




A Survey of the Effect of Risk Perception and Socioeconomic Status on Coping Strategies in Violent Situations Against Women

Zahra. Jafari¹, Hosna. Ghaffarpour¹, Sepideh. Rajezi Esfahani^{2*}

¹ Bachelor, Department of Psychology, School of Behavioral Science, University of Social Welfare and Rehabilitation, Tehran, Iran

² Ph.D. of Psychology, Medical Department, Memorial University of Newfoundland and Labrador, Canada

* Corresponding author email address: sepideh.rajezi@gmail.com

Article Info

Article type:

Original Research

How to cite this article:

Jafari, Z., Ghaffarpour, H., & Rajezi Esfahani, S. (2023). A Survey of the Effect of Risk Perception and Socioeconomic Status on Coping Strategies in Violent Situations Against Women. *Psychology of Woman Journal*, 4(2), 117-125. <http://dx.doi.org/10.61838/kman.pwj.4.1.13>



© 2023 the authors. Published by KMAN Publication Inc. (KMANPUB), Ontario, Canada. This is an open access article under the terms of the Creative Commons Attribution-NonCommercial 4.0 International (CC BY-NC 4.0) License.

ABSTRACT

Objective: Violence against women is a severe mental health problem. Much research has been done separately on the perception of risk, socioeconomic status (SES), and coping strategies of women who are victims of domestic violence. This study aims to investigate how women's risk perception and socioeconomic status affect their choice of coping strategies and to compare women who are victims of violence with women who have not experienced domestic violence.

Method: The statistical population is married women in Iran, 312 women were selected as a sample through random sampling. To measure the variables, four questionnaires were used: Ghodrathnama's Socioeconomic Status (SES), Haj-Yahia's Questionnaire of Violence Against Women, Bentin Risk Perception Scale, and Jalowiec Coping Scale. After the data collection stage, the relationship between the variables was analyzed using SPSS software and Pearson's correlation and linear regression.

Results: In women victims of violence, risk perception was significantly related to fatalistic and palliative strategies, and SES was significantly related to evasive strategy ($p < 0.05$). In women who were not subjected to domestic violence, risk perception had a significant relationship with optimistic, fatalistic, and emotive strategies ($p < 0.05$). The correlation coefficient between risk perception and fatalistic and emotive strategy was very weak and can be ignored.

Conclusion: The present study showed that the perception of risk affects the fatalistic and palliative coping strategies of women who are victims of violence, and their low socioeconomic status leads to more use of passive strategies such as evasive. And women who have not experienced domestic violence, the less they see themselves in danger of violence, the more they will use optimistic strategies.

Keywords: Domestic violence, Risk Perception, Socioeconomic status, Coping strategy

1 Introduction

The experience of *domestic violence* by women in communities can cause serious damage to mental health and disrupt people's normal functioning; Also, violence from the life partner doubles such damage and creates an atmosphere of insecurity in affective life. Therefore, violence against women, especially intimate partner violence and sexual violence, is a serious public health problem and a violation of women's human rights (World Health Organization, 2021).

The Declaration on the Prohibition of Violence against Women, adopted by the United Nations General Assembly in 1993, defines violence against women as any act of gender-based violence that results in physical, sexual, or psychological harm or suffering to women; including the threat of these actions, threats or arbitrary deprivation of liberty, whether in public or in private life; physical, sexual and psychological violence that happens in the family such as beatings, sexual abuse of female children at home, violence related to dowry, wife rape, female genital mutilation and other traditional practices that are harmful to women, violence unrelated to the spouse and violence related to exploitation; Physical, sexual and psychological violence that occurs in the general society such as rape, sexual abuse, sexual conflict and intimidation in the workplace, educational institutions and other places; Women trafficking and forced prostitution; and the perpetration of physical, sexual, and psychological violence that is condoned by the state wherever it occurs. The World Health Organization announced in 2021 that, based on a 2018 survey, nearly 30 percent of women (1 in 3) had experienced physical or sexual violence by a partner or sexual violence by another person (or both). More than a quarter of women aged 15 to 49 who are in a romantic relationship have been victims of physical and sexual violence by their partner at least once. Furthermore, globally, 38% of women's murders are committed by their partners (World Health Organization, 2021).

Unfortunately, in Iran, there are no official statistics on the population of women subjected to violence, and only one national study has been conducted. According to the findings of this study in the centers of 28 provinces, about 66% of women have experienced violence at least once in their lifetime (Vameghi, Mohammadreza, & Sajadi, 2014).

