

# The Impact of Family Risk Factors on Husband Violence Against Women During the COVID-19 Pandemic in Montenegro

TATJANA VUJOVIĆ

The Faculty of Philosophy, Danila Bojovica bb., Nikšić, The University of Montenegro, Montenegro  
Email: [tanja\\_vujovic@yahoo.com](mailto:tanja_vujovic@yahoo.com)

---

This paper presents the results of the first phase of a longitudinal study initiated during the 'first wave' of the COVID-19 pandemic in Montenegro. The research aimed to examine the influence of selected risk factors on the occurrence of physical violence against women by their husbands during the pandemic. Four risk factors were assessed: the husband's job loss, the frequency of alcohol consumption by the husband, the history of family violence, and the distribution of family responsibilities. The study was conducted on a sample of 500 adult female participants, age range 20 to 49 years. Binary logistic regression analysis revealed that the husband's job loss during the COVID-19 pandemic was significantly associated with an increased likelihood of physical violence against women. Frequent alcohol consumption by husbands, as a negative coping mechanism for stress, was found to be the strongest predictor of physical violence against women. Furthermore, a prior occurrence of domestic violence was associated with an increased likelihood of physical violence perpetrated by the husband. Findings also indicated that more equitable distribution of household responsibilities between partners correlated with a lower likelihood of physical violence against women. These results underscore the need for targeted strategies in preventing this issue.

**Keywords:** COVID-19 pandemic, physical violence against women, husband's job loss, history of family violence, frequent alcohol consumption by husband, distribution of family responsibilities

---

## INTRODUCTION

Intimate partner violence is a form of violence that can be associated with gender. It often manifests in conflicts between partners, with male violence against intimate female partners posing a significant social problem and representing a violation of women's human rights (Thomas, Bailey 2024). Estimates published by the WHO indicate that globally about one in three (30%) women worldwide have been subjected to either physical and/or sexual intimate partner violence or non-partner sexual violence in their lifetime (Violence against Women, n.d.). Approximately one in three women worldwide, or about 736 million, experiences physical or sexual violence in her lifetime (WHO 2020). Physical violence includes various manifestations of force or threat. The severity of injuries varies, from minimal and minor to

serious, severe, and functionally disabling, including fatal outcomes. The first comprehensive national studies on intimate partner violence were conducted by Statistics Canada in 1993, followed by similar studies by the Centers for Disease Control and Prevention (CDC) and the National Institute of Justice (NIJ) in the United States in 1994. These studies provided data on the prevalence and incidence of intimate partner physical and sexual violence. American findings showed that millions of Americans were affected by these forms of violence; 24.8% of women reported that an intimate partner had either raped or physically assaulted them at some point (Tjaden, Thoennes 2000). A few years later, several European countries conducted their own nationally representative studies on violence against women, including Finland in 1997 (Heiskanen, Piispa 1998), Sweden in 2000 (Lundgren et al. 2001) and Germany in 2003 (Germany, n.d.). The prevalence rates highlighted in these countries were comparable to those in the United States.

A critical question is to what extent the COVID-19 pandemic has contributed to an increase in overall rates of violence against women, particularly physical violence. Recent research has shown a strong impact of lockdowns on the mental health of populations in countries where lockdown measures were implemented. Under conditions of objective health risk and economic instability, people were forced to work from home, children had to study from home, and daily life was organised from within the home (Usher et al. 2020). Additionally, socioeconomic conditions, education, alcohol abuse, or a spouse's mental disorder, the history of family violence during childhood, and the family structure increase the risk of violence (Thompson, Kingree 2004). Many pre-existing negative factors were thus amplified during health and social crises like the COVID-19 pandemic. Supporting the hypothesis that increased time spent together by spouses during the pandemic could have led to higher rates of violence against women, other studies indicate that a husband's job loss may trigger violence. Research on domestic violence proposes various mechanisms by which a husband's job loss may influence domestic violence (Pragholapati 2020). Losing a job increases the time that couples spend together, which heightens 'exposure' or chances for violent incidents (Dugan et al. 2003). A husband's unemployment imposes a considerable financial strain on household income, and this stress can subsequently lead to domestic violence. Job loss may also shift the couple's bargaining dynamics by affecting 'alternative options' available to them (Anderberg et al. 2016). Illan and Gartner (1999) highlight in their study that job loss among men can provoke gender stereotypes by changing men's relative earnings, with domestic violence potentially manifesting as a 'masculine response'. The stress of poverty is heightened in environments, where ideals of successful masculinity firmly position men as the primary family breadwinners. In such environments, limited or poor employment opportunities for men can lead to feelings of anxiety, despair, and a crisis of male identity.

