



Exploring the Nexus of Domestic Violence: Impact on Married Women's Physical Health, Psychological Distress, and Magnitude of Abuse

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ABSTRACT

Domestic violence is a common problem in Pakistan but due to stigma in surrounding it is not openly discussed. Current study determined the magnitude of domestic violence, physical health and psychological distress among females. Cross-sectional study was conducted in Sialkot among married females. Magnitude of domestic violence was considered as the determinant of physical health and psychological distress. Sample was comprised of 100 females from working and non-working background, selected through purposive sampling technique by random assignment. The variables were measured using three assessment tools composite abuse scale, Kessler's psychological distress scale and physical health questionnaire. Data was analyzed by the application of SPSS, correlation and regression was measured for the assessment of purposed assumptions. Among married females domestic violence is the determinant of physical health ($r=.702^{**}$, $p < 0.01$) and psychological distress ($R= -.340^{*}$, $p < 0.01$). Increase in the magnitude of domestic violence leads to the deterioration of physical health and decreases psychological distress.

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1. Introduction

Society is an amalgamation of individuals sharing geographical location. In other words society is made by people living in particular locality. Society is a mirror which reflects both the positive and the negative aspects. Domestic violence is one of the fatal factors which affect all parts of the society. United Nations (2021) refers domestic violence as any type of harm to females. Domestic Violence is a aggressive behavior in the home, involving the violent abuse of a partner and spouse. In Pakistan Domestic Violence is a problem which can be traced back to earlier history. One might think that Domestic Violence is an emerging issue in Pakistan but that is due to the fact that previously not much attention had been given to it. One of the main reasons being; Pakistan is a patriarchal state where men are expected to be dominant and females are thought to be dormant, submissive, compliant and somewhat of a second-class citizen. It can be concluded that the root causes of this is in the power imbalance of the society's structure. Another reason is the society's perception of this issue, in Pakistan Domestic Violence is considered as a form of abusive control/behavior rather than a form of violence and is henceforth typically been normalized (Ali, Naylor, Croot, & O'Cathain, 2015).

Upbringing and moral values plays mandatory role in treatment with females and family members.. Females with avoidant and emotionally absent parents are more likely to accept Domestic Violence because of their lack of understanding of healthy relationships. Women who are weak/small are also more likely to experience it. Poor communication skills increase the vulnerability of being victim of violence. Lack of efficient dialogue leads to misunderstanding, confusion and eventually frustration. This anger at first may be taken out verbally but then

elevates to physical form. Similarly, boys who grow up observing such violence tend to believe that it is the right of a man to exert dominance over women; he is more likely to develop beliefs like women are inferior to them and objects of satisfaction. Such boys grow up to be abusers like their fathers (Idris et al., 2018).

Domestic violence is referred to as a "private" violence because it occurs in the private spheres where it is protected from external interruptions. Most people mistake Domestic Violence for coercive physical acts only, it must be kept in mind that Domestic Violence manifests into sexual, economic and other forms too, Physical characteristics of domestic violence is comprised of scratching, biting, grabbing or spitting, honor killing, throwing objects to hurt or intimidating, forcing into pregnancy/abortion (MOHR, 2020). Elizabeth Plumtre (2022) explained psychological violence as a behavior performed by the accuser toward victim in the form of Humiliating, mocking, intimidating, name calling etc., Manipulation or any narcissistic behaviors (playing mind games), Controlling one's movements/freedom, Guilt tripping, Cheating, jealousy, stopping one to meet with their family/ friends, Make one feel uncomfortable, scared, depressed etc. While maintaining full control over financial assets without consent, make someone beg for financial needs/allowance, denying access to basic resources, sabotaging educational opportunities, hiding family assets all of these matters are related to economic and financial violence. Forcing into sexual acts i.e., rape or partake in sexual activity with someone, harassing telephone calls or notes, embarrassing the victim in public, following without knowledge or consent all of the mentioned are the categories of sexual violence.