A longitudinal study of 63 battered women reported that psychological abuse could be particularly dangerous because it makes women question their sanity and, therefore,

is a form of ultimate control (Jacobson & Gottman, 1998). Others report that battered women perceive emotional abuse as more traumatic than physical abuse (Follingstad et al., 1990; Walker, 2009).

Being a victim of violence is considered a stressful event and affects people. The concept of stress refers to the occurrence of a threatening incident and a person's cognitive assessment of the resources available to deal with that incident, and the concept of coping is defined as cognitive and behavioral efforts to control threatening situations (Bagherian et al., 2011).

According to the theory of Lazarus and Folkman (1984), *coping* behaviors in facing stress occur in problem-oriented and emotion-oriented strategies. The problem-oriented strategy aims to change the objective situation, including problem-solving, gathering information, weighing options, choosing between options, and acting on the choice. This form of coping is often used when the situation is assessed as changeable and social support is available during which the person is confronted with the problem that is the real cause of the disturbance (Bagherian et al., 2011; Holahan & Moos, 1987; Lazarus & Folkman, 1984). Based on the emotion-oriented strategy, a person tries to regulate his emotional responses (Bagherian et al., 2011) and includes changing the subjective evaluation of a situation without changing the objective situation itself (Lazarus & Folkman, 1984). Emotion-oriented strategies include actions such as avoidance, minimization, distancing, selective attention, positive comparison, and extracting positive value from negative events (optimism) and are usually associated with depression and psychological distress (Holahan & Moos, 1987; Lazarus & Folkman, 1984). *Coping strategies* can be classified into active and passive categories. Active coping refers to cognitive and behavioral efforts to directly confront problems and their consequences. Meanwhile, passive coping refers to cognitive efforts to avoid actively facing problems or behaviors to indirectly reduce emotional stress through behaviors such as eating or smoking more. Passive coping responses are often used when people decide that the situation cannot be changed (lack of control over the situation). Therefore, they must accept the situation (Choi et al., 2012).

Early research indicated that traumatized and abused women were deficient in coping skills, especially problem-solving strategies, and used mainly emotion-oriented coping strategies (Finn, 1985; Mitchell & Hodson, 1983, 2014). One study found that about 95% of women who left an abusive partner talked about their problem with someone or an

organization, and more than 80% of women successfully obtained a legal separation or divorce (Horton & Johnson, 1993). Lerner and Kennedy (2000) found that more problem-oriented coping strategies were associated with greater self-efficacy for leaving an abusive relationship. Problem-focused coping has also reduced hopelessness among abused women (Lerner & Kennedy, 2000).

The *perceived risk* of female victims of domestic violence is related to the actual risk of future violence (Harding & Helweg-Larsen, 2009). *Risk perception* (RP) means mental judgment in different situations that a person makes about the characteristics and severity of a risk (Narimani et al., 2017). In a 15-month longitudinal study on 499 women who were victims of violence, it was found that women's perception of the possibility of future violence predicts aggression better than other risk factors (Heckert & Gondolf, 2004). In another longitudinal study of 246 battered women, 55% of the women correctly predicted that they were at low risk and did not become victims of violence again; While another 11% correctly predicted that they were at high risk of experiencing violence again. Therefore, in total, 66% estimated the future risk correctly. Women who experienced more severe physical violence and perceived low risk for future violence were twice as likely to predict incorrectly (Cattaneo et al., 2007). A study reported that women with a history of sexual violence show a less adaptive defensive reaction after recognizing the risk (Vanzile-Tamsen, Testa, & Livingston, 2005).

Socioeconomic Status (SES) is a risk factor for domestic violence. SES is formed by factors such as education level, income, financial security and mental perception of social class. The results of a study show that unstable employment, recent unemployment, and less than high school education are positively related to domestic violence. The researchers of this study also found that unstable employment and low education of the partner are risk factors for domestic violence (Kyriacou et al., 2017). A study identified other factors related to domestic violence, including low salary, lack of higher education, being single, having children and employment status (Weinbaum et al., 2001).

When poverty intersects with intimate partner violence, coping strategies are limited (Goodman et al., 2009), while women with higher incomes have better access to prevention and mental health services. Nevertheless, poorer women, in addition to a lack of access to health services, have weaker coping strategies, more isolation, and weak support networks. Women with lower SES are less likely to reach this strategy because of the stigma of seeking help,

especially from experts; Also, poorer women have weaker self-esteem and insufficient emotional support and rely mainly on non-professionals (Finn, 1985; Hernández, 2021).

