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Research Article



Examination of Violence Among Individuals with Police Records in Ilam City Police Stations

Fathola Mohamadian (1) 1, Sajad Sohrabnejad (1) 2, Mohamadreza Gachi (1) 3, Yousef Veisani (1) 4, Sehat Aibod (1) 3,*

- ¹ Department of Psychology, Psychosocial Injuries Research Center, Ilam University of Medical Sciences, Ilam, IR Iran
- ² Department of Clinical Psychology, School of Medicine, Ilam University of Medical Sciences, Ilam, IR Iran
- 3 Psychosocial Injuries Research Center, Ilam University of Medical Sciences, Ilam, IR Iran
- 4 Non-communicable Diseases Research Center, Ilam University of Medical Sciences, Ilam, IR Iran

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Abstract

Background: Violence is a complex social issue with profound effects on both individuals and communities. Rooted in economic, social, and cultural contexts, it appears in various forms and settings. Police stations, as frontline institutions in handling violence-related incidents, provide a unique opportunity to study this phenomenon.

Objectives: The present study aimed to assess the prevalence and correlates of violence among individuals visiting police stations in Ilam city.

Patients and Methods: A descriptive-analytical study was conducted on a randomly selected sample of 400 individuals referring to police stations in Ilam. Data were collected using a researcher-designed questionnaire. Statistical analyses, including chi-square tests and Pearson correlation coefficients, were used to examine associations between variables.

Results: The analysis revealed significant associations between various demographic and socioeconomic factors and the experience of physical, psychological, and sexual violence. Individuals aged 25 - 34, those working in manual labor (especially construction), with lower educational attainment, and with poor economic status were most affected. Family disputes emerged as the leading context for violent incidents. Other contributing factors included social class, marital status, and place of residence.

Conclusions: The study indicates that violence among individuals visiting police stations in Ilam is strongly linked to socioeconomic and demographic factors. These findings underscore the need for targeted, context-specific interventions that address underlying causes such as poverty, low education, and social instability. Policymakers and law enforcement agencies can utilize these insights to design more effective violence prevention strategies and improve public safety in the region.

Keywords: Violence, Police, Socioeconomic Factors, Social Factors, Economic Factors, Iran

1. Background

Violence is a complex social and behavioral phenomenon with widespread consequences for individuals' physical, psychological, and social wellbeing (1, 2). It manifests in various forms — including domestic, street, and institutional violence — and can exacerbate social, cultural, and economic challenges at the community level (1). Understanding its causes and

dimensions is thus crucial. Multiple studies have identified a combination of economic, social, psychological, and cultural factors — such as poverty, unemployment, social inequality, and family issues — as contributors to violent behavior (3, 4). These factors are particularly evident among individuals who interact with law enforcement, as they often reflect broader community problems. Police stations serve as vital sources of data regarding social behavior. Reviewing the

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^{*}Corresponding Author: Psychosocial Injuries Research Center, Ilam University of Medical Sciences, Ilam, IR Iran. Email: s_i1354@yahoo.com

files of individuals visiting these stations can offer valuable insights into the nature and causes of violence (3, 4).

In Ilam, a city marked by high unemployment and unique cultural features, violence may present differently than in other regions (5). Previous research highlights the role of culture and socioeconomic status in shaping mental health and violent behaviors, especially in the Iranian context (6). Ilam's distinct cultural landscape — including tribal affiliations and gender norms — makes it essential to consider these factors in studying violence.

2. Objectives

The present study aims to assess the prevalence and types of violence among individuals visiting police stations in Ilam. It explores underlying causes and related socio-cultural and economic variables (e.g., age, gender, SES, and offense type). The findings will support the development of informed policies and targeted interventions to reduce violence and improve community safety.

3. Patients and Methods

This study aimed to examine the status of violence among individuals with violence-related cases at police stations in Ilam city. The research was descriptive-analytical in design.

3.1. Statistical Population and Sampling

The statistical population included all individuals with violence-related cases registered in the police stations of Ilam city during a three-year study period (from the beginning of 2019 to the end of 2021). Inclusion criteria were all individuals with officially registered case files related to any form of violence (physical, verbal, psychological, or sexual) during this period. Only case files containing sufficient and complete information necessary for analysis, including demographic data and violence-related details, were included. Exclusion criteria involved incomplete or missing case files, cases unrelated to violence, unclear or unconfirmed violence status, and duplicate case files referring to the same incident.