Additionally, factors that increase the risk of violence during the pandemic include alcohol abuse. Although it has been shown that alcohol increases an aggressive behaviour in both men and women, the likelihood of violent behaviour is twice as high in men (Markowitz 2000). In their study, Caetano et al. (2017) state that 30 to 40% of men who committed physical violence against women had consumed alcohol at the time of the incident. Studies in several countries – Chile, India, Egypt, and the Philippines – has identified a partner's regular drinking as a risk factor for physical violence against women at any point in their lives in all four countries (Jeyaseelan et al. 2004).

A literature review shows that a history of family violence is one of the most strongly supported risk factors associated with physical violence against women. Witnessing violence

between parents during childhood is a strong predictor that once they are in adulthood to become violence victim (Fazel et al. 2018; Hayward et al. 2018; Lee et al. 2013). This link between past experiences and violence has led researchers to suggest that cognitive factors, such as the perception of violence legitimacy in family relationships, determine whether aggression is transmitted to the next generation (Gerino et al. 2018). When it comes to the distribution of family responsibilities, changes in women's economic status have not led to actual changes in the division of household labour. Although the time that women spend on household chores has decreased in recent decades, the increase in time that men spend on household chores has only partially offset this reduction (Gershuny, Sullivan 2003). In all industrialised countries, women still bear the primary responsibility for household chores and child care. Claffey, Manning (2010) emphasise that an unequal distribution of household chores also increases the risk of dissatisfaction, which is associated with a low psychological well-being, less perceived social support, and marital instability. Lisova (2008) found that in families with a traditional division of responsibilities, where women perform most of the household work, the level of physical violence against women is high and decreases with a more equitable distribution of responsibilities.

## LITERATURE REVIEW

The anticipated increase in cases of gender-based violence materialised during the first months of the pandemic (March–June 2020), with the Safe Women's House receiving 46% more calls in comparison to the same period in the prior year (SOS 2019). The National SOS Line reported 18% more requests for their services during the same period. In May 2020, the National SOS Line received 32.5% more calls compared to May 2019. According to the data from the National SOS Line for Victims of Domestic Violence in Montenegro, there were 256 calls recorded in March 2020, the 27% increase from 2019, when there were 184 calls (SOS 2019). Other countries also reported a higher incidence of violence during the pandemic. Statistical reports indicate a 40–50% increase in domestic violence in countries like Brazil, the 30% surge in calls to SOS helplines in Cyprus and Spain during the initial days of lockdown, and the 25% increase in calls during weekends following the first diagnosed COVID-19 case (Bradhouri-Jones, Isham 2020). In New York, calls related to domestic violence increased by 10% in March 2020 compared to March 2019, while in France – where the highest rates of violence were already reported – the number of domestic violence reports rose by 30% from 17 March when mandatory isolation was enforced (Sharma, Borah, n.d.). Draginja et al. (2023) describe a typical domestic violence case in Montenegro as involving an intimate couple, where the male partner is violent and the female partner is victimised. These couples often live in rented suburban housing, and both individuals are generally in their forties. Income levels are usually low, with about half of the perpetrators and nearly three-quarters of the victims expressing dissatisfaction with their marriage. After the introduction of self-isolation measures in Russia, the number of calls to the ANNA Center SOS line, which serves to help women victims of domestic violence, increased. It is still not fully known to what extent the pandemic has increased the level of violence against women within families. A literature review shows few studies conducted during the pandemic, only a handful (Ertan et al. 2020; Moreira, Pinto da Costa 2020) that examine the contribution of risk factors in predicting violence against women within families. Given this, this paper will make a significant contribution to the literature and enable the development of adequate strategies for preventing this issue. Based on the literature and theoretical concepts, the following hypotheses were formulated:

1. The husband's job loss will significantly predict the occurrence of physical violence against women.
2. Frequent alcohol consumption by the husband will significantly predict physical violence against women.
3. A history of family violence will significantly predict that women will be victims of physical violence by their husbands.
4. The distribution of family responsibilities will significantly predict physical violence against women by their husbands.