In a study in Turkey about women who experienced violence after divorce, 77% of the participants stated that one of the reasons for the violence experienced at home was lack of income and job. After separating from the violent spouse, most got a job and used work and financial independence as a coping strategy. Women with higher education expressed more self-confidence after a divorce than women with less education. Also, the socioeconomic background of women with lower education plays an important role in the intensity of violence (Kelebek-Küçükarslan & Cankurtaran, 2022).

In another study about teenagers who are victims of domestic violence, household income, age, individual education and father's education were related to using both problem-oriented and emotion-oriented coping strategies, and job was only related to emotion-oriented strategies. Also, in this study, researchers concluded that a mother's education is related to non-constructive coping strategies (Ahmad, Ishtiaq, & Mustafa, 2017).

For women in a violent relationship, the coping strategies used are related to their mental health status, economic needs, socioeconomic conditions, and perception of domestic violence (Haeseler, 2013). Since women use coping strategies to defend themselves and reduce the risk of re-experiencing violence, asking for help and making appropriate decisions; As a result, choosing the appropriate coping strategy helps to accept or change the situation. Also, people perceive risk differently and fall into a spectrum of RP. Therefore, we came to investigate how RP and SES affect the choice of a coping strategy in the experience of a violent situation against women.

2 Methods

2.1 Study design and Participant

The research method of this research is cross-sectional and comparative between two groups. This research investigated the relationship between the three variables of RP, SES (independent variables) and coping strategies (dependent variable). The statistical population studied in this research are married women of the country who have been married for at least one year and have lived together. The sampling method in this research is of the type available; It was in the form of distributing the questionnaire link in the cyberspace, visiting public places, and distributing the paper form. The samples were selected from those willing to

cooperate and complete the questionnaire. The subjects were assured that all their information would remain confidential, be analyzed in general, and not be used for any other purpose. The total number of samples included 312 people, divided into two groups, under violence group (144 people) and non-violence (168 people), based on the violence against women questionnaire and receiving a score from it.

2.2 Measurements

The data were collected and measured using *Ghodratnama's Socioeconomic Status (SES)*, *Haj-Yahia's Questionnaire of Violence Against Women*, *Benthin Risk Perception Scale*, and *Jalowiec Coping Scale*.

2.2.1 Socioeconomic Status

SES questionnaire was created by Ghodratnama in 2013 and has 11 items. It includes four components: income, economic class, education and housing status. The scoring method is in the form of a 5-points Likert scale. In 2012, Islami et al. confirmed the face and content validity of the questionnaire by 12 sports experts (Ghodratnama, Heidarinejad, & Davoodi, 2013). Cronbach's alpha coefficient (0.66) has been obtained.

2.2.2 Violence Against Women

Haj-Yahia's Questionnaire of Violence Against Women includes four components and 32 questions: The first measures psychological violence (items 1 to 16); The second measures physical violence (items 17 to 27); The third measures sexual violence (items 28 to 30); The fourth component measures economic violence (items 31 and 32). The scoring method is to choose one of the three options (never, once, twice, or more) and assign a score to each option as 1, 2, and 3, respectively; Therefore, the range of overall scores is between 32 and 96. It was created by Haj Yahia (1999) and translated by Khosravi and Khaghani Fard in 2004, and its face and content validity was confirmed by expert professors (Khosravi & Khaghani Fard, 2004). In this study, Cronbach's alpha coefficient (0.95) was calculated.

2.2.3 Risk Perception

Risk Perception Scale was created by Benthin in 1993. It consists of 7 items and is scored on a five-point Likert scale from completely agree (1) to completely disagree (5). The scoring of questions 1 and 7 is reversed. A high score indicates that the person sees himself in less danger

(Benthin, Slovic, & Severson, 1993). In 2012, Zare and Arab Sheibani confirmed this questionnaire's content validity and reliability with Cronbach's alpha coefficient (0.89) (Zare & Arab Sheibani, 2012).

2.2.4 Coping Strategies

Jalowiec Coping Scale (2003) includes 60 questions with eight coping styles. The scoring method is such that an option is selected from a 4-point Likert scale of 0 (never) to 3 (most of the time). The coping styles presented in this scale include confrontive coping style (10 questions) which means facing the problem and solving the situation constructively; Evasive coping style (13 questions) means avoiding the problem; Optimistic coping style (9 questions) means having a positive thinking and view to face the problem; Fatalistic coping style (4 questions) means feeling hopeless and having a negative view of facing the problem and feeling of lack of control over the situation; Emotive coping style (5 questions) means emotive discharge and emergence of emotions in facing the situation and problem; Comforting coping style (7 questions) means controlling and reducing confusion by doing things to improve the inner feeling by not directly facing the problem; The supportive coping style (5 questions) means the use of personal, professional and spiritual support resources; Self-reliance coping style (7 questions) means self-reliance and dealing with the problem without relying on others (Jalowiec, 2003). Content validity has been confirmed by 15 psychologists and psychiatrists (Bagherian et al., 2011). Its Cronbach's alpha coefficient was obtained in this research (0.87).