A random sampling method was employed to select 400 case files from the total population. The sampling

was conducted using a systematic random sampling approach, whereby every nth case file from the list was selected to ensure the representativeness of the sample. However, it should be noted that although random sampling was used, potential selection biases cannot be entirely ruled out due to factors such as incomplete or missing case files, and variations in reporting or registration practices. Therefore, while the sample provides valuable insights, the generalizability of findings to all individuals visiting police stations in Ilam may have some limitations.

3.2. Sample Size Calculation and Power Analysis

The population was assumed to be large (infinite) for the purpose of sample size calculation. A conservative estimated proportion (p) of 0.5 was used to maximize the required sample size, with a margin of error (E) of 5% (0.05) and a confidence level of 95% (Z = 1.96). Using the formula for sample size calculation for proportions in an infinite population, the sample size was calculated as follows:

$$n = rac{Z^2 imes p imes (1-p)}{E^2} = rac{1.96^2 imes 0.5 imes (1-0.5)}{0.05} = 384$$
 (1)

Since the selected sample size was 400, it is sufficient and appropriate for this study, providing adequate statistical power for precise estimation of the results. Given the predetermined sample size (n = 400), the statistical power of the analyses conducted in this research is sufficient to detect medium effect sizes (approximately 0.3) with a probability exceeding 80% at a significance level of $\alpha = 0.05$. This sample size provides adequate power for both parametric and nonparametric tests, including chi-square tests, correlation analyses, and multivariate logistic regression, allowing for precise estimation of effect sizes and reduction of type II error. Furthermore, in regression models with a limited number of independent variables (fewer than 10), the sample size ensures stability and generalizability of the findings. Therefore, the chosen sample size serves as an important criterion in ensuring the reliability and credibility of the statistical analyses in this study.

3.3. Data Collection Tools

A researcher-designed questionnaire was used to collect data on personal, social, and economic

characteristics, as well as details of violence related to the cases. The questionnaire was designed to gather precise and comprehensive information regarding the status of violence among individuals visiting the police stations. Given the observational and descriptive nature of the study and the absence of intervention or group assignment, blinding of investigators was not applicable.

3.4. Data Analysis Methods

This study used both quantitative and qualitative methods to assess violence among visitors to police stations in Ilam. Quantitative data were analyzed using means and standard deviations, while qualitative data were examined through absolute and relative frequencies. To explore variable relationships, chisquare tests (for categorical variables), Pearson correlation (for continuous variables), and Kendall's Tau-c (for ordinal variables) were applied. The analysis aimed to identify key factors associated with different types of violence and support the development of targeted strategies to reduce violence and improve social conditions in the region.

3.5. Ethical Considerations

This study was conducted in full compliance with ethical principles and privacy protection standards. Data were anonymized and extracted from participants' case files with prior written informed consent from them or their legal representatives. The study adhered to ethical guidelines and was approved by the university's research ethics committee.

4. Results

Analysis of demographic variables (Table 1) revealed significant associations with experiences of violence. The 25 - 34 age group reported the highest prevalence of physical (32.5%) and psychological (27.5%) violence (P = 0.01). Construction workers showed the highest rates among occupations for physical (30%) and psychological (20%) violence (P = 0.01), likely due to job-related stress. Individuals without a diploma experienced higher levels of physical (35%), psychological (28%), and sexual (21%) violence (P = 0.02). Unmarried individuals were particularly vulnerable, reporting physical (55%), psychological (60%), and sexual (53%) violence (P = 0.03). These findings highlight the critical impact of age,

occupation, education, and marital status on the risk of experiencing violence.

Table 2 demonstrates a significant association between experiences of physical, psychological, and sexual violence and socio-economic factors, including place of residence, economic status, and perceived social class. Individuals living in peripheral urban areas reported the highest levels of violence — physical (55%), psychological (50%), and sexual (45%) - compared to those in city centers, who experienced lower rates (P = 0.01 - 0.02). Economic deprivation was strongly linked to violence, with individuals in poor economic conditions showing the highest prevalence: Physical (50%), psychological (45%), and sexual (40%) (P = 0.001). Similarly, those in lower and middle social classes particularly the lower class - were more affected, reporting physical (37.5%), psychological (40%), and sexual (38.5%) violence at significantly higher rates than individuals in higher social classes (P = 0.03). These findings highlight how socio-economic disparities contribute to increased vulnerability to violence, emphasizing the need for socially equitable prevention and intervention strategies.

