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A study on depression among women who have been abused in Jordan

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Abstract

Violence against women constitutes a violation of human rights and is one of the most important issues that affect the family, its cohesion and the safety of its members. Most of the studies, conducted on abused women, have indicated that there is a correlation between violence and its effects. This study aimed to identify the level of depression among abused women in Jordan. The sample of the study was deliberately chosen and it included 100 women who were between the ages of 18 and 50 years. To achieve the objectives of the study, Beck's list of depression was used. To ensure the validity of the results, semi-structured interviews were conducted. The results indicated a high level of depression in the study sample of abused women. There were no differences in all dimensions in the depression of abused women following age, social situation and educational level variables.

Keywords: Abused, depression, feelings, violence, women.

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1. Introduction

The phenomenon of violence against women is a global phenomenon that is not limited to a particular society or a particular social segment. Rather, it is an issue related to human existence and the relationship between men and women. Its severity and breadth vary from one society to another concerning the progress of awareness of the importance of the role of women in building societies. Women are essential partners for men in the overall development process of any society (Bonomi et al., 2009).

Interest in studying violence against women has increased since the 1970s of the 20th century as the problem of violence against women was not known. There were no programmes to protect women or to shelter abused wives and their children. Counselling and treatment programmes did not exist and this interest came in response to the women's liberation movements that expanded all over the world. The United Nations issued Resolution 18 of 1991 to put an end to violence against women. They considered 25 November each year as the International Day for the Elimination of Violence against Women. Thus, it became a turning point in the march of women and their issues. In 1993, women's organisations began to take care of this issue at the International Vienna Conference (Feena) on Human Rights. The issuance of the Universal Declaration on the Elimination of Violence Against Women spread in all countries of the world, including the Arab countries. It shows that women's violence is any violent act that results in physical or psychological harm to women and psychological deprivation of freedom. This can occur in public or private life (Karadsheh, 2010; McFarlane, Symes, Maddoux, Gilroy, & Koci, 2014).

Abused women are subjected to various forms of violence, including physical, psychological, sexual, verbal, health, social and economic violence (Banat, 2006; Masarogullari & Uzunboylu, 2017). These forms are associated with a wide range of psychological and behavioural disorders that affect the physical and psychological health of women and their performance in roles. The study of Khoei et al. (2018) indicated that abused women see themselves as incompetent, worthless, unloved and useless. They have no right to control their own lives, are uncertain about themselves in their relationships with others and have unrealistic expectations of improvement.

1.1. Literature review

The World Health Organisation (WHO) defined violence as the intentional use or threat of force or physical exploitation against oneself, another person or a group of persons. It leads to injury, death or health difficulties. More specifically, we find that violence is any psychological or physical aggression that leads to consequences that include harm, physical and psychological pain (Radell et al., 2021). Violence against women takes many different forms (Banat, 2006; Ubadah, 2009), the most common of which are as follows:

- Physical violence: It is one of the most obvious forms of violence because the abusive person beats the female victim, taking advantage of his physical ability and the woman's weakness. He uses biting, kicking, slapping and instruments that injure, break and leave clear traces on the woman's body. The beating process goes through stages before it occurs. First, an argument between the parties happens which turns into a conflict, then into insults and develops into a beating, leading to serious physical and psychological consequences for women.
- Sexual violence: It means coercion to have sexual intercourse, encouragement, forced prostitution
 or forced viewing of sex. It is the use of abnormal and perverted methods of morality in marital
 intercourse and sexual methods to humiliate and blame the woman for the husband's impotence.
 He considers her responsible for it and uses sexual methods to induce a woman to have sex with
 another man under duress. Thus, the woman rejects it.