2.3 Data Analysis

After the data collection stage, the relationship between the variables was analyzed using SPSS software and Pearson's correlation and linear regression.

3 Findings and Results

Among the 312 women studied, 10.9% were between 18 and 30, 28.2% were between 30 and 40, 32.1% were between 40 and 50, and 28.8% were between 50 and 60. Regarding educational level, 1.9% were under-diploma, 15.1% had a diploma, 5.8% had an associate degree, 46.2% had a bachelor's degree, and 31.1% had a master's degree or higher. 56.4% were employed (176 people) and 43.6% were unemployed (136). Among the employed people, 15.3% were self-employed, 28.4% were teachers, 43.2% were

employees, 2.8% were students, and 10.2% were engaged in other jobs. 4.5% of the total sample were students and included 17 people.

Using the mean and standard deviation, the cut-off point in risk perception to separate the group exposed to violence and those that did not experience violence was obtained as 48. According to this cut-off point, 144 people have experienced violence and 168 people have not experienced violence.

In the sample, 53.2% are in the low socioeconomic class, 44.9% are in the middle class, and 1.9% are in the upper class. Also, in the group under violence, 63.9% are in the lower class, and 36.1% are in the middle class, and no one is from the upper socioeconomic class. In the non-violence group, 44% are in the lower class, 52.4% are in the middle class, and 3.6% are in the upper socioeconomic class. In other words, women subjected to violence are more for the low socioeconomic class. However, most women who have not experienced violence belong to the middle class of society.

The mean and standard deviation of risk perception scores and coping styles in Table 1 are as follows:

Table 1

Descriptive findings

	M		SD		
	Under violence	Non-violence	Under violence	Non-violence	
Risk perception	23.08	23.14	3.05	2.96	
Coping styles	Confrontive	21.85	23.21	4.47	5.66
	Evasive	22.48	20.24	5.40	5.46
	Optimistic	18.32	19.57	4.34	4.30
	Fatalistic	5.56	4.04	2.66	2.47
	Emotive	7.46	5.88	2.42	2.69
	Comforting	8.33	7.66	2.76	3.18
	Supportive	8.61	5.85	3.06	3.30
	Self-reliant	14.94	14.75	3.69	3.75
Total Score	107.60	104.23	16.80	19.82	

M = Mean, SD = Standard Deviation

Z-value (skewness divided by standard error) was used to check the normality of data distribution. According to the results, the z value of all three variables SES, risk perception, and coping styles were between positive and negative (3.29) (Mishra et al., 2019). So, the data distribution is normal.

According to Table 1, Pearson's correlation coefficients show a significant relationship between the variables. The

factor loadings (path coefficients) related to the variables of the measurement models are presented in Table 2.

Table 2

The results of correlations for under violence group

Var.	SES		RP	
	R	P	R	P
Confrontive	-0.08	0.292	0.06	0.412
Evasive	-0.17	0.039	0.00	0.923
Optimistic	-0.08	0.305	0.11	0.172
Fatalistic	-0.13	0.118	-0.24	0.003
Emotive	0.00	0.913	-0.13	0.096
Comforting	-0.02	0.755	0.18	0.031
Supportive	-0.02	0.778	-0.04	0.561
Self-reliant	-0.12	0.152	0.00	0.933

According to the Table 2, the correlation between evasive coping style and SES ($p = 0.039$, $r = -0.17$) is inverse and significant in the sample group of people subjected to violence. Also, the correlation between fatalistic coping style and risk perception ($r = -0.24$, $p = 0.003$) is inverse and significant; Finally, the correlation between comforting coping style and risk perception ($r = 0.18$, $p = 0.031$) is direct and significant.