## METHOD

### Participants

The study was conducted between March and June 2020. A total of 500 adult female participants took part in the research ( $M = 39.5$ ,  $SD = 5.8$  years, age range 20 to 49 years). The inclusion criterion was that participants were married for between 1 and 4 years. A single-stage stratified random sampling method was used in the study. Stratification was based on three regions (Podgorica, Nikšić and Bar). Data collection was anonymous and conducted electronically through a Google Form questionnaire sent via email. The total number of participants for this study was computed a priori using the G\*Power software (Faul et al. 2007) for regression analysis, with the Power  $(1-\beta) = 0.95$ , recommending 472 participants. We recruited a slightly larger sample of 500 participants to ensure the complete statistical power.

### SOCIODEMOGRAPHIC QUESTIONNAIRE

A sociodemographic questionnaire, designed specifically for this research, collected data on participants' gender, age, education, employment status, and the employment status of their husbands during the COVID-19 pandemic.

### Frequent Alcohol Consumption by Husband

The frequency of alcohol consumption by the husband was measured using a scale developed for this research. The scale includes four items. An example item is 'How often did your husband consume alcohol during isolation?'. The participants rated this on the 4-point Likert scale (1 – never to 4 – multiple times a day). An average score was calculated from these four items, ranging from 1 to 4, where a higher score indicates a more frequent alcohol consumption by the husband. The Cronbach's reliability coefficient for this scale in our sample was  $\alpha = .86$ .

### History of Family Violence

The history of family violence was measured using a scale developed for this study. It consists of four statements. An example item is 'Did your father hit your mother during your childhood?'. Participants rated each item on the 5-point Likert scale (from 1 – very often to 5 – never). The total score was calculated as the average of responses across all items, with a higher score indicating a higher frequency of parental conflict during childhood.

### Distribution of Family Responsibilities

The Perceived Family Responsibilities Distribution Questionnaire was constructed for this research based on the literature review in this area. An example item is 'My husband takes care

of child-related tasks more often than before the pandemic'. Participants provided ratings on the 5-point Likert scale (from 1 – strongly disagree to 5 – strongly agree). The total score was calculated as the average of responses across all items, where a higher score indicates a more equitable distribution of family roles between partners during the pandemic. The Cronbach's internal consistency coefficient for this scale in our sample was  $\alpha = .89$ .

### Physical Violence Against Women

The questionnaire for experienced physical violence by a husband was developed for this research based on the Conflict Tactics Scale (CTS, Straus 1979). It contains 20 items measuring physical violence against women. An example item is 'My partner has hit my head against the wall'. The participants rated each item on the 6-point scale (from 0 – never to 5 – several times a week). The total score was calculated as the average score across all items. The theoretical range of scores is 0 to 100, with a higher score indicating more frequent experiences of physical violence. The Cronbach's internal consistency coefficient for this scale in our sample was  $\alpha = .90$ .

### Statistical Data Analysis

The following methods were used: descriptive statistics, Pearson correlation, and binary logistic regression. To assess the contribution of a husband's job loss, frequent alcohol consumption by the husband, a history of family violence, and the distribution of family responsibilities in explaining physical violence against women, binary logistic regression analysis was applied. The dependent variable used was the experienced physical violence by the husband. Data processing was conducted using the IBM SPSS software.

## RESULTS

### Sociodemographic Characteristics of Participants

The distribution of participants by age shows that they were classified into 4 age groups. The largest number of participants was aged 30 to 39, accounting for 36.8%, followed by 34.4% in the 40–49 age group, while the smallest group, 28.8%, was aged 20–29. Regarding the education level, the majority of participants, 46.3%, had completed high school, 33.4% had a university degree, 10.2% had completed a vocational degree, and 10.1% were unskilled workers. Concerning the employment status, 42.8% of the participants were unemployed, 35.4% were employed, and 16.4% were homemakers. As for the employment status of their husbands, 47.2% were employed, while 52.8% were unemployed (Table 1).