- Health violence: It means depriving the wife of health conditions and reproductive health, meaning the wife's ability to become pregnant and have children without being exposed to the dangers associated with the convergence of pregnancies. It is preventing her from medical reviews and good nutrition for the pregnant wife.
- Vocal violence: It is represented by insulting and embarrassing the wife in front of others, not showing respect and appreciation for her and neglecting her. It is admiring others in her presence, humiliating her, mocking her and shouting at her. It is the most common type of violence that affects the self-concept of women and their sense of inferiority and low self-esteem.
- Psychological violence: It is represented by rejection, neglect and humiliation through coercive
 and hostile practices that fall on women. These practices exemplify questioning the integrity of
 their minds and intelligence, reducing their abilities, thoughts and performance. This leads to fear,
 lack of control over events, depression, the unpredictability of the partner's behaviour, stress,
 despair, anxiety and low self-esteem. Its effects are exacerbated to include women's psychological
 health and their ability to socially adapt to the environment.
- Social violence: This type of violence is represented by imposing a social siege on women, preventing them from social contact, exercising their productive roles and limiting their involvement in society. It affects their emotional reliability and social standing. Violence appears in the form of depriving the wife of work or continuing education and preventing her from visiting her family, friends and relatives. It also appears as interfering with her relationships, her choice of making friends, her relationships with neighbours, preventing her from expressing her opinions and interfering with the way she dresses.
- Physical or economic violence: This is represented by depriving her of work, forcing her to do a
 job she does not like and seizing her personal property. Besides, it is represented by miserliness
 and depriving the wife of money, especially if the wife is working or not. Violence is practiced by
 depriving the wife of her salary or controlling the way it is spent.

Forms of violence may leave a range of psychological effects and risks that affect the mental health of abused women. These effects include fear, lack of control over events, depression, stress, despair, anxiety, low self-esteem and addiction to drugs and alcohol (Davies, 2013). Violence against women is defined as any act of aggression against a woman that causes psychological, sexual or physical harm and suffering. It includes threats or deprivation of liberty compulsorily or arbitrarily, whether in public or private life.

1.1.1. Causes of Violence against Women

There are many reasons behind the practice of violence against women that motivate some husbands to use violence against their wives, which include but are not limited to the following:

- Family and social disputes: Karadsheh (2010) stated that there are different causes of violence against women. These causes exemplify family, social conflicts, economic crises, alcohol and drug abuse, overlapping roles within the family and the low level of psychological flexibility of the aggressor and victim. These causes may lead to violence and psychological disorders among the aggressor.
- The prevailing culture: The culture supports men's practice of violence and abuse of women as a form of masculinity, playing a major role in the occurrence of violence against women. This violence is to protect men from being described as the condemned or the weak.
- The lack of communication and problem-solving skills is a reason for male violence against women. It is because of the inability to communicate, manage conflict effectively and listen

to each other, which leads to solving problems they face either by withdrawing or using violence (Banat, 2006).

- Low income: Al-Hiyasat (2016) conducted a study in which the results showed that the multiplicity of pressures faced by the family is one of the causes of violence against women. The family is subjected to financial pressure due to the husband's lack of a job opportunity. The husband, who faces pressure in his work, increases the incidence of violence. Most of the abused women were married to husbands of low income and this is the reason. The main cause of violence against women is a preoccupation with the means of technology and social communication. And then, there is an interference of the husband's family in the abused woman's affairs and her private life.
- Alcohol abuse: Studies have indicated a relationship between husbands' alcohol abuse and wives' exposure to violence because these husbands consider that the reason may be under the influence of alcohol and do not realise what is happening to them (Wagman et al., 2018).
- The media: Films that depict a man's ability to use his power and ability to harm women teach violence to people, and people imitate what they see.

1.1.2. Depression

Depressive disorder is one of the most widespread mental disorders among individuals. Its symptoms begin in adolescence and range from mild to very severe. Loneliness, sadness, a lack of sleep, participation in social activities and self-confidence are all psychological aspects of depressive disorder. Many researchers agree that depression is nothing but a product of the suffering person's approach to life and many therapeutic methods help reduce depressive symptoms (Gibson-Smith, Bot, Brouwer, Visser, & Penninx, 2018).

1.1.2.1. Symptoms of depression. Radwan (2004) states that there are many symptoms associated with depressive disorders, including:

- 1- Mood factors are accompanied by feelings of loss of hope, enthusiasm or a decrease in enthusiasm.
- 2- The factor of self-accusation represents the concept of self-punishment and a sense of guilt.
- 3- The physical factor includes many physical complaints and sleep disorders.
- 4- Sad and hopeless mood.
- 5- Loss of sense of happiness.
- 6- Motivation disorders.
- 7- Internal unreliability.
- 8- Loss of appetite and weight.
- 9- Sleep disturbances.
- 10- Physical aches.

There are many causes of depression, including the loss or death of a loved one; severe nervous pressure; living with other family members who suffer from depression; during major transitional periods in life, such as divorce or the transition from adolescence to adulthood; troubles and financial problems; poor health; problems in relationships with others; and lifestyle factors such as excessive alcohol or drug abuse (Al-Safasfa & Arabiyat, 2005).