Table 3

The results of correlations for normal group

Var.	SES		RP	
	R	P	R	P
Confrontive	0.01	0.892	0.13	0.087
Evasive	-0.02	0.757	-0.07	0.369
Optimistic	0.02	0.728	0.16	0.038
Fatalistic	0.02	0.793	-0.15	0.039
Emotive	-0.05	0.459	-0.15	0.045
Comforting	0.05	0.445	0.13	0.081
Supportive	0.07	0.350	-0.07	0.356
Self-reliant	-0.04	0.603	0.11	0.134

* $p < 0.05$; ** $p < 0.01$

According to Table 3 In the sample group of people who have not seen violence, the correlations between risk perception and optimistic ($r = 0.16$, $p = 0.038$), fatalistic ($r = -0.15$, $p = 0.039$) and emotive ($r = -0.15$, $p = 0.045$) coping styles are significant. The relationship between risk perception and fatalistic and emotive strategies in this group is very small and can be ignored.

Table 4

Regression model for under violence group

Criterion variable	Predictor variable	R ²	F	P	B	SEB	β	T	P
Evasive	SES	0.03	4.34	0.039	-0.195	0.09	-0.17	-2.08	0.039
Fatalistic	RP	0.06	9.02	0.003	-0.241	0.08	-0.24	-3.00	0.003
Comforting	RP	0.03	4.73	0.031	0.177	0.08	0.18	2.17	0.031

The results of [Table 4](#) show that 3% of the variance of evasive coping style is explained by SES ($R^2 = 0.03$). The variance test shows that this regression model is significant ($F = 4.34$ and $P = 0.039$), and based on the SES, the evasive coping style can be predicted. The regression coefficients ($T = -2.08$ and $P = 0.039$) indicate the ability of the independent variable of SES to predict the dependent variable of evasive coping style. Also, 6% of the total variance of the fatalistic coping style is explained by risk perception ($R^2 = 0.06$). Based on the results of the variance test, this linear

regression is significant ($F = 9.02$ and $P = 0.003$). According to the regression coefficients ($T = -3.00$ and $P = 0.003$), the independent variable of risk perception can predict the dependent variable of fatalistic coping style. 3% of the variation of the comforting coping style variance is explained by risk perception ($R^2 = 0.03$). According to the results of the variance test, this regression is significant ($F = 4.73$ and $P = 0.031$). The regression coefficients ($T = 2.17$ and $P = 0.031$) show that risk perception can predict the comforting coping style.

Table 5

Regression model for normal group

Criterion variable	Predictor variable	R ²	F	P	B	SEB	β	T	P
Optimistic	RP	0.02	4.39	0.038	0.160	0.07	0.160	2.09	0.038
Fatalistic	RP	0.02	4.32	0.039	-0.149	0.07	-0.159	2.07	0.039
Emotive	RP	0.02	4.09	0.045	-0.157	0.07	-0.150	2.02	0.045

According to [Table 5](#), risk perception can explain 2% of variance changes of optimistic, fatalistic and emotive coping styles ($R^2 = 0.02$). Regression tests show that these regression models are meaningful; optimistic, fatalistic and emotive coping styles can be predicted by risk perception. The regression coefficients also show that risk perception can predict optimistic, fatalistic ($T = -2.07$ and $P = 0.039$) and emotive ($T = -2.02$ and $P = 0.045$) coping styles ($T = 2.09$ and $P = 0.038$).

she has a negative view and despair in facing a violent situation and feels less control over the situation. This relationship is more robust in women under violence. This feeling of less control aligns with the findings of [Clements, Sabourin and Spiby \(2004\)](#); [Clements and Sawhney \(2000\)](#); [Finn \(1985\)](#). Their findings show that abused women are more likely to cite factors beyond their control, such as luck and the passage of time, as solutions to problems ([Clements, Sabourin, & Spiby, 2004](#); [Clements & Sawhney, 2000](#); [Finn, 1985](#)). In women under violence, the perception of danger was directly related to the comforting coping style; It means that by feeling less dangerous, more relaxing activities are done. The victim turns to other activities such as sports, artistic activities, listening to music or unhealthy addiction to video games, overeating, etc., to soothe their distress, to avoid directly and actively confronting and solving the violent situation.

4 Discussion and Conclusion

This research investigates how risk perception and SES affect women's coping strategies when experiencing violent situations with their partners. In this research, the samples were divided into two groups under violence and no violence; And factors of risk perception, SES and coping strategies were compared between the two groups. According to statistical findings, risk perception and fatalistic coping style had an inverse relationship in both groups. In other words, the more a person considers himself in danger, the more he uses fatalistic strategies. In this way,

Based on the research literature, fatalistic, comforting, and evasive coping strategies are considered passive. While female students who experienced sexual violence had a higher risk perception for re-experiencing sexual violence, they were more likely to use indirect and passive methods of

resistance and less likely to use active coping strategies. Some showed that in a hypothetical situation, victims were more likely to acquiesce to the aggressor's demands (Gidycz, McNamara, & Edwards, 2006), whereas this was not the case when communicating through comforting style. This disparity can be explained as follows: when a person does not perceive the situation as dangerous and serious, the resulting psychological disturbance is such that it seems that comforting strategies are enough and the person does not feel the need for more advanced strategies. The inconsistency of this strategy can also be found in other studies that the comforting strategy increases psychological distress in the future (Fortes-Ferreira et al., 2006).