Table 2 reveals significant intercorrelations among risk factors, ranging from  $r = .43$  between the husband's job loss and frequent alcohol consumption to  $r = .60$  between the frequent alcohol consumption and physical violence against women. Regarding the association between risk factors and violence against women, job loss is significantly positively correlated with the physical violence against women ( $r = .46$ ). Frequent alcohol consumption by the husband significantly positively correlates with the physical violence against women ( $r = .60$ ). A history of family violence is also significantly correlated with physical violence ( $r = .29$ ), showing a positive and low correlation. A statistically significant negative and low correlation was found, indicating that a more equal distribution of family responsibilities during the pandemic leads to a reduction in physical violence against women ( $r = -.29$ ).

Table 1. Sociodemographic characteristics of participants

Variables	Percentage, %
<b>Sex</b>	
Male	/
Female	100
<b>Age (years)</b>	
20–29	28.8
30–39	36.8
40–49	34.4
<b>Educational (school) level</b>	
Faculty (high)	33.4
Higher	10.2
Middle	46.3
Non-qualified	10.1
<b>Employment status of the respondent women</b>	
Employed	35.4
Unemployed (the cessation of company)	52.8
Housewife	16.4
<b>Employment status of the husband</b>	
Employed	47.2
Unemployed (the cessation of company)	52.8

Table 2. The correlation between variables

Variables	1	2	3	4	5
The loss of job (husband)	–				
The frequent drinking of alcohol (husband)	.43*	–			
The history of family violence (women)	.03	.01	–		
The distribution of family obligations	.41*	.33*	.08	–	
The physical violence against women	.46*	.60*	.29*	–.29*	–

\*  $p < .05$ .

Table 3 presents the results of the binary logistic regression. The first column of the table shows the regression coefficients, while the last column shows the odds ratio, which is the element interpreted in logistic regression. The variable 'frequent alcohol consumption by the husband' has the most significant impact on the dependent variable ( $\text{Exp}(B) = 1.408$ ,  $p = .00$ , Wald coefficient = 3.020). The odds ratio for the variable 'frequent alcohol consumption by the husband' is 1.408, which means that if the variable increases by 1, the risk of physical violence increases by 0.8%.

Table 3. The results of the binary logistics regression

Variables	B	SE	Wald	df	p	Exp(b)
The husband's loss of job	0.155	0.149	1.094	1	.043	1.168
The husband's frequency of use of alcohol	0.342	0.197	3.020	1	.000	1.408
The women's history of family violence	0.238	0.525	0.069	1	.024	1.048
The distribution of family obligations	2.210	0.377	3.343	1	.639	0.990
The physical violence against women	0.511	0.762	0.449	1	.000	0.003

It was found that the variable 'history of family violence' also has a significant impact in predicting violence against women ( $\text{Exp}(B) = 1.048$ ,  $p < 0.001$ , Wald coefficient = 0.069). The odds ratio is ( $\text{Exp}(B) = 1.048$ ), meaning that if the variable increases by 1, the probability of physical violence occurring increases. The variable 'distribution of household responsibilities' has the smallest impact and is at a lower level of statistical significance. A tendency was found indicating that more equal responsibilities are distributed between partners, the lower the likelihood of physical violence against women ( $\text{Exp}(B) = 0.990$ ,  $p = .639$ , Wald coefficient = 3.343). If the variable increases by 1, the probability of physical violence decreases by 0.1% (Table 3).

## DISCUSSION

Previous studies indicate that domestic violence frequently escalates during crises, including epidemic outbreaks. While comprehensive data remains limited, recent studies from China, the United States, and various European countries indicate a similar trend related to the COVID-19 pandemic (Boserup et al. 2020; Newberry, Cruz 2020). Our analysis of the results showed that, during the 'first wave' of the COVID-19 pandemic, physical violence against women by husbands occurred. The first hypothesis of this study, which proposed that the husband's job loss during the pandemic would contribute to the occurrence of physical violence against women, was confirmed. Consistent with this hypothesis, the results showed that the variable 'husband's job loss' significantly predicts physical violence against women. Job loss destabilises the household, requiring the couple to adjust to a tighter budget, which can lead to conflict. According to the household bargaining model, a woman who loses her job is at greater risk of becoming a victim, while a man who loses his job is less likely to perpetrate violence. Our results are in line with the study by Bhalotra et al. (2020), which states that a man's job loss increases the likelihood of him committing violence by 30%.

