The prevalence of intimate partner violence against women and women's methods of coping with partner violence*

Aysun Babacan Gümüş, Sevinç Şıpkın, Özden Erdem

Department of Nursing, Çanakkale Onsekiz Mart University Faculty of Health Sciences, Çanakkale, Turkey

Abstract

Objectives: The aim of this study is to determine the prevalence of intimate partner violence against women, the types of violence that women are exposed to and their relationship with women's methods of coping.

Methods: The study was conducted with 150 women at two different social life centers affiliated with a municipality from September 2015 to June 2016. The data were collected using an interview form and the Coping with Stress Inventory (WOCI). Frequency and percentage distributions, the Kolmogorov-Smirnov test, Student's t test and the Mann-Whitney U test were used to analyze the data.

Results: Of the women, 67.3% were exposed to least one type of violence in their lifetime, and 62.7% were exposed to least one type of violence in the last year. Of them, 34.7% were exposed to physical violence in their lifetime, and 21.3% were exposed to physical violence in the last year; 52.7% were exposed to emotional violence in their lifetime, and 48.7% were exposed to emotional violence in the last year; 14% were exposed to sexual violence in their lifetime, 11.3% were exposed to sexual violence in the last year; 22.7% were exposed to economic violence in their lifetime, and 21.3% were exposed to economic violence in the last year. The women who were exposed to physical, sexual and economic violence were less likely to use the self-confident and optimistic approach than the others. The women who were exposed to violence used the social support approach less than the others. The women who were exposed to emotional violence were more likely to use the self-support approach than the others. The women who were exposed to emotional violence were more likely to use the supportive approach than the others.

Conclusion: The women were exposed to emotional violence most. The women who were exposed to physical, sexual and economic violence used the problem-focused approach less often. The women who were exposed to emotional violence were found to use the emotional-focused approach more often. New ways for women to cope with violence should be developed.

Keywords: Methods of coping; nursing; partner violence; violence against women.

Violence against women is a public health problem that seen in different forms all over the world.[1] According to the World Health Organization (WHO), the rate of women who are exposed physical and sexual violence in the world is over 30%.[2,3] Women all over the world suffer most from violence perpetrated by partners who they know and who are involved in their lives.[3–5] Partner violence includes physical violence, sexual violence, stalking and psychological aggression perpetrated by current or ex-intimate partners such as spouses, boyfriends and sexual partners.[6] It has been reported that partner violence against women is a common problem in Turkey,[7] and its prevalence has reached 89%.[8] Although partner violence against women is so widespread, it is not often discussed openly.[9] Partner violence harms women physically, psychologically and socially, and damages their health.[10] Partner violence against women has been described as physical, emotional (psychological), verbal, sexual and economic in the relevant literature.[3,4,10,11] Physical violence, one of the most common types of violence, is the use of brute force as a means of intimidation, suppression or sanction, and it can...
range from mild injuries to murder.[4,6,10,11] Emotional violence is consistently abusing emotions and emotional needs to exert pressure to coerce, humiliate, punish, release anger and tension, or threaten.[4,6,10,11] Sexual violence is the use of sexuality to threaten, intimidate or control. Economic violence is the use of economic resources and money to sanction, threaten, or control women.[4,6,10,11] Not meeting household financial needs, taking money away from working women and ignoring women’s opinions about how to spend money are examples of economic violence.[4,10,11] Women experience these types of violence both repeatedly and simultaneously.[12]

All kinds of violence against women are considered an important health problem in many legal texts.[5] Each type of violence is a great source of stress and trauma for women and causes serious problems because they hurt and injure women physically, emotionally, socially and sexually. Women suffer physical injuries, insecurity, drug and alcohol use, social isolation, depression, suicide and death as a result of violence.[4,10,12–14]

Although the effects of violence on women are similar, coping methods vary with individual and sociocultural factors such as the characteristics of their societies, violence experienced during childhood, levels and degrees of stress experienced, perceptions and interpretations of violence, the functionality of support mechanisms and personality traits.[15–20]