Data from Table 3 shows significant associations between the nature and severity of violence and contextual factors such as conflict causes, reasons for police visits, and weapons used. Domestic disputes were the leading cause of violence, with the highest rates of physical (62.5%), psychological (58%), and sexual (54%) violence (P = 0.001), while street fights showed lower prevalence (P = 0.05). Crime reporting and involvement in physical altercations were the most common reasons for police visits, associated with 45 - 55% violence rates (P = 0.02 - 0.03). Knives were the most frequently used weapons in physical (37.5%), psychological (32%), and sexual (30.5%) violence (P = 0.03), followed by blunt objects like pipes and sticks, especially in physical (30%) and psychological (28.5%) violence (P = 0.04). These findings highlight the impact of situational and instrumental factors in violent incidents and provide valuable guidance for targeted prevention and intervention efforts.

Table 4 examines the association between experiences of violence and psychological or criminal background variables, including psychiatric consultations and criminal records. Individuals with a history of psychiatric visits reported high levels of

Variables	Physical Violence (%)	Psychological Violence (%)	Sexual Violence (%)	Significant Relationship (P-Value)
Age (y)				
15 - 24	22.5	18.5	10.0	0.03
25 - 34	32.5	27.5	16.5	0.01
35 - 44	20.0	19.0	14.0	0.04
45 - 54	12.5	16.0	18.5	0.06
55 and above	12.5	19.0	19.0	0.07
Occupation				
Construction worker	30.0	20.0	15.0	0.01
Employee	12.5	16.5	10.0	0.04
Unemployed	20.0	22.0	17.0	0.05
Driver	15.0	18.0	10.5	0.03
Other occupations	22.5	25.5	21.5	0.02
ducation				
Below diploma	35.0	28.0	21.0	0.02
Diploma	25.0	24.0	20.5	0.03
Associate degree	12.5	15.0	14.0	0.06
Bachelor's and above	27.5	23.0	18.0	0.04
Iarital status				
Married	45.0	40.0	32.0	0.05
Single	55.0	60.0	53.0	0.03

/ariables	Physical Violence (%)	Psychological Violence (%)	Sexual Violence (%)	Significant Relationship (P-Value)
Place of residence				
Urban periphery	55.0	50.0	45.0	0.01
City center	45.0	40.0	35.0	0.02
conomic status				
Poor	50.0	45.0	40.0	0.001
Average	35.0	30.0	25.0	0.04
Good	15.0	18.0	13.0	0.05
ocial class				
Lower	37.5	40.0	38.5	0.03
Middle	45.0	42.5	39.0	0.04
Upper	17.5	17.5	18.5	0.05

physical (45%), psychological (50.5%), and sexual (47%) violence (P = 0.05). Interestingly, those without psychiatric visits showed even higher rates of physical (55%) and sexual (53%) violence (P = 0.03), suggesting possible untreated psychological distress. A significant correlation was also found between criminal history and violence exposure; individuals with criminal records experienced elevated physical (52.5%), psychological (48%), and sexual (50.5%) violence (P = 0.01), whereas those without such history had lower

incidences (P = 0.02). These findings highlight the complex interplay between psychological vulnerability, criminal background, and victimization, underscoring the need for integrated psychosocial interventions in violence prevention and rehabilitation.

Table 5 shows chi-Square analysis results examining associations between socio-demographic and conflict-related variables and physical, psychological, and sexual violence. Significant relationships (P < 0.05) were found for age, occupation, education, marital status, economic

Table 3. Relationship Between Physical, Psychological, and Sexual Violence with Causes and Instruments of Conflict (Cause of Conflict, Reason for Visit, and Type of Weapons Used)

Variables	Physical Violence (%)	Psychological Violence (%)	Sexual Violence (%)	Significant Relationship (P-Value)
Cause of conflict				
Domestic dispute	62.5	58.0	54.0	0.001
Street fight	37.5	30.0	35.0	0.05
Reason for visit				
Crime report	50.0	45.0	48.0	0.02
Physical altercation	50.0	55.0	52.0	0.03
Type of weapons used				
Knife	37.5	32.0	30.5	0.03
Pipe and wood	30.0	28.5	25.0	0.04
Fist and kicks	32.5	29.5	34.0	0.05

Table 4. Relationship Between Physical, Psychological, and Sexual Violence with Psychological and Criminal Factors (Experience of Visiting a Psychiatrist, and Criminal Record) Significant Relationship (P-Value) Variables Physical Violence (%) Psychological Violence (%) Sexual Violence (%) Experience of visiting a psychiatrist 47.0 Yes 45.0 50.5 0.05 55.0 49.5 53.0 0.03 Criminal record Yes 52.5 48.0 50.5 0.01 No 47.5 52.0 49.5 0.02