Frequent alcohol consumption by the husband proved to be the most significant risk factor for physical violence against women, thus confirming the second hypothesis of this study. Frequent alcohol consumption by the husband, as a negative coping mechanism for stress, leads to an aggressive behaviour towards his wife, creating a vicious cycle and intensifying the problem. During the lockdown, the husband's increased need to consume alcohol at home in the presence of family members was evident, as bars and restaurants were mostly closed. On the other hand, alcohol consumption as a coping mechanism for stress leads to conflict with the wife and physical violence. Reports of increased sales of firearms and ammunition in the United States during the crisis are particularly concerning given the clear link between firearm use and fatal incidents of domestic violence (Liem, Reichelmann 2014). Abusers often use weapons to intimidate their victims when intoxicated, regardless of whether they intend

to use them. This result is not surprising and is consistent with the data in the literature (van Gelder et al. 2020). The third hypothesis, related to the history of family violence, suggesting that witnessing violence between parents during childhood would significantly predict physical violence against women, was confirmed. This finding is consistently demonstrated in earlier studies. Some studies have shown that growing up in a violent home increases the likelihood of becoming a victim (Fazel et al. 2018; Riggs et al. 2020), while others have empirically confirmed that males who witnessed family violence as children are more likely to commit violence themselves.

The fourth hypothesis of this study, which posited that the distribution of family responsibilities would significantly increase physical violence against women, was not confirmed. Contrary to this hypothesis, the obtained results showed that this variable does not significantly predict physical violence against women. Although women spent more time on household chores, childcare, and caring for elderly family members during the pandemic, this did not exacerbate gender differences in the distribution of household responsibilities that could lead to violence against women. Research conducted in the United Kingdom (Sevilla, Smith 2020) highlights the greater contribution of men to housework and childcare during the pandemic. Carlson et al. (2020) also note that during the crisis, there was a more equitable distribution of family responsibilities and childcare between partners, which likely contributed to reducing physical violence against women. The pandemic removed some structural barriers to the division of housework – especially for men – as many who work from home now share tasks more equally. However, this does not mean that the pandemic created an egalitarian utopia in households.

## LIMITATIONS

When considering the results of this study, it is necessary to address its limitations. Firstly, as the data presented were collected solely through self-report methods, there is a possibility of socially desirable responses. Additionally, the study conducted is correlational; the results presented relate to a single measurement point, which prevents conclusions about causal relationships between predictor sets and violence against women. Moreover, different constructs measured by a single person (in this case, the woman) may be more correlated than if alternative sources of data (e.g. husbands) had been used for certain variables. Nevertheless, despite its limitations, this study contributes to a comprehensive understanding of the construct being studied (physical violence against women) and provides insight into the extent to which specific risk factors contribute to physical violence against women during the COVID-19 pandemic.

## CONCLUSIONS

Family risk factors have strongly impacted the intimate partner violence against women in Montenegro during the COVID-19 pandemic, highlighting the urgent need for targeted interventions and supportive policies. Research on the intimate partner violence during the COVID-19 pandemic still requires further investigation, and the true scope of this issue remains difficult to assess. Current data on the increase in domestic violence complaints offers only a partial perspective and likely underestimates the full extent of violence against women. Further studies are necessary to clarify the impact of the COVID-19 pandemic on the prevalence of violence against women, providing an opportunity to rethink the development of



social policies. Understanding the risk factors associated with violence against women can improve our knowledge of how emergencies, like the COVID-19 pandemic, can influence and exacerbate factors that lead to violent episodes.