Almost 32% females have experienced physical violence and once and 40% married women have been abused at some point in Pakistan. Aurat foundation (2013) explored that in year 2012 7516 cases of violence were reported 1607 were the cases of kidnaping and abduction, 1747 were murder cases, 989 were cases of domestic violence, 432 were the cases of honor killing, 822 were cases of rape/gang rape, 63 cases of sexual assault and 83 were reported cases of acid throw. Research conducted by Hussain, Hussain, Zahra, and Hussain (2020) explored that among 1000 women were hospitalized in Punjab, 35% women were brutally beaten by their spouses and 70-90% females encountered vicious types of abuse. According to PWSI (2019/2020) Almost 10-70% women are subjected to DV once in a lifetime, Pakistan ranks 4th most dangerous place for women. Recent research conducted in Gilgit Baltistan by shows that 88.8% females in GB are subjected to domestic violence. According to a media source, "Khyber Pakhtukhawan police data reveals a rise in the number of domestic violence crimes reported in 2019, particularly murder instances." In 2018, 180 women were killed in their homes; in 2019, the number increased to 217. In 2019, 36 women reported physical abuse at home, three times higher than 2018. The implementation of this legislation disproves the notion that domestic violence is a private concern of any home; it is now the obligation of the state to protect women from assault (Rasool, 2021).

According to a survey on 200 female in Bahawalpur (2020) owing in "watta satta" trend in which families barter their children for marriage and there is tradition of "wani or Swara" in which families marry their daughters in exchange of their wrong doings. Marriage is considered as the wellbeing of daughters so parents marry them at early age to secure their life and their honor. The domestic violence is a criminal conduct, hence it should be properly reported and appropriate law enforcement should be assured by the law enforcement agency. Nonetheless, once the physical wound heals, the short-term consequences fade. Aside from the impact on physical health, the prior study has found that female survivors of domestic violence suffer from various mental health issues throughout the life. Their psychological distress decreases with passage of time and shifts into severe, devastating disorders.

2. Theories of Domestic Violence

Kalra (1996) states that psychological theories relate domestic violence with personality traits and consider mental states of the culprit responsible for brutal act of violence. These traits includes sudden outburst of anger, poor control over impulse and low self-confidence. Psychological theorists believe that adverse childhood experiences lead a person towards frustration and anger which comes out in the form of violence.

1. Social Learning Theory

2. Power and Control theory

2.1. Theory of Social Learning

Crowell and Sugarman, (1996) explored that Violence is a cyclic act which runs from generation to generation. As we learn from our elders so, individuals follow the foot prints of their elders and pass on the violence to their offspring.

2.2. Power and Control

Power and control theory suggests that most of the abusers presents domestic violence to take over the spouse to show their power and control.

2.3. Psychological impact of Domestic Violence

Among sufferers who are still living with their tormentor, high amounts of uneasiness, fear and anxiousness are commonly expressed. Depression is prevalent as victim made ashamed for provoking the abuser to violence. It is reported that 60% of preys meet the diagnostic criteria for melancholy, either during or after ending of the relationship, and have a extremely increased risk of fatality (Barnett, 2001). The most commonly documented psychological effect of domestic violence is Post-Traumatic Stress Disorder (PSTD).

2.4. Physical impact of Domestic Violence

Jones III and Horan (1997) defined that cracked bones, head injury, wounds internal bleeding are keen effects of domestic violence requires immediate medical consideration and hospitalization for persistent physical health conditions. Due to domestic violence victim receives harmful impact on fetus and complications during pregnancy. Not just that, domestic violence can destroy the family life all along. It will result in destroying the life of children involved. The child of a women suffering from domestic violence would become traumatized for life. That child can become an abuser further in life or could fall a victim to it. Another negative affect of domestic violence is the destruction of the relationship of spouses or them ending up in divorce. Many women have to become single moms as they decide to separate from an abusive partner. As a result, they struggle with financial issues and other difficulties they face in bringing up the child all alone. Divorce is not the solution of a problem like domestic violence. It needs to be handled properly. People with such mentality, that makes them abusive or violent needs to change. Only then the problem could be solved. The Global GG index ranked Pakistan 3rd and placed at 151st number out of 153 countries. This research shows the alarmingly high number of domestic violence episodes in our country caused by a number of factors like illiteracy, lack of awareness, false religious beliefs, and patriarchal cultural beliefs. To overcome this global problem, different measures have been taken by different bodies and which are still striving to do their best to develop a world better place to live in.

