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BRIEF REVIEW

DOMESTIC VIOLENCE AMONG PAKISTANI WOMEN: AN INSIGHT INTO LITERATURE

Azmat J. Khan, Tazeen S. Ali and Ali K. Khuwaja

ABSTRACT

The objectives of this search were to estimate the burden of domestic violence, its contributing factors and strategies based on literature review for the prevention and control of domestic violence. Published literature about domestic violence in Pakistan during the years 1998 to 2008 was analyzed and scrutinized. This article is based on the searched result of 200 articles published in the English language from which finally 13 articles were selected. Search terms included "Violence", "Domestic violence", "Domestic violence in Pakistan" and "Strategies and Recommendations for Prevention of Domestic violence". According to these studies, the intimate partners' violence is reported as in the range of 30% to 79%. In Pakistan, there are some notable factors which make women prone to domestic violence like women's low education, low empowerment, existing misconceptions about Islamic thoughts and traditional norms, misuse of women in the name of honor justifying honor killing, poverty and existence of unjust traditional dowry system in the society. The most common points made by researchers for prevention and control are 1) the need to recognize the domestic violence against women as an important issue 2) enhancement of educational and health facilities for the prevention and control of violence with combined awareness programs by governmental or non-governmental organizations and 3) enactment and promulgation of comprehensive laws to combat this problem. Our work reveals that a significantly large proportion of women suffer with domestic violence and the factors identified are preventable and modifiable to a greater extent. Further research is also needed in this regard.

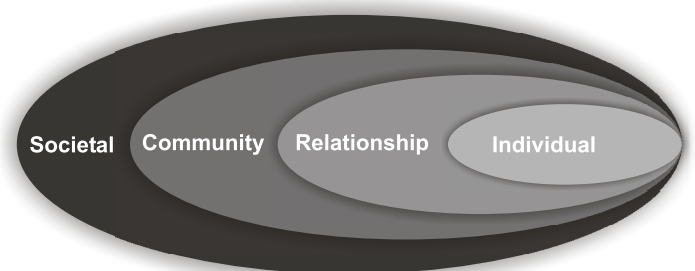
KEY WORDS: Pakistani women, Domestic violence, Contributing factors, Prevention.

INTRODUCTION

Domestic violence (DV) is a serious public health problem in Pakistan. It is a complex pattern of behaviors that may include, in addition to physical acts of violence, sexual and emotional abuse, such as social isolation and financial deprivation.¹ DV is an abuse of power and is the domination, coercion, intimidation and victimization of one person by another by physical, sexual and/ or emotional means within intimate relationships. It can include beating, murder, kidnap, rape, physical assault, and acid throwing. In writing and organizing for this paper, we have used a power wheel and the social-ecological model. (Figure 1). This paper focuses on the types, causes and prevention of DV by integrating the power wheel model at Pakistan level. Literature was reviewed and we found that "The Social-Ecological Model" can be utilized as a framework for prevention and control of

DV. This model interrelates four categories which are affected by DV.² The objectives of this work were to estimate the burden of DV (physical, psychological and sexual), its contributing factors and strategies based on literature review for the prevention and control of DV in Pakistan.

FIGURE I: POWER WHEEL AND SOCIAL-ECOLOGICAL MODEL



METHODS

This paper is an analysis and scrutiny of the literature. We searched 13 databases including CINHALL, Inspires, Pub-Med, Mosby's Nursing Consult, Eastern Mediterranean Health Journal Consult, Bibliography of Medical Literature of Pakistan, Pakistan Journal of

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Medical Sciences, Medline, Up-To-Date, the Cochrane Library, Science Direct, Google and Yahoo. These searched articles were in the English language and published during 1998 - 2008. Search terms included "Violence", "Domestic violence", "Domestic violence in Pakistan", "Domestic violence in women", "Causes of Domestic violence" and "Strategies and Recommendations for Prevention of Domestic Violence". More than 200 articles were retrieved; of these 10 were peer reviewed, and 2 articles were written for general information about DV. Out of all 200 articles, 9 were on DV in Pakistan, attitudes of men toward DV, and strategies and recommendations for prevention of DV.

RESULTS AND DISCUSSION

Burden of domestic violence:

According to the studies included in this review, incidence of intimate partner violence was reported as in the range of 30% to 79%.³⁻⁴ According to a study conducted among married women in Karachi, 34% reported physical abuse, including slapping, pushing, and pulling hair. Main reasons reported included financial constraints (60%) and in-laws (15.3%). Violence was significantly associated with low socio-economic status and low income and educational attainment. Common reported injuries were sore muscles, sprains and head injuries.