Received 19 August 2024

Accepted 29 November 2024

## References

1. Almis, B.; Gumustas, H.; Kutuk, F.; Celik, K. 2018. 'Risk Factors for Domestic Violence in Women and Predictors of Development of Mental Disorders in These Women', *Nöro Psikiyatri Arşivi* 19(1): 67–72.
2. Anderberg, D.; Rainer, H.; Wadsworth, J.; Wilson, T. 2016. 'Unemployment and Domestic Violence: Theory and Evidence', *Economic Journal (London, England)* 126(597): 1947–1979. Available at: <https://doi.org/10.1111/eoj.12246>
3. Bhalotra, S. 2020. 'A Shadow Pandemic of Domestic Violence: The Potential Role of Job Loss and Unemployment Benefits', in *VoxEU.org*, 13 November. Available at: <https://voxeu.org/article/job-displacement-unemployment-benefits-and-domestic-violence9>
4. Boserup, B.; McKenney, M.; Elkbuli, A. 2020. 'Alarming Trends in US Domestic Violence During the COVID-19 Pandemic', *The American Journal of Emergency Medicine* 38(12): 2753–2755. Available at: <https://doi.org/10.1016/j.ajem.2020.04.077>
5. Bradhour-Jones, C.; Isham, L. 2020. 'The Pandemic Paradox: The Consequences of COVID-19 on Domestic Violence', *Journal of Clinical Nursing* 29: 2047–2204.
6. Caetano, R.; Schafer, J.; Cunradi, C. B. 2017. 'Alcohol-related Intimate Partner Violence Among White, Black, and Hispanic Couples in the United States', in *Domestic Violence*. Routledge, 153–160. Available at: <https://doi.org/10.4324/9781315264905-11>
7. Carlson, D. L.; Pets, R. J.; Pepin, J. 2020. Men and Women Agree: *During the COVID-19 Pandemic Men are Doing More at Home*.
8. Claffey, S. T.; Manning, K. R. 2010. 'Equity but Not Equality: Commentary on Lachance-grzela and Bouchard', *Sex Roles* 63(11–12): 781–785. Available at: <https://doi.org/10.1007/s11199-010-9848-5>
9. Draginja, V.-S.; Nemanja, R.; Batric, V.; Andrea, J.; Sv, S. 2023. 'Socio-economic Characteristics and Risk Factors Affecting Domestic Violence in Montenegro: A Case-control Study', *Iranian Journal of Public Health* 52(6): 1215–1224. Available at: <https://doi.org/10.18502/ijph.v52i6.12987>
10. Dugan, L.; Nagin, D. S.; Rosenfeld, R. 2003. 'Exposure Reduction or Retaliation? The Effects of Domestic Violence Resources on Intimate-partner Homicide', *Law & Society Review* 37(1): 169–198. Available at: <https://doi.org/10.1111/1540-5893.3701005>
11. Ertan, D.; Thierriere, S.; Javelot, H.; Hingray, C. 2020. 'COVID-19: Urgency for Distancing from Domestic Violence', *European Journal of Psychotraumatology* 11(1):1800245.
12. Faul, F.; Erdfelder, E.; Lang, A.-G.; Buchner, A. 2007. 'G\*Power 3: A Flexible Statistical Power Analysis Program for the Social, Behavioral, and Biomedical Sciences', *Behavior Research Methods* 39(2): 175–191. Available at: <https://doi.org/10.3758/bf03193146>
13. Fazel, S.; Smith, E. N.; Chang, Z.; Geddes, J. R. 2018. 'Risk Factors for Interpersonal Violence: An Umbrella Review of Meta-analyses', *The British Journal of Psychiatry: The Journal of Mental Science* 213(4): 609–614. Available at: <https://doi.org/10.1192/bjp.2018.145>
14. Gerino, E.; Calderera, A. M.; Curti, L.; Brustia, P.; Rollè, L. 2018. 'Intimate Partner Violence in the Golden Age: Systematic Review of Risk and Protective Factors', *Frontiers in Psychology* 9: 1595.
15. Germany, I. (n.d.). *of Women*. 2024. Available at: <https://www.bmfsfj.de/resource/blob/93906/9c0076f-c66b1be6d0eb28258fe0aa569/frauenstudie-englisch-gewalt-gegen-frauen-data.pdf>
16. Gershuny, J.; Sullivan, O. 2003. 'Time Use, Gender, and Public Policy Regimes, Social Politics', *Social Politics* 10(2): 205–228.
17. Hayward, R. A.; Honegger, L.; Hammock, A. C. 2018. 'Risk and Protective Factors for Family Violence Among Low-income Fathers: Implications for Violence Prevention and Fatherhood Programs', *Social Work* 63(1): 57–66.
18. Heiskanen, M.; Piispa, M. 1998. *Faith, Hope, Battering. A Survey of Men's Violence Against Women in Finland*. Statistics Finland and Council for Equality.
19. Illan, R.; Gartner, R. 1999. 'When She Brings Home the Bacon: Labor-force Participation and the Risk of Spousal Violence Against Women', *Journal of Marriage and Family* 61(4): 947–958.