Only 0.4% females report abusers and 50% victims endure silently. A lot of recommendations have been suggested to halt the practice of domestic abuse. For example, research suggests creating basic changes at four distinct levels; individual, family, community and society. Khan, Ali, and Khuwaja (2009) Given the rise of abuse in covid-19 lockdown the Women active forum (WAF) urged the Sindh government to take strict actions against Domestic Violence. It demanded that complaint cells and crisis centers run by the women development department should be made functional to respond to complaints. National policy on ending violence against women & girls was a policy recently made by the government to handle the abuse. Ministry of Pakistan has launched a helpline 1099 for dealing with domestic violence against females. The WJFC is also a temporary shelter set up by Gujarat Police for women and children. Major researches in Pakistan have been conducted in capital cities; developing cities such as Sialkot have been neglected so far, perhaps because of lack of awareness. Current research will expand the current perspective of the public and make it easier for the reader to understand the gravity of this social issue.

3. Literature Review

Chhabra (2018) found effects of Domestic violence on health of women. Domestic violence, a phenomenon that happens throughout the world silently and is supported patriarchy and misogyny of societies. The literature suggests that domestic violence is a significant cause of psychological as well as physical complications.

Research by Mohan (2020) describes the state of women in corona virus. According to this the rate of domestic violence was increased in lockdown. This time had made the

situation vulnerable. Because of this many people had out of their jobs and became depressed for their income which causes chaos in household and women became the victims of this. Moreover, staying home all the day with no work ultimately turned into more differences in couples and families and the result are awful. Domestic abuse commissioner of England and Wales stated that calls to domestic violence hotline have been increased 65% during this pandemic period and this is only the percentage of who had reported about the abuse but there are also the cases that had not been registered.

In 2019, Sharma et al. found the effects of Domestic violence on mental health of Women in Delhi. It was a community-based study, the background of the study was based on the fact it is a global phenomenon that has serious effects on health and wellbeing of women. The results of the study clearly demonstrated that mental health of women who went through domestic violence was bad as compared to the women who did not experience any such abuse (Sharma, Vatsa, Kalaivani, & Bhardwaj, 2019). In 2017, research was conducted by Rahnavardi et al., which investigates the types and causes of domestic violence (this research took place in Rasht city of Iran) did a cross sectional study and used convenience sampling method for population sampling. The demographic characteristics questionnaire and World Health Organization violence against Women instrument was used on 110 women, most of them being housewives. The participants chosen contained characteristics such as educated, no history of mental illnesses, no addiction to harmful substance and no refractory illnesses like cancer etc. Both of the scales implemented have high validity, with the reliability of the later one being 0.92, 0.89 and 0.88 for physical, psychological and sexual violence respectively. The results were analyzed using SPSS-18 software. The paper talks in detail about the nature of the crime, as it is most commonly experienced by females. The abuse faced is most commonly psychological, physical or sexual in nature. Physical violence most commonly accompanied slapping, kicking, hitting with belts or whips. As for psychological abuse screaming, shouting, disbelieving, divorce threats, limiting relationships etc. were mostly reported by participants. Sexual violence (least common) was in the form of forced sex, unsafe sex practice and avoiding intercourse as a punishment.

Tahir (2017) shows the rising rate of domestic violence in Pakistan with reference to Islamic perspective. In his study he specified six parts explaining the theories, causes, factors and so on. This research is of qualitative nature. However, this theory also includes two other theories; namely 'feminist theories' implying that male dominance and patriarchal system as the main cause and 'ecological model' which gives four causes of DV I.e., perpetrator, society, culture and relationship. As for the causes the research highlights common factors such as male dominance in society, lack of awareness, low socioeconomic status, lack of education, misinterpretations of religious texts, infertility, not having a son, watta satta and the list goes on and on.

The research points out how gender-based violence affects women. Victims are prone to severe mental health issues such as suicidal thoughts, PTSD's, eating disorders, drug abuse etc. Domestic Violence also has sociological and behavioral impacts such as low performance in schools and offices, poor interpersonal relationships, harmful sleeping and eating habits. Gynecological problems are also experienced by the victims. The paper talks in detail about the possible solutions to reduce its prevalence, starting with Islamic teachings. To begin with, identifying women's dignity and honor is the first step following; right decision for selecting spouse, responsibilities, mutual rights, agreement on family related decision. The study discusses the issue of Kari and karo where a female and male are accused of infidelity respectively, and then murdered in the name of honor. Another tradition seen in some areas of Pakistan and Afghanistan is Wani, whereas female child is forcefully married as a punishment of a crime committed by her some male relative. This and other traditions of abusing women are severely condemned in Islam. Although this research gives a new perspective on Domestic Violence it does not give a broader view of the empirical ground it stands upon.