Types of domestic violence:

Forms of violence normally discussed in literature are physical, psychological and sexual.⁵⁻⁶ However, there are other types of violence which were not exactly categorized. Peedicayil has asserted that other than being slapped, hit, kicked, etc., women may also undergo abuse which can not be placed into any category.⁷ In addition, another study identified that women having 'secondary infertility' have been reported physically and verbally abused and most of them were also having some psychological problems.⁸ However, McCauley has conceded that "even low-severity violence" is always associated with physical and psychological health problems in women.⁹ Emotional abuse leaves deeper scars and more lasting effects than physical violence. Research proves that the risk of attempting suicide is four times more in victims of DV and they are likely to develop major depression, alcohol and drug dependency, and post-traumatic stress syndromes.⁹ A study published in 2004, queried 100 Pakistani Obstetricians and

Gynaecologists to investigate whether their patients were victims of intimate partner violence. They reported that 30% to 79% of their patients were victims of violence, the range mirroring different socio-economic strata, with the highest prevalence in the lowest social strata. The common types of violence reported also included third-degree burns, acid burns, and honor killings while common injuries observed were bruises, lacerations and vaginal trauma.¹⁰ Moreover, another author has reported over two-thirds of the men had engaged in non-consensual sex with their wives.¹¹

Causes of domestic violence:

There are many causes for DV in Pakistan. Poverty is one of the important causes for DV. Literature supported the fact that there is a male patriarchal culture in Pakistan; usually the men have all the privileges and decision rights. Some of the reported factors which are responsible for DV in Pakistan are: domestic violence against women due to daily conflicts and disagreements between a wife and husband on any decision, family-related problems, and choice preferences, etc. Moreover, the financial instability may force a man to vent his anger on his wife. In Pakistan, every third women is illiterate and hence unaware about her rights.¹² Increased level of education can create awareness and help them to speak up for their rights and bring change in their status. Niaz and Hassan reported that in Pakistan there are some ancient traditions and customs which are still followed. This includes exchange marriages, marriage with Quran, Karo Kari, Honor killing, Dowry etc. Moreover, misinterpretation of the religion is another aspect which makes women more vulnerable to violence.¹³

Prevention and Control of Domestic Violence:

In this work, we identified a number of recommendations for the prevention and control of DV. For the ease of understanding, we categorize them in four levels:

First level is the individual who focuses on how to identify, prevent and stop the violence at the grass root level. This level needs to identify personal data and information as causative factors.

Second level is the family level, where the intimate partner, most of the time is involved in DV, and therefore the relationship with the intimate partner, family and peers is very important. They can influence behavior and help to build their personality and experience.

Third level is the community level in which secondary institutions like schools, colleges, work places and neighborhoods may play a great role either directly or indirectly to a person to be vulnerable to become a victim or influence aggressor of domestic violence.

In the fourth level, society is responsible for promotion or exhibition of the violence. This includes social and cultural norms, customs, country economic, its policies, law and order.

CONCLUSION

Domestic violence is rising globally. In Pakistan because of the sensitivity of the issue, it is most of the time under reported. However, still many women having daily experience of DV are living with its consequences. The most obvious finding from all of this research is that identification of the DV against women is an important issue which needs to be enhanced through educational and health awareness programs, for the prevention and control of violence. Moreover, comprehensive laws and legislation need to be developed, strengthened and implemented. Further research work is also needed in this regard.

REFERENCES

- Hegarty K, Hindmarsh ED, Gilles MT. Domestic violence in Australia: definition, prevalence and nature of presentation in clinical practice. *Med J Aust.* 2000; 173: 363-67.
- The Social- Ecological Model: a framework for Prevention. Available at: http://www.cdc.gov/ncipc/dvp/Social-Ecological-Model_DVP.htm.
- Fikree FF, Bhatti LI. Domestic violence and health of Pakistani women. *Int J Gynecol Obstet.* 1999; 65:195-201.
- Human Rights Watch. Double jeopardy: police abuse of women in Pakistan, USA 1992.
- Fee E, Brown TM, Lazarus J, Theerman P. Domestic violence-medieval and modern. *Am J Public Health.* 2002; 92: 1908.
- Farid M, Saleem S, Karim MS, Hatcher J. Spousal abuse during pregnancy in Karachi, Pakistan. *Int J Gynaecol Obstet.* 2008; 101: 141-45.
- Peedicayil A, Sadowski LS, Jeyaseelan L, Shankar V, Jain D, Suresh S, et al; IndiaSAFE Group. Spousal physical violence against women during pregnancy. *BJOG* 2004; 111: 6827.
- Sami N, Ali TS. Psycho-social consequences of secondary infertility in Karachi. *J Pak Med Assoc.* 2006; 56: 19-22.
- McCauley J, Kern DE, Kolodner K, Derogatis LR, Bass EB. Relation of low-severity violence to women's health. *J Gen Intern Med.* 1998; 13: 687-91.
- Fikree FF, Jafarey SN, Korejo R, Khan A, Durocher JM. Pakistani obstetricians' recognition of and attitude towards domestic violence screening. *Int J Gynaecol Obstet.* 2004; 87: 59-65.
- Shaikh MA. Domestic violence against women--perspective from Pakistan. *J Pak Med Assoc.* 2000; 50: 312-14.
- Price S. Pakistan's rising toll of domestic violence. 2001. Available at: http://news.bbc.co.uk/2/hi/south_asia/1507330.stm.
- Niaz U, Hassan S. Culture and mental health of women in South-East Asia. *World Psychiatry.* 2006; 5: 118-20.