Two types of approaches to dealing with stressful situations, problem-oriented and emotion-oriented, have been described.[21] Problem-oriented coping involves active, logical, cool and conscious efforts to eliminate the stressful situation or reduce its impact. Emotion-oriented coping deals with the emotional effects of the problem. Instead of struggling with the stressful situation, it involves disregarding the reality of the problem, avoiding the problem, self-control, seeking social support, sharing negative emotions and acceptance in order to reduce the effects of stress.[22–24] The relevant literature has classified the methods women use to deal with violence as: active (observable behavioral efforts), passive (unobservable, emotional and cognitive efforts), approach and avoidance, hidden and open, problem-oriented (active, planned, conscious) and emotional.[12,25] The active methods include behavioral or psychological responses that are intended to replace or eliminate the stressor, and the passive methods include behaviors that avoid stress from the stressor. Thus, coping methods can be either adaptive or not.[23]

The methods women use to cope with violence are said to be similar to those they use in other stressful situations.[12] However, unlike other stressful situations, there are other factors that make it difficult for women to deal with violence. The presence of life-threatening risks, the intermittent or ongoing nature of violence, the fact that violence usually comes from an intimate partner or someone special in her life, marriage, children, material partnerships and relationships that a woman simply abandon are examples of these factors.[12] Studies in Turkey have found that women who are exposed to violence tend to have emotion-oriented, passive, evasive and secretive attitudes.[10,26–30] Most women claim that men have no justifiable reason to commit violence, and that they want the men who perpetrate violence to be punished. However, believing that there is nothing to do to stop the violence, hiding the violence to which they have been exposed because of shame, thinking that they cause the violence themselves, feeling guilty, thinking that they will be blamed and condemned, remaining silent, submitting and being patient are common attitudes among women in Turkey.[10,26–30]

Violence against women has been defined as a health problem by the WHO, and health workers have been recommended to be trained to diagnose, treat and support women who are exposed to violence, to use scientific approaches to questioning their individual prejudices, and to change attitudes and behaviors through education programs.[5] Therefore, nurses play an important role in the prevention of violence against women, and in the recognition, treatment and rehabilitation of victims. In this context, the types of violence that women are exposed to and how they cope with them are important issues. The prevalence of women who have been subjected to violence and their attitudes, behaviors and coping strategies have been discussed in various studies in Turkey.[10,11,29–31] This study was carried out to examine women’s methods of coping with violence and different types of partner violence, and it is thought to contribute the literature for this reason.

This study seeks to answer these questions:

• What is the prevalence of women’s exposure to different types of partner violence over the past year and throughout their lives?
• What forms of partner violence behaviors have women been exposed to in the last year and throughout their lives?
• What are women’s methods of coping with the types of partner violence?

Materials and Method

This descriptive study was carried out at two different municipal social life centers in a city. Women and children visit these
centers voluntarily to spend leisure time, enjoy their hobbies and to be involved in educational activities. This study included 150 women who visited these centers from September 2015 to June 2016. They were selected using probable sampling and agreed to participate in the study voluntarily.

Women who agreed to participate in the study, were able to answer questions of physical and cognitive health, did not have communication problems and lived with their partners were included in the sample.

The data were collected in suitably private environments at the social life centers (rooms or courtyards) where the participants felt comfortable. The participants’ privacy was preserved, and face-to-face interviews that took roughly 30 minutes were conducted.

**Ethical Considerations**

The data were collected after obtaining written permission from the municipality and the approval of the Clinical Research Ethics Committee of Çanakkale Onsekiz Mart University (October 7, 2015, number 16-03). The objective and method of the study were explained to the women who met the inclusion criteria, and they were informed that their participation was voluntary. The participants were informed that they would be interviewed face-to-face, that their names would not be written down, and that the interviews would not be recorded. They were also told the data would only be used for scientific purposes, and the data were collected from the women who gave their verbal consent.

**Data Collection Tools**

The data were collected using an interview form created by the researchers and the Ways of Coping Inventory (WOCI).

**The Questionnaire Form**

The questionnaire form was prepared by the researchers according to the relevant literature. It includes closed-ended questions about the demographic characteristics of women, their partners and exposure to violence. The first part of the form has 10 questions about age, education levels, profession, employment status, social security status and income levels. The second part has 16 questions about types of violence and the violent behavior that women have been exposed to in the last year and throughout their lives.

**The Ways of Coping Inventory (WOCI)**

The Ways of Coping Inventory (WOCI) is a four-point Likert-type scale that was developed by Folkman and Lazarus. Şahin and Durak (1995) conducted the Turkish validity and reliability study of its 30-item form. The WOCI has 5 sub-scales for 5 coping methods: self-confident coping, helpless coping, submissive coping, optimistic coping and coping by seeking social support. Its items are scored from 0 to 3 (0=completely inappropriate and 3=completely appropriate). Questions 1 and 9 are reverse scored. Higher sub-scale scores indicate more use of that coping method.