Literature suggests that domestic violence casts devastating impact on physical health and psychological distress of females. Current research aims to explore magnitude of violence and its association with physical health and psychological distress among females in Sialkot.

3.1. Rationale of the Study

Domestic violence is essential to research since it has been demonstrated to have a wide range of impacts and increase the chance of issues. The objective of the current study is to investigate the effect of domestic violence on physical health and psychological distress of females in Sialkot. According to previous findings females who have experienced the domestic violence have poor psychological wellbeing. Results indicate that domestic violence directly influence the physical health and causes psychological distress in victim. There is no recent research in this field in our country. So these findings will be very valuable. This is also beneficial in increasing awareness among friends and family members to help victims of domestic violence.

3.2. Objectives

Present research aims to explore association among magnitude of domestic violence, public perception, and awareness about domain of violence, physical health and psychological distress among females in Sialkot.

3.3. Hypothesis

Based on the literature review and hypothetical perspective following hypothesis were established:

H1: There will be a negative effect of domestic violence on psychological distress of females in Sialkot.

H2: There will be a negative effect of domestic violence on physical health of females in Sialkot.

H3: The most prevalent type of domestic violence would be psychological.

H4: There will be a significant relationship between domestic violence, physical health and psychological distress of females in Sialkot.

H5: Non-working females are bolder in expression of domestic violence by their spouse than working females.

4. Methodology

4.1. Research Design

Cross sectional study design was used in the current study to investigate the magnitude of domestic violence as determinant of physical health and psychological distress of females in Sialkot, Pakistan.

4.2. Participants

Sample of 100 females with an age range of 18-60 years was recruited. Females who were the victims of domestic violence were the population of the study. They belonged to lower, middle and upper socioeconomic status with joint and nuclear family setups.

4.3. Sampling Technique

Purposive sampling is used when the sample size is small and the population share the same characteristics. This type of sampling technique was used when research topics were unique.

Purposive sampling technique was used for the selection of the participants recruited by the researcher; participant judgment was obtained by taking responses from them on the standardized questionnaires. A list of important areas of Sialkot was made and shortlisted areas with increased cases of IPV. After visiting those regions and conducting random house selections, female residents were requested to complete the forms. Along with the purposive random recruitment method, snow ball sampling method was also proved convenient in gathering data. Given the sensitivity of the research question, snowball sampling proved to be helpful, as participants informed about other people who had experiences of DV and could contribute to the cause.

4.4. Measures

4.4.1. Composite Abuse Scale Revised Short Form (CASr-SF)

Scale is a self-report measure, covering multiple areas of IPV. The violence includes physical, verbal and psychological abuse respectively. CAS Revised 16-item version was used for the research instead of the original 31-item scale. This Revised version of the scale was tested with a sample of more than 800 Canadian women and men (Ford-Gilboe et al., 2016).

4.4.2. Reliability and Validity

It was demonstrated that this scale has a reliability that is equal to that of the original scale or even more superior to that of the previous scale. Manuscripts describing the results are still in progress. This scale proves to be of great use in covering the IPV as experienced in the past twelve months or in a present romantic relationship.

4.4.3. Response Format

The scale consists of 14 items each of which has response options. The scale is a Likert type scale that has ranges of answers as in responses; Yes / No, not in the past twelve months (0), once (1), a few times (2), monthly (3), weekly (4), daily/almost daily (5).

4.4.4. Scoring

A total score of the responses is calculated which comprise of the final score. The answers of victims can give us information about what kind of abuse did the victim faced (physical, psychological, verbal or other mentioned in scale) and how much abuse did they face. Victims score high in some areas and low in others, and they have an overall score as well. Higher overall score reflects higher level of abuse. Similarly lower score represents lower level of abuse.