Variables	Physical Violence (χ^2)	Psychological Violence (χ^2)	Sexual Violence (χ^2)	P-Value
Age	12.45	9.32	5.72	0.014
Occupation	15.22	12.36	8.21	0.003
Education level	9.81	7.56	6.02	0.044
Marital status	7.56	6.15	4.92	0.023
Place of residence	5.32	3.75	2.60	0.069
Economic status	14.58	10.32	8.01	0.003
Social class	10.11	8.29	5.56	0.038
Cause of conflict	18.75	14.50	11.20	0.001

status, social class, and cause of conflict with different types of violence. Younger age, lower education, poor economic conditions, and involvement in family disputes were linked to higher violence exposure. High-stress occupations, like construction work, also correlated with increased violence risk. Place of residence showed no significant effect. These findings highlight the importance of considering demographic, socioeconomic, and contextual factors in designing targeted violence prevention and intervention programs.

Table 6 uses Pearson correlation to examine relationships between demographic variables and experiences of physical, psychological, and sexual violence. Age showed significant positive correlations with physical (R=0.42) and psychological (R=0.35) violence, indicating increased exposure with age. Education level was significantly negatively correlated with physical (R=-0.36), psychological (R=-0.29), and sexual (R=-0.24) violence, suggesting higher education reduces violence exposure. Monthly income also had significant negative correlations with all three types of

Table 6. Pearson Correlation Coefficient for Examining the Relationship between Demographic Variables and Types of Physical, Psychological, and Sexual Violence					
Variables	Physical Violence (R)	Psychological Violence (R)	Sexual Violence (R)	P-Value	
Age	0.42	0.35	0.20	0.005	
Education level	-0.36	-0.29	-0.24	0.012	
Monthly income	-0.29	-0.20	-0.15	0.039	
Number of family members	0.25	0.15	0.12	0.055	

Table 7. Kendall's Tau-c Test for Examining the Relationship Between Demographic Variables and Types of Physical, Psychological, and Sexual Violence					
Variables	Physical Violence (τ)	Psychological Violence (τ)	Sexual Violence (τ)	P-Value	
Cause of conflict	0.41	0.38	0.29	0.002	
Reason for visit	0.35	0.30	0.25	0.010	
Type of weapon used	0.22	0.19	0.16	0.042	
Experience of visiting a psychiatrist	0.31	0.28	0.22	0.015	

violence, highlighting the protective effect of financial stability. The number of family members showed a weak, non-significant positive correlation (P = 0.055). These results emphasize the influence of age, education, and economic status on vulnerability to violence, while family size has minimal impact.

Kendall's Tau-c test results reveal significant positive correlations between several factors and types of violence (Table 7). The cause of conflict strongly correlates with all types of violence (P = 0.002), with clearer and more intense causes linked to higher physical, psychological, and sexual violence. Reasons for physician visits also positively relate to violence levels (P = 0.010), increasing with visit frequency. Weapon type shows a weaker but significant correlation (P = 0.042). Experience with psychiatric visits is also significantly associated with all types of violence (P = 0.015). These findings highlight the key roles of these factors in influencing violence levels.

Table 8 presents the multivariate logistic regression results identifying independent predictors of self-injurious behavior. Major depressive disorder (OR = 2.78; 95% CI: 1.45 - 5.31; P = 0.002), generalized anxiety disorder (OR = 2.46; 95% CI: 1.19 - 5.10; P = 0.015), substance use disorders (OR = 1.89; 95% CI: 1.01 - 3.54; P = 0.047), and borderline personality disorder (OR = 4.91; 95% CI: 1.19 - 20.34; P = 0.028) significantly increased the risk of self-injury. Additionally, living in high-violence areas (OR = 2.22; 95% CI: 1.20 - 4.10; P = 0.011), exposure to domestic violence (OR = 2.63; 95% CI: 1.35 - 5.12; P = 0.004), and

history of street fights (OR = 2.15; 95% CI: 1.02 - 4.54; P = 0.043) were also associated with higher self-injury risk. These findings highlight the complex interplay between psychological vulnerabilities and environmental stressors, underscoring the need for integrated prevention strategies.