The normal sample had a direct relationship between risk perception and optimistic strategy. In this way, in the event of violence, a person with less sense of danger will have positive thinking and a hopeful outlook. In explaining this finding, some believe that when facing a challenge, optimistic people have a confident and stable state and can manage adversity successfully (Rajaei et al., 2016).

In women subjected to violence, SES had an inverse relationship with an evasive coping strategy. The lower a person is in the social class, the more he will use the avoidance strategy. Experiencing financial problems is likely to affect avoidance, denial, and fantasy (Ahmad, Ishtiaq, & Mustafa, 2017). The avoidance strategy is such that the person turns to activities such as consuming drugs and alcohol. This finding has been confirmed in another study that depression in the last year and increased consumption of alcohol and tobacco were higher in women victims of domestic violence with a weaker SES (Hernández, 2021). In another study, they found that women victims of domestic violence with low SES try to use hostile and passive coping strategies that may be inconsistent. Also, women with economic problems who have not been subjected to violence use passive coping strategies less than women who have experienced violence (Mitchell et al., 2006).

In general, and based on the results, women's risk perception has an effect on the fatalistic coping strategy.

References

- Ahmad, S., Ishtiaq, S. M., & Mustafa, M. (2017). The role of socio-economic status in adoption of coping strategies among adolescents against domestic violence. *Journal of interpersonal violence*, 32(18), 2862-2881. <https://doi.org/10.1177/0886260516635321>
- Bagherian, R., Maroofi, M., Zare, F. S., & Baghbanian, A. (2011). Coping styles among post MI patients with depressive symptoms. *Iranian Journal of Psychiatry and Clinical Psychology*, 16(4), 432-442. <https://www.sid.ir/files/server/jf/52813896304>
- Benthin, A., Slovic, P., & Severson, H. (1993). A psychometric study of adolescent risk perception. *Journal of adolescence*, 16(2), 153-168. <https://doi.org/10.1006/jado.1993.1014>

However, this effect is more in women abused by domestic violence and they are more likely to use this strategy. Also, in women who are victims of violence, the soothing strategy is also influenced by the perception of risk. Among women who have not experienced violence, a weak but significant relationship was found between risk perception and an optimistic coping strategy, meaning optimism will be used more with lower risk perception. As expected, SES is related to passive coping strategies such as avoidance, and women in low socioeconomic positions use these strategies more.

5 Suggestions and Applications

In order to use constructive coping strategies in violent situations and properly deal with domestic violence, it is important first to help women to understand that their perception of risk is critical and to be able to identify the clues that point to the occurrence of violence. Also, attention should be paid to the SES as a risk factor for domestic violence and a factor that leads to limiting the choice of a constructive coping strategy.

Acknowledgments

This article is based on the psychology bachelor's thesis of Mrs. Zahra Jafari and Hosna Ghafarpour under the guidance of Dr. Sepideh Rajezi. We thank the University of Social Welfare and Rehabilitation for supporting the research and Mehr Shams Afarid Safe House for helping us conduct this research.

Declaration of Interest

The authors of this article declared no conflict of interest.

Ethics principles

In this research, ethical standards including obtaining informed consent, ensuring privacy and confidentiality were observed.