4.4.5. Physical Health Questionnaire

An earlier version of this scale was developed by Spence, Helmreich, and Pred (1987). Since then, it has been revised and used by a number of other researchers many times. The PHQ that we used is a brief and modified form of the original scale developed by Spence et al. (1987). This scale can be used to highlight a number of somatic symptoms like blood pressure, indigestion, nausea, headaches, etc. A number of studies were carried out to check and prove that the PHQ scale is a reliable and valid measure of measuring physical health. And these researches proved the fact that this scale has high reliability and Validity. For PHQ the scoring method is quite straightforward and doesn't involve any manual of scoring. Item 4 was reversed and higher scores on all the items show higher symptoms and ultimately poorer physical health and vice versa. The scaling method is a Likert type scale. Not at all (1), Rarely (2), Once in a while (3), some of the time (4), fairly often (5), often (6), all of the time (7).

4.4.6. Kessler Psychological Distress Scale

Ronald Kessler developed this scale 1992 revised by Egan in 2017. K10 consists on 10 items of emotional states with a five level Likert scale. 0.52 And .89.

5. Results

In order to interpret the data descriptive and inferential statistics were used through SPSS

Table 1: Summary of Socio-demographic Characteristics of the Entire Sample

Variables	f	%
Age group of participants		
20-30	12	21.4
31-40	34	42.9
41-50	16	28.6
51-60	4	7.1
Marital status		
Married	49	87.5
Separated	3	5.4
Divorced	4	7.1
Socio economic status		

Lower middle class	22	39.3
Middle class	25	44.6
Upper middle class	8	14.3
Elite class	1	1.8
Habitat		
Rural	27	48.2
Urban	29	51.8
No. of children		
None	3	5.7
1-5	45	84.9
More than 5	5	9.4
Education level		
Uneducated	20	35.7
Below matriculation	10	17.9
Matriculation	11	19.6
Intermediate and above	15	26.8

Note: N= 100

Figure 1: Explains the Frequency of Responses

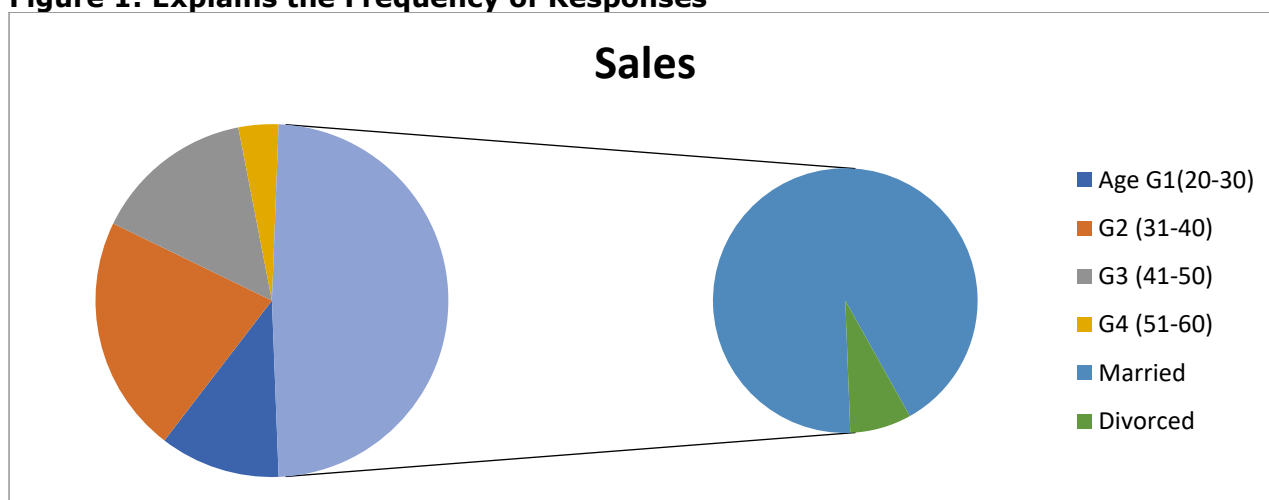


Table 2: Pearson Product Coefficient of Correlation Analysis of Study Variables

Variables	1	2	3
1. Domestic violence (DV)	-	.702**	.350*
2. Physical health		-	
3. Psychological distress			-

**p < 0.01, * p = 0.01* N= 56

Table 2 examines association among domestic violence, physical health and psychological distress among females in Sialkot. Using the default 5%, the p-value which is less than 0.05 shows a significant relationship between constructs. Results indicate high grade positive correlation between magnitude of domestic violence and physical health ($r=.702^{**}$, $p<0.01$) ($M= 60.53$, $SD=12.09$) and moderate positive correlation was observed between domestic Violence and psychological distress ($r=.350$, $p<0.01$), ($M= 70.10$, $SD= 10.05$).