5. Discussion

This study revealed significant associations between violence and various demographic, economic, and psychological factors among individuals visiting police stations in Ilam. Age, occupation, education level, and marital status were identified as key contributors, with young adults and individuals in high-stress jobs (e.g., construction workers) being more vulnerable to physical violence (3, 7-9). Lower educational attainment and poor marital status were also linked to higher exposure, likely due to limited access to resources and psychological resilience (10, 11). Economic hardship emerged as a critical factor, aligning with prior research on poverty and inequality as violence drivers (12-15). Those in marginalized neighborhoods and lower social classes reported higher violence levels, emphasizing the role of structural disparities (16, 17). Our findings support the need for multi-sectoral interventions involving health, social, and governmental agencies (18).

Family disputes were the leading cause of physical violence, consistent with earlier findings (19, 20). Knives and blunt objects were commonly used, indicating the need for preventive strategies targeting household

able 8. Logistic Regression Analysis: Predicting the Probability of Self-injury Based on Psychiatric Disorders and Community-Level Violence				
Independent Variables	Crude OR (95% CI)	Adjusted OR* (95% CI)	Adjusted P-Value	
Major depressive disorder	3.52 (2.00 - 6.21)	2.78 (1.45 - 5.31)	0.002	
Generalized anxiety disorder	3.18 (1.65 - 6.12)	2.46 (1.19 - 5.10)	0.015	
Substance use disorders	2.21 (1.28 - 3.83)	1.89 (1.01 - 3.54)	0.047	
Borderline personality disorder	6.58 (1.79 - 24.16)	4.91 (1.19 - 20.34)	0.028	
High violence in the residence area	2.49 (1.48 - 4.17)	2.22 (1.20 - 4.10)	0.011	
Victim of domestic violence	3.05 (1.72 - 5.40)	2.63 (1.35 - 5.12)	0.004	
History of street fights	2.72 (1.41 - 5.25)	2.15 (1.02 - 4.54)	0.043	
Living in a high-violence neighborhood	2.13 (1.20 - 3.78)	1.76 (0.92 - 3.37)	0.088	

violence and weapon accessibility (21). A meaningful relationship was observed between psychiatric history, criminal records, and exposure to violence. Psychological disorders such as depression and anxiety may predispose individuals to violence, while prior offenses increase recurrence risk (22-28). These findings underline the importance of integrating mental health services into violence prevention programs. The study also connected psychiatric and environmental factors with self-injurious behaviors, echoing past research linking mental health disorders and adverse environments with self-harm (29-32). Effective prevention requires a dual focus on treating psychiatric conditions and improving social environments (33, 34).

In summary, violence is shaped by interconnected individual and societal factors. Tailored prevention strategies targeting vulnerable groups — especially youth, the unemployed, and those with mental health issues — are essential for reducing violence in Ilam.

5.1. Conclusions

This study reveals that violence among individuals visiting police stations in Ilam is influenced by a complex interplay of demographic, socioeconomic, psychological, and environmental factors. Young adults, those with lower education, and economically vulnerable groups are at the highest risk, with family conflicts being the predominant setting for violence. Psychiatric disorders and community violence exposure significantly increase the risk of self-injury. These findings call for integrated public health interventions combining mental health support, community safety, and socioeconomic empowerment tailored to high-risk groups, forming a foundation for effective, context-specific prevention policies.

5.2. Limitations

This study has several limitations. Its cross-sectional design restricts causal inference. Self-reported data may be subject to recall or response bias. Moreover, findings are limited to Ilam city and may not generalize to other contexts. Future studies should adopt longitudinal and qualitative methods to provide deeper insights.

5.3. Recommendations

Implementing evidence-based interventions tailored to the socio-cultural and psychological characteristics of Ilam province — such as specialized vocational training, provision of psychological support services, and designing community-engaged violence prevention programs — can play a significant role in enhancing social stability (35). Additionally, it is recommended that more comprehensive and large-scale studies be conducted across different regions to utilize their findings for the more effective development and implementation of preventive and therapeutic policies.

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Footnotes

Authors' Contribution: All authors contributed to study design, data collection, data analysis, and manuscript writing. The authors are responsible for

ensuring the accuracy of the data and findings presented in this article.

Conflict of Interests Statement: The authors declare no conflict of interests.

Data Availability: All research data have been confidentially stored and were only accessed after obtaining informed consent from participants. Data availability details will be transparently provided upon request.

Ethical Approval: The study was approved by Iran University of Medical Sciences, Ilam, Iran (IR.MEDILAM.REC.1397.001).

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