1.2. Related studies

Patel, Weobong, Patel, and Singla (2019) pointed out that there are many consequences of practicing violence against women. For example, women lose their confidence, self-esteem, have isolated feelings and are withdrawn from social life. They are completely dependent on men and have psychological and humiliating feelings – lack of security and frustration – that may lead to thoughts of suicide.

Most of the studies, conducted on abused women, have indicated that there is a correlation between violence and its effects because abused women are emotionally affected by the intensity and frequency of violence. The effects exemplify psychological disturbances, low self-esteem, shame, learned helplessness, depression, suicidal tendencies, inability to establish relationships with others and dispersal of thoughts (Ibrahim, 2010; Masoud, 2013; Tukaiev et al., 2019).

The danger of violence against women creates a fertile environment for the production of negative thoughts, feelings and the formation of a low self-concept. Women produce negative thoughts directed towards themselves and others and feel helpless and inferior. They cannot cope with stressful events (Jonker et al., 2019). Learned helplessness is one of the most common and complex problems among abused women. It is because of its impact on women's psychological, cognitive and social development. It has a direct impact on psychological resilience, which plays a pivotal role in achieving psychological and social adaptation to them. This applies to their low level of psychological resilience (Koirala & Chuemchit, 2020; Lövestad, Löve, Vaez, & Krantz, 2017). Although there is no single definition of domestic violence, all definitions that deal with it agree that it is the abuse of a family member.

Violence against women constitutes a violation of human rights and is one of the most important issues that affect the family, its cohesion and the safety of its members. The issue of violence against women falls within family violence, the disclosure of which is still considered by many societies as a violation of the family's privacy and disclosure of its secrets. Violence in the hands of the husband is common and society forces the abused woman to remain silent about the violence she is subjected to. She is blamed if someone outside the family is aware of the incident of violence (Karadsheh, 2010).

Several field studies of humanitarian (NGOs) indicated that at least one out of three women is beaten and humiliated daily (Banat, 2006). The World Health Organisation also reported that nearly 80% of the female victims of homicide are killed by their husbands. And 90% of the women, in general, and abused women, in particular, are killed by weapons or sharp objects.

Official statistics in Jordan indicate that the number of women exposed to violence is large and constantly increasing (with 163 cases of assault). 74 cases were of sexual assault and 62 cases were of physical assault in 1998. 312 cases of assault were recorded, including 261 cases of sexual assault and 91 cases of physical assault in 2010. There has been an increase in cases of abuse during the past 10 years. Following the statistics of the National Centre for Forensic Medicine, the centre deals with an average of 800 cases of sexual assault against women annually (Ibrahim & Al-Hiyasat, 2016).

Abu and Rana (2017) conducted a study entitled 'Violence Directed towards the Wife and Its Relationship to Life Satisfaction and Depression among Wives in Gaza'. The sample comprised 214 married women. To achieve the goal of the study, the researchers used the marital violence scale prepared by Sufian Abu Najila. The life satisfaction scale and the depression scale were prepared by Muhammad Ibrahim Eid. The results showed that there were statistically significant differences in the total degree of marital violence, life satisfaction and depression among abused women in Gaza. These differences were due to the weak economic situation and the place of residence variables. They were in favour of the wives residing with the mother-in-law. Also, there was the absence of statistically significant differences in the total degree of marital violence and life satisfaction among abused women at an average to a high degree. There was the absence of statistically significant differences in the total degree of marital violence and its dimensions among abused women. It was attributed to marriage years and the husband or wife's education variables.

Al-Shawashrah and Mahmoud (2014) conducted a study entitled 'Rational Thoughts and Their Relationship to Depression among Abused Women in the Triangle Region'. The study sample comprised 93 abused women. The study results also showed that there were no statistically significant differences in the level of significance and depression among abused women. The absence of differences was due to profession, type of violence and educational level variables. The results also indicated that the level of irrational thoughts among abused women was average. There are no statistically significant differences at the level of significance (α = 1010) in the level of irrational thoughts among abused women. The results also showed a positive statistically significant correlation between depression and irrational thoughts among abused women.

Du Rocher and Cummings (2014) conducted a study to identify the impact of marital conflicts and violence on psychological and emotional security, social adjustment and irrational thoughts. These were among a sample of 222 families in the United States of America. The results of the study indicated that marital conflicts and violence affect the social adjustment of families.