**Statistical Evaluation**

The data were evaluated using SPSS 16.0 software. The Kolmogorov-Smirnov test was used to determine whether the data had a normal distribution. Student’s t-test was used for comparisons between two groups with normal distributions, and the Mann-Whitney U test was used for comparisons between two groups without normal distributions. P values of less than 0.05 were considered significant.

**Results**

The mean age of the participants was 41.86 (SD=11.62). Of them: 34.7% were university graduates, 24% were high school graduates, 10% had completed middle school, 15.3% had completed primary school, and 16% were literate. Of the participants: 74% had social security, 50% had a paying job, 43.3% were housewives, 28.7% were civil servants, 18% were self-employed, and 10% were laborers. The mean age of the women’s partners was 45.52 (SD=11.96). Of them: 38% were university graduates, 21.3% were high school graduates, 10.7% had completed secondary school, 19.3% had completed primary school, and 6.7% were literate. Of the partners: 36.7% were self-employed, 36% were civil servants, and 27.3% were laborers. The families’ income levels were moderate (57.3%), adequate (30%) and low (12.7%).

Of the women, 62.7% were exposed to at least one type of violence in the last year, and 67.3% were exposed to at least one type of violence in their lifetime. Their rates of being exposed to physical violence were 21.3% in the last year and 34.7% in their lifetime. The most frequent forms of physical violence in the last year were trampling (11.3%), slapping (6.7) and throwing things (6%). In their lifetime, they were trampling (21.3%), slapping (17.3%) and hitting (12%). The rate of torture was the same (1.3%) in the last year and in their lifetime (Table 1).

The women’s rates of exposure to emotional violence were 48.7% in the last year and 52.7% in their lifetime. The most common form of emotional violence both in the last year and in their lifetime was not being supportive (Table 2).

The women’s rates of exposure to sexual violence were 11.3% in the last year and 14% in their lifetime. The most common forms of sexual violence were neglect of sexual needs in the last year and forcing sexual intercourse using emotional pressure in their lifetime (Table 3).

The women’s rates of exposure to economic violence were 21.3% in the last year and 22.7% in their lifetime. The most common form of economic violence against the women was preventing them from working both in the last year and in their lifetime (Table 4).
There were statistically significant differences in the coping methods of women, and they varied depending on whether the women were exposed to physical, emotional, sexual or economic violence in the last year. The women who were exposed to physical violence used the self-confident (p=0.005, z=-2.826), optimistic (p=0.034, z=-2.1120) and seeking social support (p=0.044, z=-1.923) approaches less often than those who were not. The women who were exposed to emotional violence used the submissive approach more often than those who were not (p=0.039, z=-2.062). The women who were exposed to sexual violence used the self-confident (p=0.021, z=-2.304) and optimistic approaches (p=0.034, z=-2.125) less often than those who were not. There were significant differences between the scores of women who were exposed to economic violence and those who were not in terms of ways of coping with violence. The women who were exposed to economic violence used the self-confident (p=0.011, z=-2.546) and optimistic (p=0.044, z=-2.016) approaches less often than those who were not (Table 5).

### Discussion

According to the WHO’s global report, approximately one-third of women are subjected to physical and/or sexual violence by their husbands or intimate partners. In some regions, the prevalence of partner/intimate partner violence is 38%. Partner violence is most common in Africa, the Eastern Mediterranean and Southeast Asia. The prevalence rate in higher income regions such as Europe and the West Pacific is 25%. In Turkey, differing prevalence rates have been reported. Güvenç et al. (2014) reviewed the relevant literature and found that the prevalence of partner violence against women in Turkey varies from 13% to 78%. Altinay and Arat (2007) collected data from 56 provinces and found that the prevalence of being exposed to partner violence at least once in a lifetime was 35%, and this rate was 40% in Eastern Turkey. While the prevalence of partner violence was found to be 61.4% in a study conducted in Western Turkey, it was 89.3% in a study conducted in Eastern Turkey. The differences between the prevalence rates in the studies may be due to differences in samples and methods. The rate of exposure to
partner violence of the women in this study is similar to the high prevalence rates in the literature. The fact that the rates of prevalence of violence in the last year and in their lifetime were similar in this study suggests that women cannot cope with partner violence effectively.