- Cattaneo, L. B., Bell, M. E., Goodman, L. A., & Dutton, M. A. (2007). Intimate partner violence victims' accuracy in assessing their risk of re-abuse. *Journal of Family Violence*, 22, 429-440. <https://doi.org/10.1007/s10896-007-9097-8>
- Choi, N. G., Hegel, M. T., Sirrianni, L., Marinucci, M. L., & Bruce, M. L. (2012). Passive coping response to depressive symptoms among low-income homebound older adults: Does it affect depression severity and treatment outcome? *Behaviour research and therapy*, 50(11), 668-674. <https://doi.org/10.1016/j.brat.2012.07.003>
- Clements, C. M., Sabourin, C. M., & Spiby, L. (2004). Dysphoria and hopelessness following battering: The role of perceived control, coping, and self-esteem. *Journal of family violence*, 19, 25-36. <https://doi.org/10.1023/B:JOFV.0000011580.63593.96>
- Clements, C. M., & Sawhney, D. K. (2000). Coping with domestic violence: Control attributions, dysphoria, and hopelessness. *Journal of traumatic stress*, 13, 219-240. <https://doi.org/10.1023/A:1007702626960>
- Finn, J. (1985). The stresses and coping behavior of battered women. *Social Casework*, 66(6), 341-349. <https://doi.org/10.1177/104438948506600604>
- Follingstad, D. R., Rutledge, L. L., Berg, B. J., Hause, E. S., & Polek, D. S. (1990). The role of emotional abuse in physically abusive relationships. *Journal of family violence*, 5, 107-120. <https://doi.org/10.1007/BF00978514>
- Fortes-Ferreira, L., Peiro, J. M., GONZÁLEZ-MORALES, M. G., & Martín, I. (2006). Work-related stress and well-being: The roles of direct action coping and palliative coping. *Scandinavian Journal of Psychology*, 47(4), 293-302. <https://doi.org/10.1111/j.1467-9450.2006.00519.x>
- Ghodratnama, A., Heidarnejad, S., & Davoodi, I. (2013). The Relationship between Socio – Economic Status and the Rate of Physical Activity in Shahid Chamran University Students of Ahwaz. *Sport Management Journal*, 5(16), 5-20. <https://doi.org/10.22059/jsm.2013.30410>
- Gidycz, C. A., McNamara, J. R., & Edwards, K. M. (2006). Women's risk perception and sexual victimization: A review of the literature. *Aggression and Violent Behavior*, 11(5), 441-456. <https://doi.org/10.1016/j.avb.2006.01.004>
- Goodman, L. A., Smyth, K. F., Borges, A. M., & Singer, R. (2009). When crises collide: How intimate partner violence and poverty intersect to shape women's mental health and coping? *Trauma, Violence, & Abuse*, 10(4), 306-329. <https://doi.org/10.1177/1524838009339754>
- Haeseler, L. A. (2013). Women's coping experiences in the spectrum of domestic violence abuse. *Journal of Evidence-Based Social Work*, 10(1), 33-43. <https://doi.org/10.1080/15433714.2013.750551>
- Harding, H. G., & Helweg-Larsen, M. (2009). Perceived risk for future intimate partner violence among women in a domestic violence shelter. *Journal of Family Violence*, 24(2), 75-85. <https://doi.org/10.1007/s10896-008-9211-6>
- Heckert, D. A., & Gondolf, E. W. (2004). Battered women's perceptions of risk versus risk factors and instruments in predicting repeat reassault. *Journal of interpersonal violence*, 19(7), 778-800. <https://doi.org/10.1177/0886260504265619>
- Hernández, W. (2021). Violence with femicide risk: its effects on women and their children. *Journal of interpersonal violence*, 36(11-12), NP6465-NP6491. <https://doi.org/10.1177/0886260518815133>
- Holahan, C. J., & Moos, R. H. (1987). Personal and contextual determinants of coping strategies. *Journal of personality and social psychology*, 52(5), 946. <https://doi.org/10.1037/0022-3514.52.5.946>
- Horton, A. L., & Johnson, B. L. (1993). Profile and strategies of women who have ended abuse. *Families in society*, 74(8), 481-492. <https://doi.org/10.1177/104438949307400804>
- Jacobson, N., & Gottman, J. (1998). Anatomy of a Violent Relationship: What makes men batter women, and what keeps women from leaving them? *PSYCHOLOGY TODAY-NEW YORK*, 31, 60-60. <https://www.psychologytoday.com/intl/articles/199803/anatomy-violent-relationship>
- Jalowiec, A. (2003). The Jalowiec coping scale. *Measurement of nursing outcomes*, 3, 71-87. https://books.google.com/books?hl=en&lr=&id=UIhXywmNgLkC&oi=fnd&pg=PA71&dq=Jalowiec+Coping+Scale+&ots=qj_r6Kv-ij&sig=a5ywIeTUyVD1uGAe9ihq9jibSVM
- Kelebek-Küçükarslan, G., & Cankurtaran, Ö. (2022). Experiences of divorced women subject to domestic violence in Turkey. *Journal of interpersonal violence*, 37(5-6), 2443-2466. <https://doi.org/10.1177/0886260520927503>
- Khosravi, Z., & Khaghani Fard, M. (2004). Spouse annoying sadism with tendency to suicide and feeling of hurting spouse in women of Tehran. *Women's Studies Sociological and Psychological*, 2(6), 99-113. <https://doi.org/10.22051/jwsps.2004.1310>
- Kyriacou, D. N., Anglin, D., Taliaferro, E., Stone, S., Tubb, T., Linden, J. A., Muelleman, R., Barton, E., & Kraus, J. F. (2017). Risk factors for injury to women from domestic violence. In *Domestic Violence* (pp. 145-151). Routledge. <https://www.taylorfrancis.com/chapters/edit/10.4324/9781315264905-10/risk-factors-injury-women-domestic-violence-demetrius-kyriacou-deirdre-anglin-ellen-taliaferro-susan-stone-toni-tubb-judith-linden-robert-muelleman-erik-barton-jess-kraus>
- Lazarus, R. S., & Folkman, S. (1984). *Stress, appraisal, and coping*. Springer publishing company. <https://katalog.ub.uni-heidelberg.de/titel/68016223>
- Lerner, C. F., & Kennedy, L. T. (2000). Stay-leave decision making in battered women: Trauma, coping and self-efficacy. *Cognitive Therapy and Research*, 24, 215-232. <https://doi.org/10.1023/A:1005450226110>