Wilson, Feder, and Olaghere (2021) conducted a study to reveal the effect of irrationality and marital violence on women's traits and irrational thoughts. The results showed that abused women who experienced marital problems had little connection with family members and friends. The results showed that the dominant personality trait of abused women tended to be withdrawn and depressed, having irrational thoughts compared to women who were not exposed to violence.

Pinnock and Daphne (2000) conducted a study to determine whether psychological factors and women's characteristics are related to violence and frustration or not. The study sample comprised 111 black women in Campbell City, in the United States of America, who were subjected to physical and psychological violence. Their ages ranged from 18 to 53 years. Many of them have completed 12 years of education. The Beck Depression Scale, the Health Response Scale and the Daily Distress Scale were used. The results showed that the women who were subjected to violence were characterised by anxiety, tension and depression.

1.3. Problem of the study

The problem of the study crystallised in the researchers' minds about their work as psychological and social specialists and volunteers in the Family and Child Protection Centres. These centres provide psychological support services and interview many abused women. The former discovered there is an impact of the reality that abused women live on their way of thinking, style, appreciating themselves and the psychological disorders they suffer from. The plans and programmes directed at this group are to be effective and help alleviate the psychological and social burdens resulting from women's exposure to violence. It is necessary to identify the level at which they have these problems. Hence, this study tried to answer the following questions. Thus, the researchers found the need to identify the level of depression among abused women in Jordan.

The problem of the current study is determined in an attempt to answer the following questions:

- 1. What is the level of depression among abused women in Jordan?
- 2.Are there any statistically significant differences at the level of significance (α = 0.05) in the level of depression among abused women in Jordan? Are these differences attributed to the age, marital status and educational level variables?

1.4. Purpose of the study

The study aims to identify the level of depression among abused women in Jordan and investigate the existence of differences in the level of depression among abused women in Jordan following age, marital status, and educational level.

2. Materials and method

The current study used the descriptive approach due to its relevance to the subject and purposes of the study.

2.1. Participants

The study population comprised 100 abused women in Jordan. They were aged from 18 to 50. The study sample was chosen intentionally.

Table 1. Distribution of the study sample members following age, marital status and education level variables

Study variables	Categories	Number	Percentage
	18–25	22	22
Age	26-33	31	31
	34–40	28	28
	41-50	19	19
Total		100	100
	Married	41	41
	Single	23	23
Marital status	Divorced	36	36%
Total		100	100%
	High school or	46	46%
Education Level	below		
	Diploma and	38	38%
	Bachelor's		
	degree		
	Postgraduate	16	16%
Total		100	100%

2.2. Study instrument

To achieve the objectives of the study, the Beck Depression List was used in its Arabised form by (Hamdi, Abu Hijleh, & Abu Talib, 1988). It was designed to measure depression among abused women. The list originally comprised 21 items and the total score on the list ranged from 1 to 23 degrees. It was noted that the boundary between the normal and the depressed in the original list is a degree 3. The level of depression as a whole is determined as follows: 0-9 = 'no depression'; 10-15 = 'low depression'; 16-30 = 'average depression'; and >30 = high depression.

2.2.1. Scale validity

Many researchers have found the validity and reliability coefficients of the Beck scale to suit the Jordanian environment. Among these studies, Jaradat (2012) and Al-Daasiseen's (2004) studies studied the psychometric properties of the Beck depression scale, showing the high degree of validity of this scale.

2.2.2. Scale reliability

The values of the reliability coefficients were extracted for the whole list. The researcher applied the Pearson correlation coefficient to an exploratory sample from outside the study. The sample comprised 30 abused women. The application was repeated on the same sample after a 2-week interval from the first application. The researcher used the test and retest method. The Pearson correlation coefficient was 0.89 and the Cronbach alpha equation was calculated on the sample's internal consistency degrees with a value of 0.91.

2.2.3. Interviews

To ensure the validity of the results, individual interviews were conducted with 15 abused women in Jordan. The following 5 questions were asked to the abused women:

- 1) Do you view life pessimistically?
- 2) Have you experienced a situation of frustration in your life?
- 3) Do others' perceptions affect you?
- 4) Are you too sad to bear?
- 5) Do you expect failure in every job you do?

2.3. Study procedures

After obtaining official approval from the Jordanian Women's Union Centre to conduct the study and collect data, the study's scale adopted the study and verified its validity and reliability by the methods specified for it. The selection of study members from the centres of the Jordanian Women's Union was conducted. Application of the study scale to the study members was next. After data were entered into the statistical programme to be statistically analysed, the results were interpreted and recommendations were made.