20. Jeyaseelan, L.; Sadowski, L. S.; Kumar, S.; Hassan, F.; Ramiro, L.; Vizcarra, B. 2004. 'World Studies of Abuse in Family Environment: Risk Factors for Intimate Partner Violence', *Injury Control and Safety Promotion* 11(2): 117–124.
21. Lee, R. D.; Walters, M. L.; Hall, J. E.; Basile, K. C. 2013. 'Behavioral and Attitudinal Factors Differentiating Male Intimate Partner Violence Perpetrators With and Without a History of Childhood Family Violence', *Journal of Family Violence* 28(1): 85–94. Available at: <https://doi.org/10.1007/s10896-012-9475-8>
22. Liem, M.; Reichelmann, A. 2014. 'Patterns of Multiple Family Homicide', *Homicide Studies* 18(1): 44–58.
23. Lisova, A. V. 2008. 'Physical Violence Against Women in Russian Families', *Sociological Studies* 9: 121–128 [in Russian].
24. Lundgren, E.; Heimer, G.; Westerlund, J.; Kalliokoski, A.-M. 2001. *Slagen Dam [The Hit Woman]. Mäns Våld Mot Kvinnor i Jämställda Sverige-en Omfångsundersökning*.
25. Markowitz, S. 2000. 'The Price of Alcohol, Wife Abuse, and Husband Abuse', *Southern Economic Journal* 67(2): 279. Available at: <https://doi.org/10.2307/1061471>
26. Moreira, D. N.; Pinto da Costa, M. 2020. 'The Impact of the COVID-19 Pandemic in the Precipitation of Intimate Partner Violence', *International Journal of Law and Psychiatry* 71(101606): 101606. Available at: <https://doi.org/10.1016/j.ijlp.2020.101606>
27. National SOS Line. 2020. *National SOS Line*. Available at: <https://sosnk.org/>
28. Newberry, L.; Cruz, N. S. 2020. 'Domestic Abuse Victims in "Worst-case Scenario" During Outbreak, Providers Say', *Los Angeles Times*.
29. Pragholapati, A. 2020. *Mental Health in Pandemic COVID-19*. Available at SSRN.
30. Riggs, D. S.; Caulfield, M. B.; Street, A. E. 2020. 'Risk for Domestic Violence: Factors Associated with Perpetration and Victimization', *Journal of Clinical Psychology* 56(10): 1289–1316.
31. Sevilla, A.; Smith, S. 2020. 'Baby Steps: The Gender Division of Childcare During the COVID-19 Pandemic', *Oxford Review of Economic Policy* 36(1): 169–186.
32. Sharma, A.; Borah, S. (n. d.). 2020. 'COVID-19 and Domestic Violence: An Indirect Path to Social and Economic Crisis', *Journal of Family Violence* 37(5): 759–765.
33. SOS Telefon (n.d.). *SOS Telefon*. 2024. Available at: <https://sosnk.org/>
34. Straus, M. A. 1979. 'Measuring Intrafamily Conflict and Violence: The Conflict Tactics (CT) Scales', *Journal of Marriage and the Family* 41(1): 75–88. Available at: <https://doi.org/10.2307/351733>
35. Thomas, K. A.; Bailey, C. 2024. 'The 21st Century Cures Act: More Harm than Good for Survivors of Intimate Partner Violence?', *Violence Against Women*, 10778012241280053. Available at: <https://doi.org/10.1177/10778012241280053>
36. Thompson, M. P.; Kingree, J. B. 2004. 'The Role of Alcohol Use in Intimate Partner Violence and Non-intimate Partner Violence', *Violence and Victims* 19(1): 63–74. Available at: <https://doi.org/10.1891/vivi.19.1.63.33233>
37. Tjaden, P.; Thoennes, N. 2000. 'Prevalence and Consequences of Male-to-female and Female-to-male Intimate Partner Violence as Measured by the National Violence Against Women Survey', *Violence Against Women* 6(2): 142–161.
38. Usher, K.; Durkin, J.; Bhullar, N. 2020. 'The COVID-19 Pandemic and Mental Health Impacts', *International Journal of Mental Health Nursing* 29(3): 315–318. Available at: <https://doi.org/10.1111/inm.12726>
39. Utech, M. R. 1994. *Violence, Abuse, and Neglect: The American Home*. Rowman & Littlefield.
40. van Gelder, N.; Peterman, A.; Potts, A.; O'Donnell, M.; Thompson, K.; Shah, N.; Oertelt-Prigione, S.; Gender and COVID-19 Working Group. 2020. 'COVID-19: Reducing the Risk of Infection Might Increase the Risk of Intimate Partner Violence', *EclinicalMedicine* 21: 100348. Available at: <https://doi.org/10.1016/j.eclinm.2020.100348>
41. *Violence Against Women* (n. d.). 2024. Available at: <https://www.who.int/news-room/fact-sheets/detail/violence-against-women>
42. World Health Organization. 2020. *COVID-19 and Violence Against Women: What the Health Sector/System Can Do?* Available at: [https://srji.org/upload/medialibrary/fd8/GBV\\_in\\_RUSSIA\\_COVID\\_19.pdf](https://srji.org/upload/medialibrary/fd8/GBV_in_RUSSIA_COVID_19.pdf)