- Mitchell, M. D., Hargrove, G. L., Collins, M. H., Thompson, M. P., Reddick, T. L., & Kaslow, N. J. (2006). Coping variables that mediate the relation between intimate partner violence and mental health outcomes among low-income, African American women. *Journal of clinical psychology*, 62(12), 1503-1520. <https://doi.org/10.1002/jclp.20305>
- Mitchell, R. E., & Hodson, C. A. (1983). Coping with domestic violence: Social support and psychological health among battered women. *American journal of community psychology*, 11(6), 629-654. <https://doi.org/10.1007/BF00896600>
- Mitchell, R. E., & Hodson, C. A. (2014). Coping and social support among battered women: An ecological perspective. In *Stress, social support, and women* (pp. 153-169). Taylor & Francis. <https://www.taylorfrancis.com/chapters/edit/10.4324/9781315803128-14/coping-social-support-among-battered-women-ecological-perspective-roger-mitchell-christine-hodson>
- Narimani, M., Mohammadi, G., Almasi Rad, N., & Mohammadi, J. (2017). The role of moral intelligence and risk perception in predicting students' academic burnout and procrastination. *Journal of school psychology*, 6(2), 124-145. <https://doi.org/10.22098/jsp.2017.571>
- Rajaei, A. R., Khoynezhad, G. R., Javanmard, J., & Abdollahpour, M. (2016). The relation between positive psychological states and coping styles. *Journal of Fundamentals of Mental Health*, 18(1). <https://doi.org/10.22038/JFMH.2015.6256>
- Vameghi, M., Mohammadreza, K. A., & Sajadi, H. (2014). Domestic violence in Iran: Review of 2001-2008 literature. *Social Welfare Quarterly*, 13(50), 37-70. <http://refahj.uswr.ac.ir/article-1-1354-en.html>
- Vanzile-Tamsen, C., Testa, M., & Livingston, J. A. (2005). The impact of sexual assault history and relationship context on appraisal of and responses to acquaintance sexual assault risk. *Journal of Interpersonal Violence*, 20(7), 813-832. <https://doi.org/10.1177/0886260505276071>
- Walker, L. E. (2009). *The battered woman syndrome*. Springer publishing company. <https://books.google.com/books?hl=en&lr=&id= SX4fDoqCdhcC&oi=fnd&pg=PR5&dq=The+Battered+Woman+Syndrome:+2nd+Edition.+Springer+&ots=k9IbW-JSHy&sig=ijt3NcM-TphSIqqIXsxyaV6uwb4>
- Weinbaum, Z., Stratton, T. L., Chavez, G., Motylewski-Link, C., Barrera, N., & Courtney, J. G. (2001). Female victims of intimate partner physical domestic violence (IPP-DV), California 1998. *American Journal of Preventive Medicine*, 21(4), 313-319. [https://doi.org/10.1016/S0749-3797\(01\)00363-4](https://doi.org/10.1016/S0749-3797(01)00363-4)
- World Health Organization, W. (2021). Addressing violence against women in health and multisectoral policies: a global status report. <https://apps.who.int/iris/bitstream/handle/10665/350245/9789240040458-eng.pdf?sequence=1>
- Zare, H., & Arab Sheibani, K. (2012). The reliability and validity of risk perception inventory in Iranian students. *Social Psychology Research*, 2(6), 15-26. https://www.socialpsychology.ir/article_123152_b72259aea61e9ebff416b241c30f603.pdf