2.4. Analysis

The means and standard deviations of the performance of all sample members of the Beck depression scale were extracted. Also, multiple analyses of variance were used to extract the significance of differences in the average feelings of depression following the study variables: age, marital status and education level.

3. Results

3.1. Results related to the first question: 'What is the level of depression among abused women in Iordan?'

To answer this question, the frequencies and percentages of the level of depression among abused women were extracted, as presented in Table 2.

Table 2. Frequencies and percentages of the level of depression among abused women

Level of depression	Frequencies	Percentage		
Average depression	6	30%		
High depression	14	70%		

Table 2 shows that the level of depression among the study sample of abused women was high (70%). However, the level of depression among abused women was average (30%).

3.2. Results related to the second question: 'Are there any statistically significant differences at the level of significance (0.05= α) in the level of depression among abused women?'

These differences are due to age, marital status and educational level.

To answer this question, the arithmetic means and standard deviations were extracted and non-parametric tests were carried out, as shown in Table 3.

3.2.1. The study members' age variable

To answer this question, the arithmetic means, standard deviations and ranks' average were extracted. To find out to who these differences belong, the Kruskal–Wallis test analysis was adopted for comparison within the different groups following the age variable.

Table 3. Kruskal-Wallis test results for different groups of the depression scale following the age variable

			<u> </u>				
Dimension	Age	Number	ARITHMETIC	Standard	Ranks'	Chi-	Indication
	variable		MEANS	Deviation	Average	Square	level
						Value	Sig
Depression	18-25	5	36.80	1.032	11.40		_
	26-33	4	32.25	1.214	8.25	1 016	0.611
	34-40	6	39.33	0.931	12.58	1.816	0.611
	41-50	5	33.80	1.142	8.90		

Table 3 shows that the value of chi-squared for the total degree of depression scale was 1.816, which is a non-statistically significant value at the significance level of 0.05. This indicated that there were no differences in the total degree of depression following the study members' age variable.

3.2.2. Marital status variable

To answer this question, the arithmetic means, standard deviations and ranks' average were extracted. To find out to who these differences belong, the Kruskal–Wallis test analysis for comparison was conducted within different groups following marital status.

Table 4. Kruskal-Wallis Test Results for different groups of the depression scale following marital status

Dimension	Marital	Numb	Arithmetic	Standard	Ranks'	Chi-	Indication
	status	er	means	deviation	average	square	level
						value	Sig
Depression	Single	8	34.50	8.536	9.63		
	Married	6	38.83	11,652	11.92	0.533	0.766
	Divorced	6	34.83	7.026	10.25		

Table 4 showed that the value of chi-squared for the total degree of depression scale was 0.533, which is non-statistically significant at the significance level of 0.05. This indicated that there were no differences in the total degree of depression following the marital status variable.

3.2.3. Educational level variable

To answer this question, the arithmetic means, ranks' average and the total rank was extracted. Mann–Whitney U test was used to compare the ranks of depression.

Table 5. Mann-Whitney U test results

			Arith		Ranks'	Total	<i>U</i> value	Z value	Indication
Dimension	Education al level	Numbe r	metic mean s	Standard deviation	average	ranks			level
Depression	High school or below	12	37.00	8.893	11.38	136.50	37.5	0.813	0.416
	Bachelor's degree	8	34.25	9.285	9.19	73.50			

Table 5 shows that the overall value of the Mann–Whitney U test for the educational deficiency scale was 37.5. Its z-value was –0.813, which is a non-statistically significant value at the significance level

of 0.05. This indicated that there were no differences in the total degree of depression following the educational level variable.

3.3. Semi-structured interviews to verify the validity of the study results

To ensure the validity of the results, semi-structured interviews were conducted. This type of interview is the most common because it helps us collect a huge amount of information through which we can find out the problems the individual suffers from. Also, through this interview, we can re-ask the question in another way that helps the person know what the question means. Also, it is suitable for all age groups due to its verbal and non-verbal communication style.