Table 3: Descriptive Statistics and Pearson Product Coefficient of Correlation Analysis of Subscales of CASr-SF in current sample (N=56)

Variables	%	M	1	2	3
Physical abuse	49.5	15.4	-	.703**	.709**
Sexual abuse	43.2	5.1		-	.681**
Psychological abuse	50.5	20.5			-

**p < 0.01

Table 3 explains significant relationship between physical abuse, sexual abuse and psychological abuse. Further analysis indicates that the mean values of all three subscales: physical, sexual and psychological are 15.4, 5.1 and 20.5 respectively, with psychological abuse being the most common form of abuse reported.

Multiple reg. analysis implemented to check association between DV, Physical health and Psychological distress. Results indicates that domestic violence acts as determinant of physical health and PD. $F(2, 207) = 77.226, p < 0.00$ with an R^2 of .407. Hence, a significant relationship exists among DV, PH and PD.

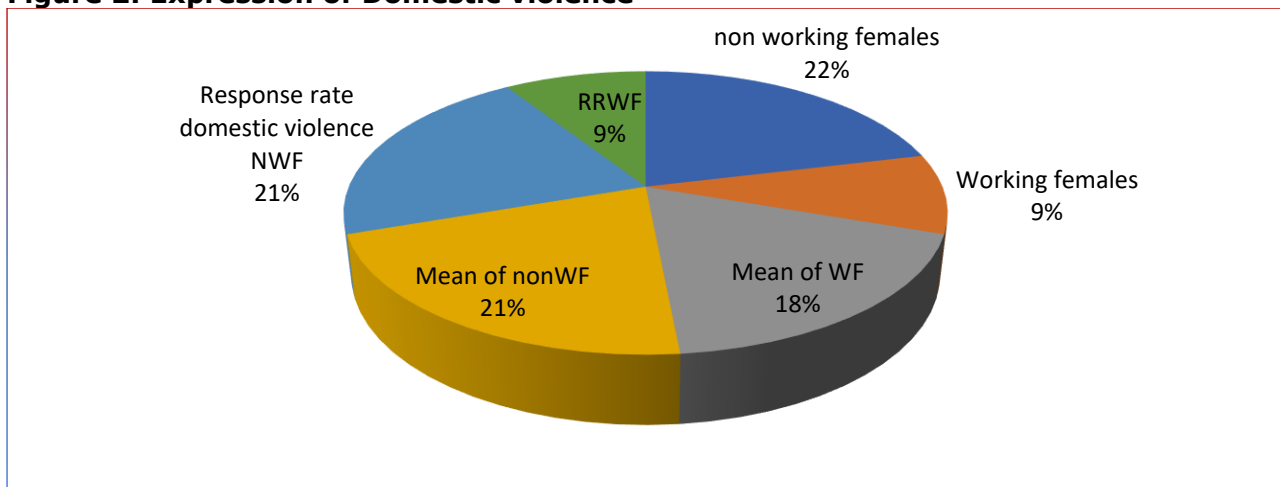
Table 4: Multiple regression analysis summary for domestic violence, physical health and psychological distress among females.(N=100)

Variable	B	95%CL	B	T	P
Constant	77.226	(72.856,81.958)		34.835	.000
Physical health	1.265	(-.818,3.48)	1.265	1.198	.001
Psychological distress	2.365	(276,4.453)	1.059	2.233	.002

Note. AdjR²= .002, (N=200, $\rho = .000$) CL= confidence interval for B

Pie chart elaborates the %age of domestic violence expression by working and non-working females.