Physical violence is one of the most common and easily defined forms of violence. This study found that, although its rate was lower in the last year, approximately one out of every three women experienced physical violence at least once in their lifetime. According to a WHO study carried out in 10 countries, 13% to 61% of women are subjected to physical violence by their partners. Studies conducted in Turkey have found that 30.4% to 62% of women have been subjected to physical violence by their partners. In this study, the most common forms of physical violence that the women are exposed to were trampling, slapping, hitting and throwing things. According to a multi-country WHO report (2012), the rate of women subjected to serious physical violence by their partners varies from 4% to 49%. In Turkey, one of every three women is either slapped or has things thrown at her by a husband or partner at least once in her life. However, ineffective coping behaviors such as not doing anything about violence, remaining silent, hiding violence, accepting violence and not taking legal action are more common among women who have been subjected to physical violence by their partners.

Although the consequences of physical violence are the most visible, studies have found that women are most commonly exposed to emotional, psychological and verbal violence. Around the world, 20% to 75% of women experience emotional and psychological violence. Although the rates of this type of violence vary in the studies conducted in Turkey, it is the type of violence that women suffer most frequently. A meta-analysis study carried out in Turkey reported that the prevalence of emotional violence against women was

### Table 4. Economic violence against women (n=34)*

<table>
<thead>
<tr>
<th>Forms of economic violence</th>
<th>In the last year</th>
<th>Lifetime</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
</tr>
<tr>
<td>Preventing them from working</td>
<td>16</td>
<td>10.7</td>
</tr>
<tr>
<td>Withholding money for household expenses</td>
<td>13</td>
<td>8.7</td>
</tr>
<tr>
<td>Making them quit work</td>
<td>13</td>
<td>8.7</td>
</tr>
<tr>
<td>Taking away income</td>
<td>8</td>
<td>5.3</td>
</tr>
</tbody>
</table>

*More than one response was given.

### Table 5. Analysis of the coping methods of women and their exposure to violence in the last year (n=150)

<table>
<thead>
<tr>
<th>Types of violence</th>
<th>Self-confident approach (MV (min–max))</th>
<th>Helpless approach (not self-confident) (Mean (SD))</th>
<th>Submissive approach (MV (min–max))</th>
<th>Optimistic approach (MV (min–max))</th>
<th>Social support approach (MV (min–max))</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical violence</td>
<td>14.00 (0–20)</td>
<td>15.50 (5–21)</td>
<td>7.00 (0–15)</td>
<td>9.00 (0–15)</td>
<td>6.00 (0–10)</td>
</tr>
<tr>
<td>Yes (n=32)</td>
<td>15.50 (5–21)</td>
<td>15.00 (8–21)</td>
<td>6.00 (0–15)</td>
<td>10.00 (3–15)</td>
<td>7.00 (0–12)</td>
</tr>
<tr>
<td>No (n=118)</td>
<td>9.65 (3.52)</td>
<td>10.00 (4–14)</td>
<td>6.00 (0–15)</td>
<td>10.00 (5–15)</td>
<td>7.00 (0–12)</td>
</tr>
<tr>
<td>Emotional violence</td>
<td>15.00 (0–21)</td>
<td>15.00 (8–21)</td>
<td>7.00 (0–15)</td>
<td>10.00 (0–15)</td>
<td>7.00 (0–12)</td>
</tr>
<tr>
<td>Yes (n=79)</td>
<td>9.43 (4.52)</td>
<td>10.12 (3.62)</td>
<td>7.00 (0–15)</td>
<td>10.00 (3–15)</td>
<td>7.00 (0–12)</td>
</tr>
<tr>
<td>No (n=71)</td>
<td>9.65 (3.52)</td>
<td>7.60 (3.12)</td>
<td>5.00 (0–14)</td>
<td>7.00 (1–10)</td>
<td>7.00 (0–12)</td>
</tr>
<tr>
<td>Sexual violence</td>
<td>15.00 (5–21)</td>
<td>15.00 (5–21)</td>
<td>6.00 (0–15)</td>
<td>10.00 (0–15)</td>
<td>7.00 (0–12)</td>
</tr>
<tr>
<td>Yes (n=17)</td>
<td>9.97 (3.98)</td>
<td>9.97 (3.98)</td>
<td>6.00 (0–15)</td>
<td>10.00 (5–15)</td>
<td>7.00 (0–12)</td>
</tr>
<tr>
<td>No (n=133)</td>
<td>9.97 (3.98)</td>
<td>8.00 (4.00)</td>
<td>6.00 (0–15)</td>
<td>7.00 (0–12)</td>
<td>7.00 (1–10)</td>
</tr>
<tr>
<td>Economic violence</td>
<td>15.00 (6–21)</td>
<td>15.00 (6–21)</td>
<td>6.00 (0–15)</td>
<td>8.00 (0–13)</td>
<td>7.00 (0–10)</td>
</tr>
<tr>
<td>Yes (n=32)</td>
<td>9.17 (5.29)</td>
<td>9.17 (5.29)</td>
<td>6.00 (0–15)</td>
<td>8.00 (0–13)</td>
<td>7.00 (0–10)</td>
</tr>
<tr>
<td>No (n=118)</td>
<td>9.96 (3.73)</td>
<td>9.96 (3.73)</td>
<td>6.00 (0–15)</td>
<td>10.00 (3–15)</td>
<td>7.00 (2–12)</td>
</tr>
</tbody>
</table>