The duration of the interviews ranged from 45 to 60 minutes, during which aspects of the study were covered. These interviews were held in a specialised place within the centre that was provided in cooperation with the administrative commission. Confidentiality within the interview and creating an atmosphere of psychological safety and comfort were ways for abused women to freely answer any question asked or emphasised. The data has been unpacked to arrange, classify and analyse it. Thus, it is easy to identify the availability degree of this problem among abused women. The results showed a great agreement between the results of the interviews and the results of the scale that was applied to abused women. The arithmetic average score of the abused women's answers to these questions was 2.31 compared to the arithmetic mean of the depression scale as a whole (2.39), which indicated the validity of the scale.

4. Discussion

Table 2 shows that the level of depression was high among the sample of abused women. The researcher attributes this result to the effect of violence on depression since violence has many psychological effects. It begins with discontent with the person, to whom violence is directed, for not being appreciated or respected; so women resort to crying. The presence of irrational thoughts consequently leads to depression. Arab societies, in which the male is superior to the female, exemplify women's exposure to violence. It has become a prevalent custom as a result of gender discrimination.

Women consider themselves one of the main factors for the existence of violence and persecution. Women accept them and consider tolerance and silence the safest solutions. This increases their depression rate and they are affected by the surrounding conditions, such as social, economic and cultural conditions. Thus, women, who are exposed to violence, remain silent and do not reveal what they are exposed. This may make them develop a depressive disorder. This result is consistent with the result of the study by Du Rocher and Cummings (2014) and Ahmed (2021). The results showed that abused women, who have been exposed to marital problems, have little connection with family members and friends. The results also showed that the dominant personality trait of abused women tends to be withdrawal and depression. It is because they have irrational thoughts compared to women who have not been exposed to violence. The study by Al-Shawasha and Mahmoud (2014) showed that the level of depression was high among women exposed to violence,

Accordingly, the results indicated that there were no differences in the total degree of depression following the study members' age, marital status and educational level variables. Also, the results indicated that there were no differences in the total degree of depression following the variable of marital status. The researchers attributed this result to the fact that the relationship between the individual and his or her environment is interactive. During this continuous interaction, the personality of the individual is developed. And his or her behaviours take on a certain character, being modified by the experience he or she is going through. These behaviours result from the interaction of biological formation with environmental factors, especially social ones.

Also, the reason for the occurrence of depression is exposure to harsh conditions and intolerance of those conditions. Besides, the psychology of women, who are sensitive to feelings, is affected by painful circumstances and experiences, regardless of their marital status. Thus, they are in constant need of tenderness and a sense of security and acceptance, and this result is consistent with a study by Al-Ibrahim (2010).

The absence of differences in the total degree of depression, following the educational level variable, may be attributed to the soul's nature that is affected by different violence forms. The role of the educational level of women may not have an impact on the level of depression among abused women. The incidence of depressive disorder does not know the age and does not affect a group. This result is consistent with the result of Al-Shawashrah and Mahmoud' (2014) study. It showed that there were no statistically significant differences in the level of irrational thoughts among abused women due to the educational level variable.

5. Conclusion

The study's significance stems from two aspects: the theoretical importance and the practical importance:

5.1. Theoretical significance

- 1. The current study's significance comes from the importance of abused women who are considered an important component of the marital and family systems of the family. The acts of violence in general and violence against women in particular in Jordanian society have consequences that are reflected on women and society as a whole. This group is rarely targeted with designed studies and counselling programmes for them in particular, despite the difficult psychological and social situation they are in. Abused women, in particular, are usually not targeted by studies. This study is a response to contemporary educational transformations that pay attention to women and violence against women, paying attention to the relationship between violence and learned helplessness.
- 2. The current study may avail further studies on this topic.
- 3. Enriching descriptive studies, related to abused women, due to the scarcity of these types of studies in the Jordanian environment, in particular, and the Arab environment in general.

5.2. Practical importance

Counsellors and specialists working in the field of mental health can benefit from the current study by developing specialised counselling programmes. These programmes contribute to training abused women on how to face their psychological and social problems. It may avail human rights and mental health workers in identifying the nature of the abused women's suffering and services. Abused women are to be provided with the required rehabilitation services following their needs.

6. Recommendations

Based on the results of the study, the following are recommended:

- 1. Working to provide qualified psychological and social specialists for early detection of the psychological effects and problems that may appear in abused women.
- 2. Working on building specialised counselling programmes based on counselling and psychotherapy theories concerned with rehabilitating abused women of different ages.
- 3. Working on building a variety of rehabilitation programmes to reduce the level of depression among abused women.
- 4. Conducting further studies that could represent a research extension in the field of abused women as it is a fertile subject for study. However, it was not given its natural right to scientific research.

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