IPV within the past 12 months than women whose financial dependence on their husbands did not increase or change. In fact, we found that women whose financial dependence on their husbands either increased or decreased were both more likely to report experiencing IPV in the last 12 months compared to women whose financial dependence on their husbands did not change after the Syrian Civil War.

Table 2 presents unadjusted and adjusted logistic regressions of associations between change in financial dependence on husbands as a result of the Syrian Civil War, and past 12-month IPV victimization. In both the unadjusted odds ratio (OR=1.92, 95% confidence interval, CI=1.14-3.25) and adjusted odds ratio (aOR=1.99, 95% CI=1.07-3.58) models, decreases in financial dependence were associated with increased odds of past 12-month IPV victimization. Similarly, in both the unadjusted (OR=2.01, 95% CI=1.07-3.78) and adjusted (aOR=1.96, 95% CI=1.00-3.81) models, increase in financial dependence were associated with increased odds of past 12-month IPV victimization.

DISCUSSIONS

To our knowledge, this is the first to examine the relationship between two key gendered inequities of health—changes in financial dependence and IPV among Syrian refugee women living in non-camp settings in Jordan. We found that IPV prevalence rate in the past 12 months among the participants was 38.7%. The physical violence and sexual violence in the past 12 months were 38.4 % and 8.6 % respectively. Findings show that the majority of participants reported changes in financial dependence on husbands after the Syrian Civil War, which was associated with higher likelihood of participants reporting past 12-month IPV victimization. These finding are consistent with previous research on economic dependency and IPV.[20,22,28-37] The results signify that economic stability in a relationship could be a protective factor and destabilization of gender roles a risk factor for IPV between married couples. This underscores the need to address the underlying changing gender roles that perpetuate IPV in humanitarian situations and vulnerability of changing financial dependence of refugee women on husbands during times of conflict and displacement through policy, practice, and research in order to prevent IPV in humanitarian settings.

This paper supports our hypothesis. We found that both increase and decrease in financial dependence was associated with increased odds of past 12-month IPV victimization (aOR=1.96, 95% CI=1.00-3.81) and (aOR: 1.99, 95% CI=1.11-3.58), respectively). These results support the literature that examines whether the increase or decrease in financial dependence benefit or hurt women and it also uniquely examines both. Our data also shows that 24% percent of the women who reported an increase in financial dependence on husbands experienced IPV relative to those whose financial dependence did not change. The result is associated with increased likelihood of IPV experiences. This finding suggests financial dependence of wives on husbands increases the risks of IPV and thus, supports the literature that suggests financial dependence hurt women.[20,28-31] The phenomenon of women experiencing IPV could be explained by wives experiencing control by husbands and the presence of attitudes of tolerance towards violence suggested by the study on the prevalence of IPV among women visiting health care centers in Palestine refugee camps in Jordan.[15]

Furthermore, 47% of the participants who reported a decrease in financial dependence on husbands also experienced IPV and was associated with increased IPV risks. This finding does not support the recent causal study done using variation in arrivals of Syrian refugees across Turkish provinces that shows decline in female earning opportunities reduces the incentives of men to use violence for rent extraction.[48] However, these findings correspond to the literature that suggests economic empowerment may increase the risks of IPV among women.[22,32-36] The decrease in financial dependence on husbands can hurt Syrian refugee women as they take up non-traditional roles of supporting the family leading to sudden shift in gender roles in a context where physical abuse is justified.[11,25,49] Therefore, financial status of women in humanitarian situations where gender roles are changing is protective in some settings but not all.

It is vitally important to understand the mechanisms and contexts within which violence occurs in order to inform culturally-tailored and effective interventions to reduce gendered inequities of health – specifically IPV. IPV prevention efforts and social norms that perpetuate violence in changing household dynamics among Syrian refugee married couples could be considered while developing potential economic empowerment intervention pro-

grams. Interventions needs to consider/understand power imbalances in a cultural context. Interventions may include mechanisms for men to handle changes in gender roles and norms. Violence mitigation efforts work best when social norms are understood. Evidence suggests that meaningful engagement with men and boys has the potential to reduce SGBV, particularly intimate partner violence.[42] Humanitarian responses and service delivery at times of dislocation therefore could be socio-culturally sensitized. The research suggests that cash incentives in Ecuador, coupled with family support and mentoring by social workers, financial literacy training and vocational support can help to reduce violence within the household, in families where IPV was previously occurring.[42] Also, as women may more likely disclose their financial dependence changes than IPV experiences, these lessons could benefit the health and humanitarian sector in identifying women's health and protection needs and developing targeted interventions. Evidence-based interventions not only protect refugee women from violence but contribute to the society by restoring their productive capacity.

This study comes with several limitations for consideration. Since our study is a one-time cross-sectional study it precludes us from asserting causality. In the future, longitudinal research may be useful in teasing apart causality. Secondly, it is hard to generalize the findings as our participants include a specific clinic attending population. Thirdly, our measurement of change in financial dependence is a three-level variable informing increase, decrease, and no change in the financial dependence, which limits our analysis. Future research should include follow up questions on stability and the level of change in wives' financial dependence on husbands for detailed analysis. Though well-trained research assistants were recruited to collect the data, social desirability bias may have influenced responses related to IPV. Given the sensitivity of IPV questions and stigma attached to IPV as well as lack of recognition of IPV in one's relationship, the study participants may have been less likely to disclose experiences of IPV, despite the provision of confidential place and adoption of careful words by using validated measures to ensure that Syrian refugee women felt as comfortable as possible to disclose IPV. However, the IPV prevalence rate in the study is within the range of 3-52% suggested by multi-country studies. In fact, the results may be an underestimation of IPV rates.[9] Also, the cross-country comparisons cited in this study on the prevalence rates of IPV and associations between women's financial dependence on husbands with IPV to put our results into perspective comes with limitations as different studies use different definitions of IPV, sample, measurements, methods, statistics, and outcomes.

Despite the limitations, the findings from this study also have important implications for IPV prevention research. To our knowledge, this is the first paper of its kind to examine the association between financial dependence on husbands and IPV among Syrian refugee women in Middle East and North Africa (MENA) and, specially, refugee women living outside of camps in Jordan. These findings reinforcing previous research identifying a mixed result on whether financial independence and economic empowerment benefits or hurts women. It addresses a gap in the literature by highlighting that navigating sudden shifts in gender roles and norms in humanitarian situations as a result of change in financial dependence of women on husbands has instrumental effect in mitigating IPV experiences. Future research and practice should examine how the change in financial dependence takes place among Syrian refugee women at the onset of arrival in host countries may change power dynamics with husbands and influence IPV experience.

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AUTHORSHIP CONTRIBUTIONS

All authors contributed to manuscript.

COMPETING INTERESTS

The authors completed the Unified Competing Interest form at http://www.icmje.org/disclosure-of-interest/ (available upon request from the corresponding author), and declare no conflicts of interest.

CORRESPONDENCE TO:

Anindita Dasgupta, Columbia University School of Social Work, New York, USA. **ad3341@columbia.edu**

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