*MV (min-max): Median value (minimum-maximum); Mean (SD): Mean score (standard deviation); t: Student’s t-test; z: Mann-Whitney U test.*
but ignore the psychological dimensions of violence. Like the relevant literature, this study found that its participants were most commonly subjected to emotional violence by their partners. The most common forms of emotional violence behaviors the women experienced were not being supportive, disapproval, not showing interest and negative criticism both in the last year and in their lifetime. Women who are exposed to partner violence think that the media and legal authorities put emphasize physical violence, but ignore the psychological dimensions of violence. [25]

The WHO (2012) reported that 6% to 59% of women were exposed to sexual violence. [12] In Turkey, the prevalence rates of sexual violence against women vary from 5% to 6.7% for the last year and 12% to 15.3% in their lifetime. [27,33] However, it is very difficult to determine the prevalence of sexual violence accurately because sexual violence is considered a private family matter in Turkish society, and it is often concealed. [25,29]

This study found the prevalence of sexual violence to be lower than those of the other types of violence. However, some studies have reported that the prevalence of sexual violence is quite high, and that approximately one of every two women experiences this type of violence. [31,37,38] The rate of women who are forced to have sexual intercourse at least once in Turkey is 14%, [146] In Turkey, women are generally exposed to forms of sexual violence that include having sexual intercourse due to fear, (8.9%), being forced to have sex (7.4%) and being forced to engage in sexually insulting or humiliating behavior (3.3%). [33] In this study, being forced to have sexual intercourse using emotional pressure was identified as the most common form of sexual violence.

The prevalence of women's exposure to economic violence varies from 23% to 30% in Turkey. [7,33,34] This study found that approximately one in five women were subjected to economic violence by their partners. In Turkey, 9% of women are never given any money for household needs at any point in their entire lives. [33] The most common forms of economic violence in our study were preventing women from working and withholding money for household expenses. Another study reported that, of the types of partner violence, women were most likely to disregard economic violence. [39] Studies have found that most women defined violence as physical (beating or hitting), but were unaware of or ignored the other dimensions of violence even if they were exposed to them. [14,29,41] Economic violence negatively affects women's work lives, causes them to quit their jobs and lose their economic independence, and pushes them and their children into poverty. In addition, women who are exposed to economic violence tend to have more physical, sexual, psychological and social problems. [42]

The relevant literature shows that women use both problem-oriented/active and emotion-oriented methods in a cycle to cope with violence. [25,28,29,43] Despite being exposed to violence, most women (87.3%) do not respond to violence. [29] It has been reported that 45.5% of women who are exposed to violence do not tell anyone about it, only 5.2% report it to the police or prosecutor's office. Women respond to violence with silence at a rate of 37.1% and respond verbally at a rate of 36.1%. [43] Another study found that 49.9% of women remained silent about violence, 18.6% left home, and 6.5% went to the police station. [28] The reason why women who continue to live with violent partners despite being subjected to violence remain silent is the inadequacy of the protective measures provided for them. [4] Women who remain silent about violence for different reasons may also engage in help-seeking behavior after a while. [14] It has been reported that women try to change themselves in accordance with the wishes of their partners, they have mutual talks and use confrontation to cope with violence. [25,30] Women initially try to hide their situations from everyone, but in the next stage they turn to their closest circles, such as their family and friends, and to religious institutions if they cannot get the support they need from their families. [12] Religion has been reported to serve as a resource that relieves and strengthens women's emotions, increases their psychosocial wellbeing and reduces depression. [25,44] However, when women and men are seen as equals, women are more prone towards separation after physical violence. [45] Most women who perceive their situation as changeable adopt active methods, and those who perceive it as unchangeable tend to adopt emotional methods. [22] This study found that women who were exposed to physical, sexual and economic violence used the self-confident and optimistic approaches at a lower level. The self-confident and optimistic approaches are effective ways of dealing with stress. The self-confident approach means having enough self-confidence to deal with stressful events or situations effectively and by having a plan to deal with them. The optimistic approach means extracting something positive from stressful events or situations and believing one's self to be able to cope with them. [22] This study found that women who were physically, sexually and economically abused by their partners used less problem-oriented coping method.