TATJANA VUJOVIĆ

## Šeimos rizikos veiksnių poveikis sutuoktinių fiziniam smurtui prieš moteris COVID-19 pandemijos metu Juodkalnijoje

### *Santrauka*

Šiame straipsnyje pristatomi longitudinalinio tyrimo, atlikto pirmosios COVID-19 pandemijos bangos Juodkalnijoje metu, pirmojo etapo rezultatai. Tyrimo tikslas – iširti pasirinktų rizikos veiksnių įtaką sutuoktinių fizinio smurto prieš moteris paplitimui pandemijos metu. Buvo vertinami keturi rizikos veiksniai: sutuoktinio darbo netekimas, jo alkoholio vartojimo dažnumas, šeiminių įsipareigojimų tarp partnerių pasiskirstymas ir smurto moters tėvų šeimoje istorija. Tyrimas buvo atliktas 2020 metais, vienpakopės stratifikuotos (pagal tris Juodkalnijos regionus: Podgorica, Nikšičius, Baras) atsitiktinės atrankos metodu. Jame dalyvavo 500 moterų (20–49 metų). Binarinė logistinė regresinė analizė atskleidė, kad sutuoktinio darbo praradimas COVID-19 pandemijos metu buvo reikšmingai susijęs su didesne fizinio smurto prieš moteris tikimybe. Nustatyta, kad dažnas vyrų alkoholio vartojimas, kaip neigiamas streso įveikimo mechanizmas, buvo stipriausias fizinio smurto prieš moteris prognozės veiksnys. Be to, ankstesnio smurto moters tėvų šeimoje atvejai buvo susiję su didesne tikimybe, kad sutuoktinis fiziškai smurtaus prieš moterį. Tyrimo rezultatai taip pat atskleidė, kad socialiai teisingesnis namų ūkio pareigų pasiskirstymas tarp partnerių susijęs su mažesne fizinio smurto prieš moteris tikimybe. Šie rezultatai pabrėžia tikslinių strategijų poreikį siekiant užkirsti kelią šiai problemai.

**Raktažodžiai:** COVID-19 pandemija, fizinis smurtas prieš moteris, sutuoktinio darbo netekimas, smurto tėvų šeimoje istorija, sutuoktinio dažnas alkoholio vartojimas, šeiminių įsipareigojimų tarp partnerių pasiskirstymas