Figure 2: Expression of Domestic violence



5.1. Discussion

The results prove that the most prevalent type of DV is psychological among the participants. According to demographics, the frequency of domestic violence is most common in age group 31-40 . It is most common in married women. Domestic violence is also mostly practiced in middle class people with rural habitats. It is mostly observed that married women with 1-5 children are suffering from domestic violence and mostly are uneducated as they don't know their rights. From the above results, we can say that the most common type of DV observed is psychological. In subscales, CAS, the most prevalent abuse is psychological, secondly physical and sexual abuse is least observed. DV has strong positive correlation with low physical health and it has weak positive correlation with high psychological well-being. These hypothesis are well grounded on every note. This research is based on the theoretical framework established by other researchers on this topic like Loxton, Naz and Malik and Torres Garcia.

Bibi et al. (2014) reports that domestic abuse was frequent among married women in Hyderabad, Sindh, Pakistan. As it was hypothesized that DV would have a negative impact on psychological distress it was proven through this research. This claim was also supported by a research in 2018 by Naz and Malik (2018) investigated four types of domestic violence (sexual, economic, psychological, and physical abuse) and their consequences on psychological well-being (PWB) in women in Multan, Sindh, Bahawalpur, Punjab, Pakistan. They discovered a low level of psychological well-being (PWB) in women who had experienced physical and sexual violence; these women had low economic status and poor family support, which was a significant factor in domestic violence (DV); these women developed multiple psychological problems such as post traumatic stress disorder, depression, despair, worthlessness, and low self-esteem. According to the researchers, women who have experienced domestic abuse (DV) have a variety of psychiatric issues.

Torres García, Vega-Hernández, Antón Rubio, and Pérez-Fernández (2021) conducted research in which PTSD with an exception was Considered (another form of PTSD) as CPTSD (complex post-traumatic stress disorder). It Was researched how risk factors like violence, fear of this violence or of other factors, may Lead women to CPTSD and how these risk factors differ among domestic violence survivors Having PTSD or CPTSD. In this study, 162 women who were IPV (intimate partner violence) Survivors were interviewed. The results Of the research showed that CPTSD was more common among IPV survivors in comparison To PTSD. This clearly shows how domestic abuse can affect mental well-being of women, Causing them to develop a severe disorder or aggravate an already existing illness in them. Also, hypothesis 2-3 was also supported by the findings as the most prevalent form of DV came out to be psychological, this was also reported in a report discussed earlier (Idris et al., 2018). There is an extensive literature on the effect of DV on women, Another study on patriarchy and gender-based violence in Pakistan found that Pakistan was regarded as one of the top three hazardous nations for women in the world by the Thomson Reuter Foundation expert poll (Hadi, 2017). This research unequivocally demonstrates that domestic violence (DV) exhibits a moderate correlation with physical health and a strong correlation with psychological distress. All the findings align with the anticipated hypotheses

5.2. Study Implications

Present research carries both theoretical and practical significance. This investigation offers valuable insights into the psychological burdens experienced by females in the context of violence, potentially increasing public awareness. Furthermore, the findings from this study could serve as a foundation for the development of policies by law enforcement agencies aimed at addressing and preventing violence against females in society. Additionally, this study has the potential to serve as a reference point for guiding future research directions.

6. Conclusion

Domestic violence is a violent behavior that is used by one spouse to seize or keep control over an intimate partner. It can occur in any type of relationship. Domestic violence can take the form of actual or threatened physical, sexual, emotional, financial, or psychological acts against another person. The objectives of this study is to explore association among magnitude of domestic violence, public perception, and awareness about domain of violence, physical health and psychological distress among females in Sialkot. Among married females domestic violence is the determinant of physical health ($r=.702^{**}$, $p < 0.01$) and psychological distress ($R= -.340^*$, $p < 0.01$) increase in the magnitude of domestic violence leads to the deterioration of physical health and decreases psychological distress. The current study has theoretical and practical aspects. This study provides insightful information about the psychological difficulties felt by women in the presence of violence, perhaps raising public awareness. Additionally, the results of this study could be used as a basis for law enforcement authorities to draught guidelines attempting to address and prevent violence against women in society. Furthermore, this investigation has the potential to be used as a guide to determine the course of future study.

Domestic violence remains a distressing issue for women in today's technologically advanced world. Despite these advances, research has shown that many working women conceal the domestic violence they endure. Their physical health problems and emotional well-being silently reflect the pain they endure, with their tears telling the true story of the abuse they suffer, including sexual discomfort, miscarriages, forced pregnancies, and more. The cultural taboo that surrounds discussing this devastating issue, often labeled as a "private matter," needs to be shattered.

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