Seeking social support means making an effort to seek help and support from other people to cope with stress. [22] When women try to deal with stressful situations, they use emotion-oriented methods more than men, who tend to seek more external support. [22,24,46] When women seek help with partner violence, they tend to use informal social networks rather than official institutions and organizations. [47] This study found that the women who were subjected to physical violence by their partners used the seeking social support approach less often. This may be related to sociocultural factors. In many societies, violence against women is perceived as an acceptable behavior, an ordinary part of marriage, and as a private problem that needs to be resolved within the family. [15,14] Women's low status, lack of economic freedom, traditions and the patriarchal structure of society may also be related to this situation. Denouncing women who escape their roles may cause them to
avoid social life in an effort to hide partner violence. When violence persists for a long time, it leads to learned helplessness, the belief that the situation cannot improve and internalizing it, which hinders women's help-seeking behavior. Studies have found that women who are victims of violence are left alone, and that they do not get enough attention and support from their families. However, when women try to escape violence and seek social support from the people around them, they are usually told either to return home or remarry. The limiting effect of social support prolongs the victimization of women who are exposed to violence.

When it comes to partner violence against women, the emotional aspect of violence is often ignored. Compared to other types of violence, there is less awareness about emotional violence, and it is regarded as less important. However, as this study and the literature show, emotional violence is the most common type of violence against women. This study found that the women who were exposed to emotional violence used the submissive approach more often. The submissive approach is an emotion-oriented coping method that involves attitudes such as accepting the stressor, resignation based on the idea of not being able to cope with it, and giving up the struggle. Studies have reported that attitudes towards violence are related to childhood experiences of witnessing violence against women. Girls who witness such violence internalize submission to violence, and boys adopt the idea that perpetrating violence is their natural right. Exposure to violence leads to low self-esteem, shame and guilt, and it can increase submissive behavior. Studies that compare ways of coping with violence by gender have reported that women tend to negative and passive coping styles, and use problem-oriented approaches less often. Violence is also perceived differently in different cultures, so it should be taken into consideration that women's submissive approach may be a feature of Turkish culture and affect their ability to cope with emotional violence.

**Limitations**

This study was intended to include four different social life centers in the city center. However, there were no suitable facilities for interviewing women at two of the social life centers, so the data were only collected from two of them. Being informed that they would be asked about being exposed to violence caused concerns among the women and reduced voluntary participation in the study, so it was conducted with a small sample, which limits the generalizability of its results.

**Conclusion**

This study found that the prevalence of the women's exposure to partner violence in the last year and in their lifetime was high. They were exposed to all the types of violence, mostly emotional. Violence in their lifetime continued in the last year without any significant decrease. The women who were exposed to partner violence physically, sexually and economically were less likely to use the self-confident and optimistic approaches, and the effective coping method of seeking social support. The women who were exposed to emotional violence used ineffective coping methods such as submissive approach more often. The study found that the women's self-confidence concerning coping with violence was insufficient, that they did not seek social support, and that they were unable to benefit from social support sufficiently. They had a submissive, resigned and hopeless approach. These results indicate that they were not able to cope with violence effectively on their own without professional help.

Versatile interventions are needed to cope with violence. To prevent partner violence against women and to cope with violence, social sensitivity based on gender equality should be created, and individual and social awareness and responsibilities should be increased. Institutions and organizations should be established to provide legal and psychosocial support to women who are exposed to violence. Women who are exposed to violence should be treated by multidisciplinary teams. They should be supported psychosocially, and their coping methods should be developed. Psychiatric nurses should take active roles in the diagnosis, treatment, care and rehabilitation of women who are exposed to violence and help them to develop their coping skills.

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